

Board of Directors - Public

SUMMARY REPORT

Meeting Date: 25 January 2023

Agenda Item: 21

Report Title:	Board Assurance Framework (BAF)	
Author(s):	Amber Wild, Head of Corporate Assurance and Deborah Lawrenson, Director of Corporate Governance	
Accountable Director:	Deborah Lawrenson, Director of Corporate Governance	
Other Meetings presented to or previously agreed at:	Committee/Group:	The full BAF for 2022-23 was received at the November Board. Extracts have been received and reviewed by the overseeing Board sub committees and the document received in full at the Audit and Risk Committee in January 2023.
	Date:	<ul style="list-style-type: none"> • 8 November 2022 (PC) • 9 November 2022 (QAC) • 23 November 2022 (Board) • 13 December 2022 DIGG (separated BAF risk shared and commented on via email in advance of (FPC) • 15 December 2022 (FPC) • 10 January 2023 (PC) • 11 January 2023 (QAC) • 12 January 2023 (FPC) • 17 January 2023 (ARC)
Key Points recommendations to or previously agreed at:	The Board Assurance Framework (BAF) risks were presented at People, Quality Assurance and Finance and Performance Committees at their meetings in December and January – the update provided here is from the updates received at committees in January 2023.	

Summary of key points in report

The updated detailed BAF risks overseen by People committee are attached for reference at **appendix 1** and summarised below.

The BAF risks have been updated to reflect changes since the Board last received it and changes are

presented in blue text. Work is ongoing to ensure all actions have dates and owners identified however the majority of these have been identified. Work is also taking place to look at trajectories towards target risk scores for each BAF risk.

PEOPLE COMMITTEE OVERSIGHT

BAF.0013

AIM 3: Effective use of resources

STRATEGIC PRIORITY: Transformation: Changing things that will make a difference

Exec Lead: Executive Director of People

DETAILS: There is a risk that we fail to identify key cultural and work pressures impacting on staff health and wellbeing and delivery of services, leading to ineffective interventions; caused by failure to engage with staff in a meaningful way around concerns raised in the staff and pulse surveys as well as through engagement with, and demonstration of the values; and failure to implement demonstrable changes resulting in low scores on the staff survey (low morale), high sickness absence levels and negative indicators for quality of care.

Summary update

- The current risk score should remain $3 \times 4 = 12$
- Action progress to address gaps in control have been updated Trajectory for achieving the target score has been discussed and it was agreed that this will be completed at the next BAF review following the People Strategy refresh which will support the setting out of milestones.
- Work is ongoing to ensure all actions have dates and owners identified.

The Board are asked to note updates provided.

BAF. 0014

AIM 2: CREATE A GREAT PLACE TO WORK

STRATEGIC PRIORITY: Transformation – Changing things that will make a difference

Exec Lead: Executive Director People

DETAILS: There is a risk of failure to undertake effective workforce planning to support recruiting, attracting and retaining staff to meet current and future needs caused by ineffective workforce planning, insufficiently attractive flexible working offer, competition, limited availability through international recruitment, reluctance of staff to remain in the NHS post Covid19, any national ICS requirements resulting in a negative impact on delivery of our strategic and operational objectives and provision of high-quality safe care.

Summary update

- Committee agreed at its last meeting that:
 - The risk appetite should move to MODERATE from LOW and the proposal is that the Target risk score be 3 (severity) $\times 3$ (likelihood) $= 9$ to fit with target risk requirements for a MODERATE score. Committee approved and Board endorsed in November 2022.
- Action progress to address gaps in control have been updated.
- Trajectory for achieving the target score has been discussed and it was agreed that this will be completed at the next BAF review following the People Strategy refresh which will support the setting out of milestones.
- Work is ongoing to ensure all actions have dates and owners identified.
- Current score to remain $4 \times 4 = 16$

The Board are asked to note updates provided.

BAF. 0020

AIM 2: CREATE A GREAT PLACE TO WORK

STRATEGIC PRIORITY: Transformation – Changing things that will make a difference

Exec Lead: Executive Director of People

DETAILS: There is a risk of failure to enable a paradigm shift in our culture through delivery of the overarching cultural change programme, caused by a lack of engagement in the wide range of leadership activity and opportunities for development provided, inability to adapt and engage to enable organisational change, resulting in failure to improve the culture of the organisation, ineffective leadership development, application of learning, engagement with our values, emergence of closed subcultures and low staff morale which in turn impacts negatively on service quality and service user feedback.

Summary update

- Action progress to address gaps in control have been updated.
- Trajectory for achieving the target score has been discussed and it was agreed that this will be completed at the next BAF review following the People Strategy refresh which will support the setting out of milestones.
- Work is ongoing to ensure all actions have dates and owners identified
- Current risk score should remain 4 x 3 = 12

The Board are asked to note updates provided.

The updated detailed BAF risks overseen by Quality Assurance Committee are attached for reference at **appendix 2** and summarised below:

With the Executive Director of Nursing, Professions and Operations having gone on secondment responsibility has moved to the Executive Director of Nursing and Professions and the Executive Director of Operations for the risks overseen by this committee. They will be undertaking separation of BAF risk 0025 and will be reviewing actions to ensure all have assigned owners and target dates.

Risks have been updated with updates since the last discussion at committee or Board presented in blue text and includes movement of some elements from actions to assurances and controls and identification of further leads and target dates against the majority of actions. Further work on this is being taken forward by the Executive leads.

QUALITY ASSURANCE COMMITTEE OVERSIGHT

BAF.0023

AIM 1: Deliver outstanding care

STRATEGIC PRIORITY: COVID19 – Recovering Effectively

Exec Lead: Salli Midgley (Executive Director of Nursing and Professions)

DETAILS: There is a risk that service users and staff are exposed to an avoidable spread of infectious diseases caused by a failure to consistently maintain appropriate Infection Prevention Control arrangements and safe working practices.

Summary update

- Received HSE inspection looking at sharps safety and been issued with an improvement notice 'consistently applying safe working practices' to ensure staff are protected from needle stick injuries and prevent spread of infection – we have submitted sharps risk assessment and management plan and the inspector was satisfied and not indicating further inspection.
- There is reduced capacity in the lead nurse role but acting up arrangements are in place and additional advice and support is available through ICB
- Whilst we have commenced the winter 2022/23 Flu and Covid vaccination campaign take up has slowed down resulting in some slippage.

- The risk rating is not proposed to change

The QAC approved the changed risk description. **The Board are asked to endorse this change** and note the updates provided.

BAF.0024

AIM 1: Deliver outstanding care

STRATEGIC PRIORITY: COVID19 – Recovering Effectively

Exec Lead: Salli Midgley (Executive Director of Nursing and Professions) and Mike Hunter (Medical Director)

DETAILS: There is a risk of failure to anticipate issues with, and achieve, maintain and evidence compliance with fundamental standards of care, caused by capacity and capability issues, cultural challenges, high use of agency and vacancy in some teams, use of out of area placements, lead in time for major estate changes, resulting in avoidable harm or negative impact on service user outcomes and experience, staff wellbeing, reputation, future sustainability of particular services which could result in regulatory action.

Summary update

- Ownership of this risk is shared by the Director of Nursing and Professions and the Medical Director as SRO for 'Back to Good'
- Back to Good – 10 improvement actions are currently in exception
- Work is in progress to improve workforce data and is a priority area for the Executive Director of People
- No proposed change to risk scores

The Board are asked to note the updates provided.

BAF.0025

AIM 1: Deliver outstanding care

STRATEGIC PRIORITY: CQC Continuous Improvement and Transformation - Changing things that will make a difference

Exec Lead: Salli Midgley (Executive Director of Nursing and Professions) and Neil Robertson (Executive Director of Operations)

DETAILS: There is a risk of failure to effectively deliver essential environmental improvements including the reduction of ligature anchor points in inpatient settings (the therapeutics environment programme) at the required pace caused by difficulty in accessing capital funds required, the revenue requirements of the programme, supply chain issues (people and materials), and capacity of skills staff to deliver works to timeframe required resulting in more restrictive care and a poor staff and service user experience and unacceptable service user safety risks

Summary update

- Committee agreed that there should be a separation of the risk into one around Ligature anchor points (LAP) for which the appetite should be LOW and Therapeutic environments for which the appetite should be MODERATE. This is to be taken forward. Committee agreed that the current and target risk score should be reviewed following the separation of these risks. This work is being taken forward by the new Executive directors for reporting when the BAF is next received at the committee
- The current score 4 x 4 = 16 is unchanged.

The Board are asked to note updates provided

BAF: 0029

AIM 1: Deliver outstanding care

STRATEGIC PRIORITY: COVID19 – Recovering Effectively and Transformation: Changing things that will make a difference

Exec Lead: Neil Robertson (Executive Director of Operations) and Salli Midgley (Executive Director of Nursing and Professions)

DETAILS: There is a risk of a delay in people accessing the right community care at the right time caused by issues with models of care, contractual issues and the impact of practice changes during Covid resulting in poor experience of care and potential harm to service users

Summary update

- No proposed change to risk scores
- Additional strategic priority added – Transformation

The Board are asked to note the updates provided.

AIM 4 - ENSURE SERVICES ARE INCLUSIVE

STRATEGIC OBJECTIVE: Transformation: Changing things that will make a difference and Partnership Working (PLACE (equality) addressing deprivation, Provider Alliance (forensic and specialist services) ICS and University (improving outcome measures)

RISK REF: No specific risks identified at this time

Cross References to risks which cover inclusivity and the ones relevant to this committee are highlighted below:

- **Aim 1 - Deliver Outstanding care BAF risks 0023, 0024, 0025, 0029**
- Aim 2 - Create Great Place to Work BAF risks 0013,0014,0020
- Aim 3 - Effective Use of Resources BAF risks 0027

The updated detailed BAF risks overseen by Finance and Performance Committee are attached for reference at **appendix 3** and summarised below:

The BAF risks have been updated to reflect changes since the committee last received it. This includes ensuring all actions have dates and owners identified.

As the Board is aware work was underway to separate out BAF 0021 into digital and cyber these are numbered 0021A and 0021B respectively. The separated risks have been received for comment at Data and Information Governance Group (DIGG). The FPC approved new new risk titles, controls assurances and actions. **The Board are asked to endorse this change.**

Below is a summary of the BAF risks overseen by Finance and Performance committee and key updates since last discussed at the committee this includes risk appetite references and arrows indicating movement since the risks were last discussed at the committee following discussion at Board.

FINANCE AND PERFORMANCE COMMITTEE OVERSIGHT

BAF.0021A and BAF 0021B

AIM 3: Effective Use of Resources

STRATEGIC PRIORITY: Transformation: Changing things that will make a difference

Exec Lead: Phillip Easthope

Risk appetite:

- Digital solutions – MODERATE (BAF 0021A)
- Cyber security – LOW (BAF 0021B)

Risk movement since last discussed at committee - ↔

DETAILS:

Risk description BAF 0021A - There is a risk of failure to ensure digital systems are in place to meet current and future business needs by failing to effectively address inadequate legacy systems and technology caused by complex historic system issues requiring on-going maintenance, inadequate system monitoring, testing and maintenance, ~~failure to address cyber security weaknesses~~, delays in procurement and roll out of new systems resulting in negative impact on patient safety and clinical effectiveness due to loss of access to key systems and processes and potential increase in cyber security and data protection incidents.

Risk description BAF 0021B – There is a risk that adequate arrangements are not in place to sufficiently mitigate increased cyber security and data protection incidents. This has been compounded by low Information Governance mandatory training levels across the Trust, unawareness of Phishing attacks as well as legacy core systems that may not meet current security standards and so remain vulnerable to cyber-attack. An attack may compromise or disable key systems and prevent their operation until we either have confirmation that is safe to do so following the application of software security patches or alternatively the system in its entirety is no longer deemed fit for purpose and removed from active service. **The Finance and Performance Committee and the Audit and Risk Committee have agreed oversight of this risk should move to the Audit and Risk Committee.**

Summary update

- The committee agreed previously that the risks should be separated out into two BAF risks one for digital solutions with a risk appetite of MODERATE and to one for Cybersecurity with a LOW risk appetite – this separation has taken place following discussion with DIGG and are **presented for approval.**
- Residual and target scores
 - BAF 0021A
Residual score: severity 4 x likelihood 3 =12; Target score: severity 1 x likelihood 3 = 3
 - BAF 0021B
Residual score severity 4 x likelihood 3 =12; Target score: severity 4 x likelihood 2 =8
- As noted previously sources of assurance and actions are unlikely to change until Q1/Q2 2022/23 on the retirement of insight
- In our next review meeting we will look at the separated risks and at the trajectory for moving to target risk scores

The Board are asked to note updates provided and confirm the move of BAF 0021B to Audit and Risk Committee.

BAF.0022

AIM3: Effective Use of Resources

STRATEGIC PRIORITY: Transformation: Changing things that will make a difference

Exec Lead: Phillip Easthope

Risk appetite: LOW

Risk movement since last discussed at committee - ↔

DETAILS: There is a risk that we fail to deliver the break-even position agreed for 2022/23 caused by factors including non-delivery of the financial plan or CIP targets and increased cost pressures resulting in a threat to both our financial sustainability and delivery of our statutory financial duties.

Summary update

- As noted previously the risk will be kept under close review noting it is possible if the position worsens that the residual risk score will rise, given there is increasing risk in respect of delivery of the Cost Improvement Plans which are not as progressed as they need to be and therefore progress status has moved to 'some slippage'
- Work is taking place to refine detail around recurrent/non-recurrent schemes in budget lines – this is being taken forward in Q4 – likelihood scores will be reconsidered at the review in February/March to consider if there is any movement from actions to controls.
- No changes proposed to Residual risk or target scores at this time

The Board are asked to note updates provided.

BAF.0026

AIM 3: Effective Use of Resources

STRATEGIC PRIORITY: Transformation: Changing things that will make a difference

Exec Lead: Pat Keeling

Risk appetite:

Risk movement since last discussed at committee - ↔

DETAILS: There is a risk of slippage or failure in projects comprising our transformation plans caused by factors including non-delivery of targets by milestones, unanticipated costs arising or lack of sufficient capacity to deliver within the timeframes agreed or availability of capital funds resulting in service quality and safety being compromised by the non-delivery of key strategic projects.

Summary update

- Actions updated including owners and dates where available
- No changes proposed to Residual risk or target scores at this time to remain 4 x 3 = 12

The Board are asked to note updates provided.

BAF: 0027

AIM 3: Effective Use of Resources

STRATEGIC PRIORITY: Transformation: Changing things that will make a difference

Exec Lead: Pat Keeling

Risk appetite: MODERATE

Risk movement since last discussed at committee - ↔

DETAILS: There is a risk of failure to engage effectively with system partners as new system arrangements are developed caused by non-participation in partnership forums, capacity issues (focus on Trust), difficulty in meeting increased requirement to provide evidence/data potentially at pace and volume, lack of clarity around governance and decision making arrangements resulting in poorer quality of services, missed opportunities to participate or lead on elements of system change and potential increase in costs

Summary update

- As noted previously
 - we may start seeing changes because ICB has been formally set up since 1 July 2022. There is national guidance on how ICB and ICP will develop their strategies and plans by May 2023.
 - additional BAF risks will need to be added to reflect system BAF risks when developed and we will in turn have to escalated Risk to those BAFs where appropriate
- The stakeholder engagement map has been updated and shared at December board.
- Actions identified as closed at the Board are indicated
- Actions have been updated and owners and dates identified where available.
- No changes proposed to Residual risk or target scores at this time to remain 3 x 3 = 9

The Board are asked to note the updates provided.

AIM 4 - ENSURE SERVICES ARE INCLUSIVE

STRATEGIC PRIORITY: Transformation: Changing things that will make a difference and Partnership Working (PLACE (equality) addressing deprivation, Provider Alliance (forensic and specialist services) ICS and University (improving outcome measures)

RISK REF: No specific risks identified at this time

Cross References to risks which cover inclusivity and the ones relevant to this committee are highlighted below:

- Aim 1 - Deliver Outstanding care BAF risks 0023, 0024, 0025, 0029
- Aim 2 - Create Great Place to Work BAF risks 0013,0014,0020
- Aim 3 - Effective Use of Resources BAF risks 0027

Recommendation for the Board/Committee to consider:

Consider for Action		Approval	X	Assurance	X	Information	
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The Board is asked to receive and approve the updated Board Assurance Framework (BAF) and any specific amendments noted - following discussions at the board sub committees.

Please identify which strategic priorities will be impacted by this report:

Covid-19 Recovering Effectively	Yes	X	No
CQC Getting Back to Good Continuous Improvement	Yes	X	No
Transformation – Changing things that will make a difference	Yes	X	No
Partnerships – working together to make a bigger impact	Yes	X	No

Is this report relevant to compliance with any key standards ? State specific standard

Care Quality Commission Fundamental Standards	Yes	X	No	“Systems and processes must be established to ensure compliance with the fundamental standards” “Systems and processes must be established to ensure compliance with the fundamental standards” See individual BAF risks for detail.
Data Security and Protection Governance Toolkit	Yes	X	No	
Any other specific standard	Yes	X	No	

Have these areas been considered ? YES/NO

Service User and Carer Safety and Experience	Yes	X	No	If Yes, what are the implications or the impact? If no, please explain why Specific detail is covered within the BAF risks
Financial (revenue & capital)	Yes	X	No	
Organisational Development/Workforce	Yes	X	No	

Equality, Diversity & Inclusion	Yes	X	No		
Legal	Yes	X	No		
Environmental Sustainability	Yes	X	No		

Board Assurance Framework

Section 1: Analysis and supporting detail

BAF Snapshot

- 1.1 Risks are ordered from highest to lowest, where the gulf between current risk rating and target risk rating the next denominator where scores are equal.

The BAF is a key aspect of good governance in all organisations and a properly functioning BAF provides Board members with an understanding of the principal risks to achieving its strategic objectives. It also provides assurance regarding controls in place or actions being taken to mitigate risks to an acceptable level within the Board's risk appetite.

The BAF is dynamic document and enables risks to evolve to reflect changing external and internal environments. As such, it is expected that some risks will close over the course of a year once controlled to an acceptable level, or risks may change to reflect emerging issues and priorities.

- 1.2 The Risk Appetite was most recently reviewed at the Board in its meeting in August 2022 with follow up discussions then taking place at the board sub committees.

When discussing BAF risks the committees are asked to consider their BAF risk scores alongside the other sources of information presented.

Below is the snapshot of risks overseen at each board sub-committee starting with those received at People Committee. Arrows to showing movement since the risks were last discussed are included.

Current Risk Score			Target Risk Score require discussion		
Severity	Likelihood	Score	Severity	Likelihood	Score
BAF0014: There is a risk of failure to undertake effective workforce planning to support recruiting, attracting and retaining staff to meet current and future needs caused by ineffective workforce planning, insufficiently attractive flexible working offer, competition, limited availability through international recruitment, reluctance of staff to remain in the NHS post Covid19, any national ICS requirements resulting in a negative impact on delivery of our strategic and operational objectives and provision of high-quality safe care.					
4	4	16 ↔	3	3	↑
BAF0020: There is a risk of failure to enable a paradigm shift in our culture through delivery of the overarching cultural change programme, caused by a lack of engagement in the wide range of leadership activity and opportunities for development provided, inability to adapt and engage to enable organisational change, resulting in failure to improve the culture of the organisation, ineffective leadership development, application of learning, engagement with our values, emergence of closed subcultures and low staff morale which in turn impacts negatively on service quality and service user feedback.					
4	3	12 ↔	3	3	↑
BAF0013: There is a risk that we fail to identify key cultural and work pressures impacting on staff					

health and wellbeing and delivery of services, leading to ineffective interventions; caused by failure to engage with staff in a meaningful way around concerns raised in the staff and pulse surveys as well as through engagement with, and demonstration of the values; and failure to implement demonstrable changes resulting in low scores on the staff survey (low morale), high sickness absence levels and negative indicators for quality of care.

3	4	12 ↔	3	2	↑
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Below is the snapshot of risks overseen at Quality Assurance Committee. Arrows to show movement since the last discussion.

Current Risk Score			Target Risk Score require discussion		
Severity	Likelihood	Score	Severity	Likelihood	Score
BAF.0023 There is a risk of failure to consistently maintain appropriate Infection Prevention Control arrangements to ensure protection of service users and staff which may result in avoidable spread of infectious diseases.					
4	3	12 ↔	3	3	9
BAF. 0024 - There is a risk of failure to anticipate issues with, and achieve, maintain and evidence compliance with fundamental standards of care, caused by capacity and capability issues, cultural challenges, high use of agency and vacancy in some teams, use of out of area placements, lead in time for major estate changes, resulting in avoidable harm or negative impact on service user outcomes and experience, staff wellbeing, reputation, future sustainability of particular services <i>which could result in regulatory action.</i>					
4	3	12 ↔	4	2	8
BAF.0025 - There is a risk of failure to effectively deliver essential environmental improvements including the reduction of ligature anchor points in inpatient settings (the therapeutics environment programme) at the required pace caused by difficulty in accessing capital funds required, the revenue requirements of the programme, supply chain issues (people and materials), and capacity of skills staff to deliver works to timeframe required resulting in more restrictive care and a poor staff and service user experience and unacceptable service user safety risks - This risk is in the process of being separated into two					
4	4	16 ↔	3	2	6
BAF.0029 - There is a risk of a delay in people accessing the right community care at the right time caused by issues with models of care, contractual issues and the impact of practice changes during Covid resulting in poor experience of care and potential harm to service users					
4	4	16 ↔	4	2	8

Below is the snapshot of risks overseen at Finance and Performance Committee. Arrows to show movement since the last discussion. BAF risk 0021 has been separated into two risks A and B – it is proposed risk 0021B is specifically overseen by Audit and Risk Committee.

Current Risk Score			Target Risk Score		
Severity	Likelihood	Score	Severity	Likelihood	Score

BAF0022: there is a risk that we fail to deliver the break-even position agreed for 2022/2023 caused by factors including non-delivery of the financial plan or CIP targets and increased cost pressures resulting in a threat to both our financial sustainability and delivery of our statutory financial duties.					
5	3	15 ↔	4	2	8 ↔
BAF 0021 A: there is a risk of failure to ensure digital systems are in place to meet current and future business needs by failing to effectively address inadequate legacy systems and technology caused by complex historic system issues requiring on-going maintenance, inadequate system monitoring, testing and maintenance, delays in procurement and roll out of new systems resulting in negative impact on patient safety and clinical effectiveness due to loss of access to key systems and processes and potential increase in cyber security and data protection incidents					
4	3	12 ↔	1	3	3 ↔
BAF 0021 B: There is a risk that adequate arrangements are not in place to sufficiently mitigate increased cyber security and data protection incidents. This has been compounded by low Information Governance mandatory training levels across the Trust, unawareness of Phishing attacks as well as legacy core systems that may not meet current security standards and so remain vulnerable to cyber-attack. An attack may compromise or disable key systems and prevent their operation until we either have confirmation that is safe to do so following the application of software security patches or alternatively the system in its entirety is no longer deemed fit for purpose and removed from active service.					
4	3	12 ↔	4	2	8 ↔
BAF0027: there is a risk of failure to engage effectively with system partners as new system arrangements are developed caused by non-participation in partnership forums, capacity issues (focus on Trust), difficulty in meeting increased requirements to provide evidence/data potentially at pace and volume, lack of clarity around governance and decision-making arrangements resulting in poorer quality of services, missed opportunities to participate or lead on elements of system change and potential increase in costs					
4	3	12 ↔	4	3	12 ↔
BAF0026: there is a risk of slippage or failure in projects comprising our transformation plans caused by factors including non-delivery of targets by milestones, unanticipated costs arising or lack of sufficient capacity to deliver within the timeframes agreed or availability of capital funds resulting in service quality and safety being compromised by the non-delivery of key strategic projects					
3	3	9 ↔	3	2	6 ↔

The committee is asked to consider their BAF risk scores alongside the other sources of information presented.

Section 2: Risks

- 2.1 Failure to properly review the BAF could result in Board or its committees not being fully sighted on key risks to the delivery of our strategic aims and objectives.
- 2.2 There are no specific corporate risks around usage of the BAF.

Section 3: Assurance

- 3.1 The information provided within the BAF is 'owned' by Executive Directors and reviewed/revise by colleagues within their directorates under their leadership.
- 3.2 For the most effective assurance, information provided within the BAF should be considered alongside other sources of information provided to Board and its committees, including other reports received, discussions held and observations at visits. This triangulation will ensure that the BAF represents the assurance that Board and Committee members believe they have received.

Section 4: Implications

Strategic Aims and Board Assurance Framework

- 4.1 All apply

Equalities, diversity and inclusion

- 4.2 See People Committee BAF risks

Culture and People

4.3 See People Committee BAF risks

Integration and system thinking

4.4 See Finance and Performance Committee BAF risks

Financial

4.5 See Finance and Performance Committee BAF risks

Compliance - Legal/Regulatory

4.6 See Quality Assurance Committee and Finance and Performance Committee BAF risks

Environmental Sustainability

4.7 See Finance and Performance Committee BAF risks

Section 5: List of Appendices – These are available on the Board member IBABs portal and otherwise on request

Appendix 1 BAF extracts received at People Committee January 2023

Appendix 2 BAF extracts received at Quality Assurance Committee January 2023

Appendix 3 BAF extracts received at Finance and Performance Committee January 2023