

<b>Risk number:</b>	1964	<b>Lead Director:</b>	Debra Gilderdale	<b>Review Date:</b>	31/01/2018
<b>Monitoring Group:</b>	QSC				
<b>Initial Risk Rating:</b>	12	<b>Current Risk Rating:</b>	12	<b>Residual Risk Rating:</b>	9
<p><b>Strategic Objective:</b> Quality &amp; Workforce</p> <p>To provide high quality, evidence-based services delivered by a diverse, motivated and engaged workforce</p> <p><b>Risk description:</b></p> <p>If demand exceeds capacity. Then service quality, safety and performance could deteriorate. Linked to CRR 1819, 1825 &amp; 1826.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- IPR &amp; Committee dashboards</li> <li>- BU performance meetings</li> <li>- Directors' &amp; Transformation meetings</li> <li>- Risk Management Framework</li> </ul>		<ul style="list-style-type: none"> <li>- Recent IPR reports to Board (Q1)</li> <li>- Q&amp;SC / MHLC reports and BU presentations (Q1)</li> <li>- Reports to Outstanding Care Steering Group (Q1)</li> <li>- Available through staff intranet</li> </ul>			
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
Impact of LA budget - potential mitigation but no local system agreement to LA share of £2bn social care		1 Possible F2E meeting on population demand		F2E programme still to be agreed Date Entered : 17/01/2018 16:54 Entered By : Andy McElligott	
		2 Corporate risk 1819 closed as all actions complete. EMT discussion to take place on 31st October 2017 to agree the archiving of the risk. Demand issues now being managed through specific business units			

<b>Risk number:</b>	1965	<b>Lead Director:</b>	Liz Romaniak	<b>Review Date:</b>	31/01/2018
<b>Monitoring Group:</b>	Trust Board				
<b>Initial Risk Rating:</b>	12	<b>Current Risk Rating:</b>	8	<b>Residual Risk Rating:</b>	4
<p><b>Strategic Objective:</b> Intergration &amp; Partnerships</p> <p>To be influential in the development of new models of care locally and more widely across the West Yorkshire and Harrogate STP</p> <p><b>Risk description:</b></p> <p>If partners (including BDCFT) fail to develop a robust and sustainable ACS across AWC. Then there will not be the system-wide change needed to manage resources vs demand. Linked to CRR 1824.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- ICB &amp; Accountable Care Boards established and Provider Alliances operating with revised final GP federation membership</li> </ul>		<ul style="list-style-type: none"> <li>- Regular updates through CEO reports</li> <li>- Care model development groups established for three communities</li> <li>- Provider alliance monthly meetings</li> </ul>		<ul style="list-style-type: none"> <li>- MOU and alliance agreement not yet finalised</li> <li>- Unclear Local Authority budget scope</li> </ul>	
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
		<p>2 AWC provider alliance group targeting agreement of a draft MOU</p>		<p>New GP Federation members now attending Alliance meetings and discussions being led by CEO Yordales to agree a single 'voice' for the 3 organisations. Externally facilitated Alliance discussion 17 January 18 to consider draft MOU requirements. Calls held in advance by facilitator in December with Alliance members.</p> <p>Date Entered : 23/12/2017 09:30 Entered By : Liz Romaniak</p>	
		<p>3 AWC care model development groups agreeing key priority areas for action</p>		<p>3 community groups fed back progress on actions to Dec Alliance. Reporting to Feb accountable care board Feb 18. Over arching community group to ensure consistency of approach and focus on high impact areas.</p> <p>Date Entered : 23/12/2017 09:33 Entered By : Liz Romaniak</p>	

<b>Risk number:</b>	1973	<b>Lead Director:</b>	Andy McElligott	<b>Review Date:</b>	01/02/2018
<b>Monitoring Group:</b>	QSC				
<b>Initial Risk Rating:</b>	8	<b>Current Risk Rating:</b>	8	<b>Residual Risk Rating:</b>	4
<p><b>Strategic Objective:</b> Quality &amp; Workforce</p> <p>To provide high quality, evidence-based services delivered by a diverse, motivated and engaged workforce</p> <p><b>Risk description:</b></p> <p>If regulatory standards are not met. We may experience intervention from regulators or damage to our reputation. Linked to CRR 1819 &amp; 1820.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- CQC rating of Good</li> <li>- Quality strategy</li> <li>- Q&amp;SC &amp; MHLC reports</li> <li>- Q&amp;S walkabouts</li> </ul>		<ul style="list-style-type: none"> <li>- Regular meetings with commissioners and regulators</li> <li>- Outstanding Care Board papers/review of well-led framework</li> <li>- Compliance reports on CQC MHA inspections</li> </ul>			
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
Result of new CQC well-led inspection - once completed (W4 2017/18)		1 Preparation for CQC inspection & regular Board updates (ongoing)		<p>2017 CQC inspection complete. Draft reported expected early 2018. Outstanding Care Steering Group established and will become permanent. Now moving to proactive stance with regard to future inspections.</p> <p>Date Entered : 27/11/2017 10:39 Entered By : Andy McElligott</p>	

<b>Risk number:</b>	1974	<b>Lead Director:</b>	Debra Gilderdale	<b>Review Date:</b>	31/01/2018
<b>Monitoring Group:</b>	QSC				
<b>Initial Risk Rating:</b>	9	<b>Current Risk Rating:</b>	9	<b>Residual Risk Rating:</b>	9
<p><b>Strategic Objective:</b> Quality &amp; Workforce</p> <p>To provide high quality, evidence-based services delivered by a diverse, motivated and engaged workforce</p> <p><b>Risk description:</b></p> <p>If we do not provide a positive service user/carer experience. Then we may not be responsive to local communities or commissioners' needs. Linked to CRR 1819.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- You and Your Care Strategy</li> <li>- Existing service user governance &amp; involvement groups</li> </ul>		<ul style="list-style-type: none"> <li>- Patient experience report to Q&amp;SC (Feb 2017)</li> <li>- Updates from service users at key governance meetings</li> </ul>			
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
		2 Engagement exercise on revised quality goals		<p>Quarterly briefings with staff have been completed where draft Quality Goals were discussed and the results are being used to inform final proposals. A refresh of the Trust Wide Involvement Group will help improve wider feedback mechanisms from service users and carers</p> <p>Date Entered : 17/01/2018 15:33 Entered By : Greg Sawiuk</p>	
Overreliance of the FFT as a feedback mechanism		3 To be discussed at the You and Your Care Strategic reference Group on 8th December 2017.			

<b>Risk number:</b>	1975	<b>Lead Director:</b>	Sandra Knight	<b>Review Date:</b>	28/02/2018
<b>Monitoring Group:</b>	FBIC				
<b>Initial Risk Rating:</b>	16	<b>Current Risk Rating:</b>	16	<b>Residual Risk Rating:</b>	12
<p><b>Strategic Objective:</b> Quality &amp; Workforce</p> <p>To provide high quality, evidence-based services delivered by a diverse, motivated and engaged workforce</p> <p><b>Risk description:</b></p> <p>If we fail to recruit and retain a diverse workforce. Then the quality of our services may deteriorate and our agency costs increase. Linked to CRR 1831.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- Workforce strategy</li> <li>- BME employment strategy</li> <li>- Workforce data in IPR &amp; FBIC dashboard</li> </ul>		<ul style="list-style-type: none"> <li>- Committee report to FBIC (April 2017)</li> <li>- BME strategy paper to Board (June 2017)</li> </ul>		<ul style="list-style-type: none"> <li>- The link between the Workforce Transformation Steering Group responsible for monitoring progress of actions and EMT requires strengthening.</li> </ul>	
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
<ul style="list-style-type: none"> <li>- Progress on delivering representative workforce target by 2020</li> </ul>		<p>1 Workforce strategy update</p>		<p>Organisation Strategy being developed early 2018, Workforce Strategy refreshed will be linked to supporting the priorities and implications set out in the document</p> <p>Date Entered : 14/12/2017 10:07 Entered By : Sandra Knight</p>	
<ul style="list-style-type: none"> <li>- Deterioration in staff engagement scores in 2016 staff survey</li> </ul>		<p>2 EMT discussion on re-focusing BME employment strategy</p>		<p>Paper now scheduled to go to January Trust Board. Draft to go to EMT in December 2017</p> <p>Date Entered : 14/12/2017 10:05 Entered By : Sandra Knight</p>	

<b>Risk number:</b>	1976	<b>Lead Director:</b>	Sandra Knight	<b>Review Date:</b>	28/02/2018
<b>Monitoring Group:</b>	FBIC				
<b>Initial Risk Rating:</b>	12	<b>Current Risk Rating:</b>	12	<b>Residual Risk Rating:</b>	8
<p><b>Strategic Objective:</b> Quality &amp; Workforce</p> <p>To provide high quality, evidence-based services delivered by a diverse, motivated and engaged workforce</p> <p><b>Risk description:</b></p> <p>If we do not develop an engaged and motivated workforce. Then the quality of our service may deteriorate. Linked to CRR 1831.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- Annual Staff Survey results &amp; Board paper</li> <li>- Workforce Strategy</li> <li>- Staff engagement plan</li> </ul>		<ul style="list-style-type: none"> <li>- Results of Q1 &amp; Q2 EMT briefings</li> </ul>		<ul style="list-style-type: none"> <li>- Business Unit monthly performance meetings do not currently encompass progress of staff survey actions.</li> </ul>	
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
		<p>2 Staff Survey results 2017 Board paper</p>		<p>Board paper reporting on progress on the 2016 Staff Survey results went to November 2017 Trust Board identifying actions to improve future monitoring via BUMPs and implications for the 2017 survey.</p> <p>Date Entered : 14/12/2017 10:09 Entered By : Sandra Knight</p>	

<b>Risk number:</b>	1977	<b>Lead Director:</b>	Sandra Knight	<b>Review Date:</b>	28/02/2018
<b>Monitoring Group:</b>	FBIC				
<b>Initial Risk Rating:</b>	9	<b>Current Risk Rating:</b>	9	<b>Residual Risk Rating:</b>	8
<p><b>Strategic Objective:</b> Quality &amp; Workforce</p> <p>To provide high quality, evidence-based services delivered by a diverse, motivated and engaged workforce</p> <p><b>Risk description:</b></p> <p>If we fail to develop an innovative learning culture for staff. Then we may not exploit new opportunities that emerge. Linked to CRR 1830.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- iCare programme introduced</li> <li>- IPR policy in place</li> <li>- Quality and learning network</li> <li>- Worksmart strategy</li> </ul>		<ul style="list-style-type: none"> <li>- FBIC reports (Q1)</li> <li>- Recognition through regional awards/YASA</li> <li>- EMT paper on crowdsourcing</li> </ul>			
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
<ul style="list-style-type: none"> <li>- Formal governance arrangements for iCare and crowd sourcing in development</li> </ul>		<p>1 Business case on option for crowdsourcing</p>		<p>Business case approved by EMT and tender process occurring, submissions received from 3 Crowdsourcing providers. Selection will be made by end December 2017</p> <p>Date Entered : 14/12/2017 10:12 Entered By : Sandra Knight</p>	

<b>Risk number:</b>	1978	<b>Lead Director:</b>	Nicola Lees	<b>Review Date:</b>	31/01/2018
<b>Monitoring Group:</b>	Trust Board				
<b>Initial Risk Rating:</b>	12	<b>Current Risk Rating:</b>	12	<b>Residual Risk Rating:</b>	12
<p><b>Strategic Objective:</b> Intergration &amp; Partnerships</p> <p>To be influential in the development of new models of care locally and more widely across the West Yorkshire and Harrogate STP</p> <p><b>Risk description:</b></p> <p>If partners (including BDCFT) fail to deliver a robust West Yorkshire and Harrogate STP. Then there could be financial and quality financial implications for the wider health economy. Linked to CRR 1824.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- Approved STP Plan</li> <li>- STP Steering Group in place</li> <li>- PMO and lead Director in place</li> <li>- NHSE &amp; NHSI part of governance arrangements</li> </ul>		<ul style="list-style-type: none"> <li>- Regular updates through CEO reports (Q1)</li> </ul>			
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
<ul style="list-style-type: none"> <li>- Committee in Common (CIC) arrangements for 3 WY FTs to be established</li> </ul>		<ul style="list-style-type: none"> <li>1 Governance discussions being arranged with report back to STP steering group/FT Boards</li> </ul>		<p>Paper to October board outlining timescale for development of a CIC and an MOU for west YH.</p> <p>Date Entered : 20/10/2017 10:38 Entered By : Greg Sawiuk</p>	

<b>Risk number:</b>	1979	<b>Lead Director:</b>	Nicola Lees	<b>Review Date:</b>	04/03/2018
<b>Monitoring Group:</b>	Trust Board				
<b>Initial Risk Rating:</b>	12	<b>Current Risk Rating:</b>	12	<b>Residual Risk Rating:</b>	12
<p><b>Strategic Objective:</b> Intergration &amp; Partnerships</p> <p>To be influential in the development of new models of care locally and more widely across the West Yorkshire and Harrogate STP</p> <p><b>Risk description:</b></p> <p>If partners (including BDCFT) fail to delivery a robust Bradford and Craven Yorkshire STP. Then there could be financial and quality implications for the local health economy. Linked to CRR 1824.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- ICB structure in place - active engagement by Executive Directors</li> <li>- Accountable care programme boards in place</li> <li>- Regular DoF's meeting in place</li> </ul>		<ul style="list-style-type: none"> <li>- Regular updates through CEO reports (Q1)</li> <li>- Regular updates through ICB</li> <li>- Updates through the STP leadership team meetings</li> </ul>		<ul style="list-style-type: none"> <li>- Not fully quantified how the financial gap will be bridged</li> </ul>	
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
<ul style="list-style-type: none"> <li>- Approved public narrative for STP progress to be re-issued in Autumn</li> </ul>		<ol style="list-style-type: none"> <li>1 Refreshed STP narrative to be reviewed at the healthy future group.</li> </ol>		<p>A committee in common has been established across WY to drive forward the MH elements of the STP. The priorities are agreed as eating disorder, forensic, TIER 4 CAMHS new models and OAPs. Governance arrangements in place and check and confirm scrutiny will occur in January</p> <p>Date Entered : 14/12/2017 11:12 Entered By : Paula Reilly</p>	

<b>Risk number:</b>	1980	<b>Lead Director:</b>	Andy McElligott	<b>Review Date:</b>	28/11/2018
<b>Monitoring Group:</b>	Trust Board				
<b>Initial Risk Rating:</b>	12	<b>Current Risk Rating:</b>	12	<b>Residual Risk Rating:</b>	8
<p><b>Strategic Objective:</b> Intergration &amp; Partnerships</p> <p>To be influential in the development of new models of care locally and more widely across the West Yorkshire and Harrogate STP</p> <p><b>Risk description:</b></p> <p>If partners (including BDCFT) fail to develop a robust and sustainable Accountable Care Systems across Bradford and AWC. Then there will not be the system-wide change needed to manage resources v demand. Linked to CRR 1824.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- ICB &amp; Accountable Care Boards established</li> <li>- MoU and Alliance Agreement approved</li> <li>- Out of hospital structural collaboration launched</li> </ul>		<ul style="list-style-type: none"> <li>- Regular updates through CEO reports (Q1)</li> <li>- MOU and Alliance Agreement signed (June 2017)</li> </ul>			
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
<ul style="list-style-type: none"> <li>- No MoU in place in AWC yet</li> <li>- No agreement on diabetes outcomes framework for Bradford</li> </ul>		<p>1 Active leadership of both emerging Accountable Care Systems</p>		<p>Leadership arrangements continue as described.</p> <p>Date Entered : 01/12/2017 10:22 Entered By : Andy McElligott</p>	

<b>Risk number:</b>	1981	<b>Lead Director:</b>	Sandra Knight	<b>Review Date:</b>	28/02/2018
<b>Monitoring Group:</b>	FBIC				
<b>Initial Risk Rating:</b>	12	<b>Current Risk Rating:</b>	12	<b>Residual Risk Rating:</b>	9
<p><b>Strategic Objective:</b> Sustainability &amp; Growth</p> <p>To maintain our financial viability whilst actively seeking appropriate new business opportunities</p> <p><b>Risk description:</b></p> <p>If we are unable to facilitate a dynamic culture of innovation. Then we are unlikely to meet future quality and financial challenges which threaten our performance and sustainability in the market place. Linked to CRR 1827.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- Market development plan to FBIC</li> <li>- iCare programme</li> </ul>		<ul style="list-style-type: none"> <li>- FBIC reports (April, June, July 2017)</li> </ul>		<ul style="list-style-type: none"> <li>- Market Development Plan impacted by greater focus on structured collaboration and reduction in corporate functions.</li> </ul>	
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
		<ul style="list-style-type: none"> <li>1 Business case on option for crowd sourcing</li> </ul>		<p>Business case approved by EMT and tender process occurring, submissions received from 3 Crowdsourcing providers. Selection will be made by end December 2017.</p> <p>Over 30 iCare ideas received and being reviewed/progressed</p> <p>Date Entered : 14/12/2017 10:14 Entered By : Sandra Knight</p>	

<b>Risk number:</b>	1982	<b>Lead Director:</b>	Debra Gilderdale	<b>Review Date:</b>	31/01/2018
<b>Monitoring Group:</b>	Trust Board				
<b>Initial Risk Rating:</b>	12	<b>Current Risk Rating:</b>	12	<b>Residual Risk Rating:</b>	12
<p><b>Strategic Objective:</b> Sustainability &amp; Growth</p> <p>To maintain our financial viability whilst actively seeking appropriate new business opportunities</p> <p><b>Risk description:</b></p> <p>If we do not have a clear and viable vision for business growth. We will not be able to respond confidently and creatively to opportunities to grow and develop our services. Linked to CRR 1827 &amp; 1828.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- Operational Plan and response to 5YFV for MH</li> <li>- Mental Wellbeing strategy sets framework for locally</li> <li>- MH UEC Vanguard for West Yorkshire</li> </ul>		<ul style="list-style-type: none"> <li>- Board discussion on wellbeing strategy (June 2017)</li> </ul>			
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
<ul style="list-style-type: none"> <li>- Ongoing discussions with local commissioners about MH funding linked to new strategy (ongoing)</li> <li>- Uncertainty over LA budget implications on MH services linked to VCS (ongoing)</li> </ul>		<p>1 SWOT analysis and wider re-fresh of organisational strategy, following Board workshop)</p>		<p>In September 2017 a Board Paper was presented in the Private part of the Board, agreed e refresh the production of the Operational Strategy</p> <p>Date Entered : 24/10/2017 14:02 Entered By : Debra Gilderdale</p>	

<b>Risk number:</b>	1983	<b>Lead Director:</b>	Sandra Knight	<b>Review Date:</b>	28/02/2018
<b>Monitoring Group:</b>	FBIC				
<b>Initial Risk Rating:</b>	12	<b>Current Risk Rating:</b>	12	<b>Residual Risk Rating:</b>	9
<p><b>Strategic Objective:</b> Sustainability &amp; Growth</p> <p>To maintain our financial viability whilst actively seeking appropriate new business opportunities</p> <p><b>Risk description:</b></p> <p>If we do not create resilience and invest capacity within the organisation to support transformation and transition. We will stifle innovation, create disengagement and not achieve our vision for sustainability and growth. Linked to CRR 1829.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- Workforce strategy</li> <li>- BME employment strategy</li> <li>- Workforce data in IPR &amp; FBIC dashboard</li> <li>- iCare</li> <li>- Workforce Strategy Market Development Plan</li> </ul>		<ul style="list-style-type: none"> <li>- Digital strategy to FBIC (June 2017)</li> <li>- Workforce Strategy (April 2017)</li> <li>- September annual update to FBIC.</li> <li>- EMT review of opportunities and investment</li> </ul>		<ul style="list-style-type: none"> <li>- Impact of corporate benchmarking on resilience/ability to respond to opportunities</li> </ul>	
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
		1 Actions identified following F2E Resilience Workshop.		<p>Focus remaining on strengthening provision on staff health and well being and identifying priority actions for the organisation strategy. Pressures and CIPs being identified for 2018/19 and priorities for investment.</p> <p>Date Entered : 14/12/2017 10:18 Entered By : Sandra Knight</p>	
		2 Transformational plan costings to FBIC		<p>Initial plans for transformation programme and CIPs presented at FBIC. Further work and QIAs being conducted</p> <p>Date Entered : 14/12/2017 10:19 Entered By : Sandra Knight</p>	

<b>Risk number:</b>	1984	<b>Lead Director:</b>	Liz Romaniak	<b>Review Date:</b>	28/02/2018
<b>Monitoring Group:</b>	FBIC				
<b>Initial Risk Rating:</b>	20	<b>Current Risk Rating:</b>	20	<b>Residual Risk Rating:</b>	16
<p><b>Strategic Objective:</b> Sustainability &amp; Growth</p> <p>To maintain our financial viability whilst actively seeking appropriate new business opportunities</p> <p><b>Risk description:</b></p> <p>If public sector finances tighten. Then our financial position could deteriorate. Linked to CRR 1821.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- Regular finance reports to Board/FBIC</li> <li>- CIP programme performance and substitutions reviewed monthly</li> <li>- FBIC/EMT oversight of financial plans</li> <li>- Financial dashboards to BUPM, Board and FBIC including FBIC risk and mitigation assessment</li> </ul>		<ul style="list-style-type: none"> <li>- Corporate benchmarks action plan reporting into FBIC</li> </ul>		<ul style="list-style-type: none"> <li>- Identification of recurrent CIPs sufficient to deliver 2018/19 plan requirement</li> <li>- National relaxation of public sector pay cap could if unfunded, materially impact the Trusts finances</li> </ul>	
<ul style="list-style-type: none"> <li>- Utilise local accountable care arrangements to ensure joint impact assessment of partner financial plans and budget reductions</li> </ul>		<p>Bradford and Airedale place based financial plan to be finalised incorporating health and social care assumptions as part of work to develop a West Yorkshire and Harrogate STP plan</p>		<p>Local Authority budget consultation not developed through partners or involving joint risk assessments in previous financial years</p>	
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
		<p>1 Draft 2018/19 operational plan to be developed in draft by December 2017 to ensure CIPs are fully developed and QIA'd before consideration and approval by the Board before 31st March</p>		<p>December FBIC reviewed draft revenue and capital plans including initial risk assessment, CIP phasing RAG and QIA status. December private board discussion of level of risk. Agreed on recommendation of FBIC that targeting greater than break even looked problematic. Current draft plans target break even subject to finalizing 5.3% CIP programme - current gap just over £0.5 million before any additional risk linked to health pay awards. January FBIC and Board to consider further (2nd week Extra Ordinary January Board being scheduled provisionally pending confirmation of NHSI plan submission).</p>	

Gap in control/Action:	Open actions:	Most recent action update:
		<p>Date Entered : 23/12/2017 09:55 Entered By : Liz Romaniak</p>
	<p>2 ICB agreed that health and Local Authority would share plan assumptions to highlight any interface issues and complete this before any plans are finalised eg, prior to consultation</p>	<p>NL &amp; LR Met BMDC Strategic Directors Corporate and H&amp;WB to discuss Early Years and Budget Consultation 28 Nov (after proposals drafted and documents released to Exec). 30 Nov private BDCFT Board discussed implications and agreed next steps. LR drafted agenda and arranged meeting with joint BDCFT and BMDC Public Health and Children's services to discuss implications of early years proposals 19 Dec 17. Unlikely that consultation will lead to revised financial assumptions (possible specification impacts). Trust shared details (in public domain) with CCG CFO for CCG clinical board consideration. Public Health and Children's leads advised had already provided updates to CCG Clinical Boards and to Accountable Care Board. LR liaising with CCG CFO in early January re respective organization responses. January Board BDCFT to consider for BDCFT - 2 x (Early Years and BMDC 2 year budget).</p> <p>Date Entered : 23/12/2017 09:44 Entered By : Liz Romaniak</p>

<b>Risk number:</b>	1985	<b>Lead Director:</b>	Liz Romaniak	<b>Review Date:</b>	31/01/2018
<b>Monitoring Group:</b>	FBIC				
<b>Initial Risk Rating:</b>	16	<b>Current Risk Rating:</b>	16	<b>Residual Risk Rating:</b>	12
<p><b>Strategic Objective:</b> Sustainability &amp; Growth</p> <p>To maintain our financial viability whilst actively seeking appropriate new business opportunities</p> <p><b>Risk description:</b></p> <p>If productivity and VfM are not improved. Then we may gradually lose contracts to more competitive providers and could become unviable. Linked to CRR 1821 &amp; 1822.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>-Regular CIP reporting to Board / FBIC</li> <li>-Development plan agreed for SLR and Costing</li> <li>-Differential Corporate CIP and additional Corporate Benchmarking actions in train during 2017/18</li> </ul>		<p>Actions on Corporate benchmarking work plan reported at each FBIC</p>		<p>Lack of robust national productivity measures for community and mental health services / scale of efficiency being required by NHSE and Public Health Commissioners requires new approaches to corporate functions</p>	
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
		<p>1 Initial Scoping of scope for IM&amp;T cost reductions to be completed</p>		<p>£230k IM&amp;T benchmark target included in December 17 draft plans shared with FBIC and Board for CIO to scope once in post (early March 2018).</p> <p>Date Entered : 23/12/2017 10:01 Entered By : Liz Romaniak</p>	
		<p>2 NHS Corporate Benchmarking Club return to be populated. When issued, benchmarking results to be used to assess improvement / deterioration in benchmarked performance</p>		<p>Benchmarking return for corporate services submitted Sept 17. Results anticipated Jan 18.</p> <p>Date Entered : 24/10/2017 09:05 Entered By : Paula Reilly</p>	
		<p>3 Workforce strategy deep dive to FBIC</p>		<p>Update to FBIC rescheduled to January 2018</p> <p>Date Entered : 23/12/2017 09:56 Entered By : Liz Romaniak</p>	
		<p>4 National Quality Board safe staffing tool to be piloted for community services</p>		<p>Team dashboards now developed and to be used for more dynamic team management and comparisons.</p> <p>Date Entered : 23/12/2017 09:58 Entered By : Liz Romaniak</p>	

<b>Gap in control/Action:</b>	<b>Open actions:</b>	<b>Most recent action update:</b>

<b>Risk number:</b>	1986	<b>Lead Director:</b>	Liz Romaniak	<b>Review Date:</b>	31/01/2018
<b>Monitoring Group:</b>	FBIC				
<b>Initial Risk Rating:</b>	16	<b>Current Risk Rating:</b>	16	<b>Residual Risk Rating:</b>	12
<p><b>Strategic Objective:</b> Sustainability &amp; Growth</p> <p>To maintain our financial viability whilst actively seeking appropriate new business opportunities</p> <p><b>Risk description:</b></p> <p>If commissioners reduce the value of contracts. Then we may not be able to cover fixed costs with adverse consequences to our financial viability. Linked to CRR 1821.</p>					
<b>Key controls:</b>		<b>Internal &amp; External Assurance:</b>		<b>Gaps in assurance:</b>	
<ul style="list-style-type: none"> <li>- Outcomes from 2017/18 and 2018/19 Contracts with NHSE (Low Secure uplift) and CCGs (MH uplift)</li> <li>- Wakefield 0-19s contract contribution to mitigate impact of Bradford 0-19s contract cuts (overhead contribution / re-design)</li> <li>- Development Plan agreed for SLR and Costing</li> </ul>		<p>Actions on Corporate benchmarking work plan reported at each FBIC</p>		<p>Public Health funded contracts face 10% cash reduction in 2018/19 exacerbated by SMS de-commissioning, unfunded inflation and any impact from unfunded relaxation of public sector pay cap</p> <p>CDS Procurement funding envelope unknown - previous tender exercise (halted following provider appeal to NHSE and via NHSI) assumed a substantial reduction from year 1</p>	
<b>Gap in control/Action:</b>		<b>Open actions:</b>		<b>Most recent action update:</b>	
		<p>1 Trust agreed to target overhead CIPs during 2017/18 and 2018/19</p>		<p>FBIC receiving corporate overhead progress reports at each meeting. 2017/18 CIP included 12% (second year at this level) target now being supplemented by additional benchmarking efficiencies.</p> <p>Date Entered : 24/10/2017 08:43 Entered By : Paula Reilly</p>	
		<p>2 Trust agreed to target Wakefield Contribution to achieve control total stretch for 2017/18</p>		<p>Progress on this action: Plan benefit included in 2017/18 CIP reporting from quarter 1. Further scope from income and service re-design including estates re-provision and rationalisation being finalised in Quarter 3.</p> <p>Date Entered : 24/10/2017 08:43 Entered By : Paula Reilly</p>	
		<p>3 Draft 2018/19 Financial Plan targeted for completion by 31.12.17</p>		<p>Draft break even plan, risks, uncertainties and assumptions shared with FBIC and private Board December 2017. Further Board discussion each month to</p>	

Gap in control/Action:	Open actions:	Most recent action update:
		<p>March 2018.</p> <p>Date Entered : 23/12/2017 10:26 Entered By : Liz Romaniak</p>
	<p>4 Trust collaborating with CDS providers in anticipation of NHSE CDS Re-procurement in</p>	<p>BDCFT &amp; Locala project teams recommended to EMT, who recommended to FBIC and then to Board not to submit joint/separate bid for Lot 1 due to reduced funding envelope and additional specification requirements. Board agreed letter to share with lead NHSE commissioners and NHSI outlining risks and funding issues. Tender extended a number of times, finally closing 13 December. Trust to follow up letter with Commissioners in January</p> <p>Date Entered : 23/12/2017 10:20 Entered By : Liz Romaniak</p>