

**BOARD PAPER - NHS ENGLAND**

**Title:** The new Board Assurance Framework for 2014/15 and the closure of the 2013/14 Board Assurance Framework

**From:** Dame Barbara Hakin, Chief Operating Officer and Karen Wheeler, National Director: Transformation and Corporate Operations

**Purpose of paper:** To provide the v1 2014/15 Board Assurance Framework (BAF) including the new list of strategic risks and improved format for presentation of these risks for 2014/15, and to close the 2013/14 Board Assurance Framework.

**Key issues and recommendations:** It is recommended that the 2014/15 BAF comes into effect following approval at the Board on 15 May and the 2013/14 BAF is closed. This should be regarded as version 1 of the 2014/15 BAF, with a final version being presented at the next Board meeting.

**Actions required by Board Members:**

The Board is asked to:

- receive and approve the closure of the 2013/14 BAF;
- receive version 1 of the 2014/15 BAF; and
- consider the level of detail required at future Board meetings.

## **Board Assurance Framework 2013/14 and 2014/15**

### **Background**

1. The 2013/14 Board Assurance Framework (BAF) presented the strategic risks to the Board during the last financial year. The BAF has been further developed for this financial year. The amended version presents the risks in an improved format to provide greater clarity and ease of review by the Board.
2. The Executive Risk Management Group (ERMG) has led the process to develop the new 2014/15 BAF, engaging with the quality and clinical risk committee and the audit committee. In addition to defining the strategic risks and building on the previous version, consideration has been given to the recommendations from the internal risk management audit, in particular in reference to the suggestion to score the risks based on defined risk categories.
3. Where current risks and mitigating actions remain active from the 2013/2014 BAF, they have been transferred to the 2014/15 BAF or to directorate risk registers, as appropriate. The details for each risk can be found in annex B.

### **Current position**

4. Version 1 of the 2014/15 BAF in the new format for consideration and approval by the Board is attached at annex A. This document may not be required in full, except on an annual basis. This would always be available to Board members.
5. The Board are asked to note that:
  - a risk dependency regarding CCG and partnership alignment has been added to the other strategic risks on the BAF, where appropriate; and
  - the strategic risk around organisational capacity and capability remains as work in progress.

### **Actions Required by Board Members:**




6. The Board is asked to:
  - receive and approve the closure of the 2013/14 BAF;
  - receive version 1 of the 2014/15 BAF; and
  - agree the level of detail required at future Board meetings.

**Dame Barbara Hakin, Chief Operating Officer**  
**Karen Wheeler, National Director: Transformation and Corporate Operations**  
**May 2014**

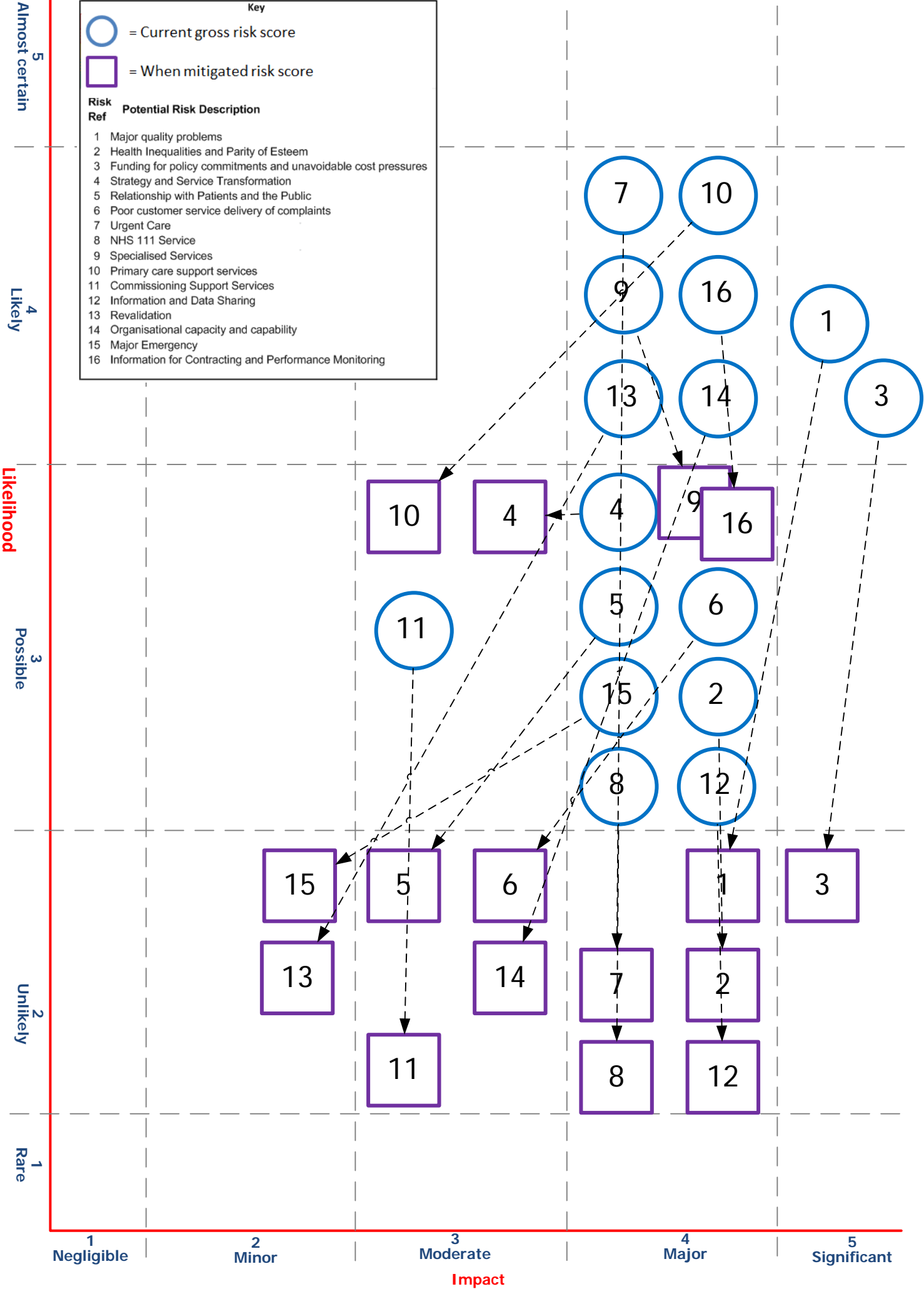
## NHS England Board Assurance Framework Summary as at 28 April 2014

Risk Ref	Risk	Movement since last report	Current Gross Risk Score			When Mitigated Risk Score		
	High-level potential risks that are unlikely to be fully resolved and require ongoing control		Likelihood	Impact	RAG Status	Likelihood	Impact	RAG Status
1	Major quality problems		4	5	R	2	4	A
3	Funding for policy commitments and unavoidable cost pressures		4	5	R	2	5	AR
9	Specialised Services		4	4	R	3	4	AR
13	Revalidation		4	4	R	2	2	AG
16	Information for Contracting and Performance Monitoring		4	4	R	3	4	AR
7	Urgent Care		4	4	R	2	4	A
10	Primary care support services		4	4	R	3	3	A
14	Organisational capacity and capability		4	4	R	2	3	A
2	Health Inequalities and Parity of Esteem		3	4	AR	2	4	A
4	Strategy and Service Transformation		3	4	AR	3	3	A
6	Poor customer service delivery of complaints		3	4	AR	2	3	A
8	NHS 111 Service		3	4	AR	2	4	A
12	Information and Data Sharing		3	4	AR	2	4	A
5	Relationship with Patients and the Public		3	4	AR	2	3	A
15	Major Emergency		3	4	AR	2	2	AG
11	Commissioning Support Services		3	3	A	2	3	A

## Key

-  No Change in RAG Status Against Last Report
-  RAG Status Deteriorating Against Last Report
-  RAG Status Improved Against Last Report

NHS England Board Assurance Framework Summary as at 28 April 2014



# 1. Major quality problems

Risk Description			National Director			
There is a risk that there is a major quality issue which impacts on patient outcomes.			National Medical Director; Chief Nursing Officer			
			Risk Scoring			
			Gross RAG Rating	This Month <b>R</b>	Last Month	Monthly Movement
Risk Dependencies		Source	Owner	Risk Score Detail		
1. Successful delivery of commitments in respect of the Francis and Winterbourne View and safeguarding action plans.		External	Chief Nursing Officer		Likelihood	Impact
2. Successful delivery of outcomes and recommendations of the Keogh Review into the 14 hospital trusts, in partnership with the Trust Development Authority, Monitor and Care Quality Commission.		External	National Medical Director	Previous Month		
3. Service improvements and financial benefits from innovation and research (including return on investment).		Internal/ External	National Medical Director	Gross (this month)	4	5
4. Quality surveillance arrangements to ensure learning is embedded from mental health serious untoward issues, including homicides.		Internal	National Director: Policy	When Mitigated	2	4
				Impact Division (Gross Risk Score)		
				Operational	4	
				Financial	3	
				Reputational	5	
Assurance						
Internal	1. Reporting to the Quality and Clinical Risk Committee.					
Internal	2. Patient Safety Expert Group.					
External	1. Local Safeguarding Boards.					
External	2. Care Quality Commission, professional regulatory bodies and other national partners including National Advisory Group on the Safety of Patients in England.					
Mitigating Actions				Owner	By When	
1. Support and liaison with Quality Surveillance Groups under the National Quality Board's guidance to ensure robust and effective surveillance and action of quality risk.				National Medical Director	31/03/15	
2. Identify and align system-wide improving quality themes and priorities through multi-stakeholder National Quality Board, and other discussions.				Chief Nursing Officer	30/09/14	
3. Delivery of Compassion in Practice implementation plans and the 6Cs through the six areas of action.				Chief Nursing Officer	31/03/15	

Mitigating Actions	Owner	By When
4. Improving quality through clinical leadership and influence, and successful delivery of domain improvement programmes related to aspects of quality, explicit in patient experience and patient safety programmes' contribution to Francis and Berwick reviews.	National Medical Director; Chief Nursing Officer	31/03/15
5. Delivery of the national safeguarding policy for vulnerable people including ensuring implementation of the Accountability and Assurance framework for Safeguarding.	Chief Nursing Officer	31/03/15
6. Review of how quality issues identified at area and regional level through quality surveillance groups feed into the national themes.	National Medical Director	30/09/14

### 3. Funding for policy commitments and unavoidable cost pressures

Risk Description			National Director				
There is a risk that a lack of adequate funding leads to NHS England not being able to secure high quality, comprehensive services within the financial envelope.			Chief Financial Officer				
			Risk Scoring				
			Gross RAG Rating	This Month <div>R</div>	Last Month	Monthly Movement	
Risk Dependencies		Source	Owner	Risk Score Detail			
1. Transparent and open dialogue to ensure that issues are understood early and risks are managed jointly.		External	Chief Financial Officer		Likelihood	Impact	RAG
2. Mandate objectives and funding have been agreed for 2014/15; any additional requirements outside of this should be matched with additional funding.		External	Chief Financial Officer	Previous Month			
3. Strategic planning process developed in partnership with the NHS Trust Development Authority and Monitor with aligned processes and shared assumptions. Specific focus needed on the 2015/16 challenge.		Internal	Chief Financial Officer	Gross (this month)	4	5	R
4. Need for robust activity data to support NHS England's ability to challenge and confirm providers of specialised commissioning, oversee and track clinical commissioning groups' progress on activity and finance.		Internal	National Director: Patients and Information	When Mitigated	2	5	AR
				Impact Division (Gross Risk Score)			
				Operational		5	
				Financial		5	
				Reputational		5	
Assurance							
Internal	1. Monthly reporting of financial position, risks and opportunities to the Board and Finance Investment Committee.						
Internal	2. Regular reporting on delivery of existing priorities to the Executive Group and the Board.						
Internal	3. Development of process for working with the Department of Health and ensuring scrutiny and sign up to new priorities.						
External	1. Reporting to Her Majesty's Treasury and the Department of Health.						
External	2. Engagement with the Department of Health on the refresh of the business plan to gain their input and support to existing plans and recommendations for the future.						
Mitigating Actions				Owner		By When	
1. In-year reserve management and use of drawdown as agreed within the financial plan.				Chief Financial Officer		31/03/15	
2. Agreement to share risks and issues within the shared financial partnership agreement.				Chief Financial Officer		31/03/15	
3. Ensure that additional requirements are not agreed without new funding being received.				National Director: Policy		31/03/15	
4. Triangulation of commissioner and provider plans within the strategic planning process.				Chief Financial Officer		01/06/14	
5. Comprehensive strategic planning process developed with support package developed for health economies in distress.				Chief Financial Officer		31/03/15	

Mitigating Actions	Owner	By When
6. Refresh the principles under which financial support may be provided to challenged Trusts and reconcile with pipeline.	Chief Financial Officer	01/07/14
7. Strategic planning process with aligned processes and shared assumptions in partnership with the NHS Trust Development Authority and Monitor including a support package developed to help challenged economies.	Chief Financial Officer	01/07/14
8. Regular reporting of delivery against priorities.	National Director: Policy	31/03/15

## 9. Specialised Services

Risk Description			National Director				
There is a risk that, as a result of ever increasing demand, coupled with internal operational issues, and the need for specialised services across the country delivered with consistently high quality, spending exceeds the resources available.			Chief Operating Officer				
			Risk Scoring				
			Gross RAG Rating	This Month <div>R</div>	Last Month	Monthly Movement	
Risk Dependencies		Source	Owner	Risk Score Detail			
1. Mobilisation of all directorates in NHS England to support specialised commissioning.		Internal	Chief Operating Officer		Likelihood	Impact	RAG
2. Design and delivery of a comprehensive quality, innovation, productivity and prevention plan.		Internal	Chief Operating Officer	Previous Month			
3. Fit-for-purpose contracting function in area teams.		Internal	Chief Operating Officer	Gross (this month)	4	4	R
4. Fit-for-purpose commissioning support unit support to area teams.		Internal/ External	National Director: Commissioning Development	When Mitigated	3	4	AR
5. Effective Prioritisation Framework to align funding commitments with available funding.		Internal/ External	Chief Operating Officer; National Medical Director	Impact Division (Gross Risk Score)			
6. Budget provision for residual services pressures.		Internal/ External	Chief Financial Officer	Operational		3	
				Financial		4	
				Reputational		4	
7. Fit-for-purpose national strategy to provide framework for local service transformation.		Internal	National Medical Director; Chief Operating Officer				
Assurance							
Internal	1. Board approved Direct Commissioning Committee with Non-Executive Directors.						
Internal	2. Specialised Commissioning oversight group.						
Internal	3. Included in the internal audit plan for review.						
External	1. None identified						
Mitigating Actions				Owner		By When	
1. Clinical Strategy being developed to guide future services configuration.				National Medical Director		30/09/14	
2. Additional strategy workstream created to guide sustainable approach to financing specialist services.				Chief Operating Officer		31/07/14	
3. Action plan to tackle forecast 2014/15 deficit.				Chief Operating Officer; Chief Financial Officer		30/04/14	

Mitigating Actions	Owner	By When
4. Audit of current contracting capacity and action plan for improvements, including fit-for-purpose invoice validation.	Chief Operating Officer	30/04/14
5. Standardisation of business performance management.	Chief Operating Officer	Ongoing
6. Creation of procurement pipeline incorporating quality, innovation, productivity and prevention, compliance and strategy requirements.	Chief Operating Officer	30/04/14
7. Ensure clinical strategy is accompanied by an implementation plan which aligns with local strategic plans.	National Medical Director; Chief Operating Officer	30/09/14

# 13. Revalidation

Risk Description			National Director				
There is a risk that NHS England does not have the capacity to effectively implement the annual appraisal and revalidation of doctors. Revalidation targets: a further 40% of doctors to be revalidated in 2014/15 and the final 40% by March 2016 (the first 20% of doctors have been revalidated in 2013/14).			National Medical Director				
			Risk Scoring				
			Gross RAG Rating	This Month <div>R</div>	Last Month	Monthly Movement	
Risk Dependencies		Source	Owner	Risk Score Detail			
1. Having the necessary resources to carry out 43,000 medical appraisals annually and make recommendations to the General Medical Council regarding the revalidation of licences for 17,000 doctors in 2014/15.		Internal	National Medical Director		Likelihood	Impact	RAG
2. Aligning the contracts of GP appraisers to national contracts during 2014/15.		Internal	National Director: Transformation and Corporate Operations	Previous Month			
				Gross (this month)	4	4	R
				When Mitigated	2	2	AG
				Impact Division (Gross Risk Score)			
				Operational		3	
				Financial		1	
				Reputational		4	
Assurance							
Internal	1. A framework for quality assurance for quantifying compliance and quality of the implementation of the Responsible Officer Regulations was launched on 4 April 2014.						
External	1. Department of Health oversight of the benefits of the legislation.						
Mitigating Actions				Owner		By When	
1. Recruitment.				National Medical Director		30/05/14	
2. Area teams have commenced review of capacity following agreement of budgets.				Chief Operating Officer		30/04/14	

# 16. Information for Contracting and Performance Monitoring

Risk Description			National Director				
There is a risk that the absence of appropriate data-flows and activity information, and the limits imposed by information governance rules, restricts the ability of clinical commissioning groups and NHS England to fulfil their statutory duties, manage contracts effectively, maintain financial control, and to undertake performance monitoring, needs' analysis, performance benchmarking, service transformation and assurance including where we have joint commissioning responsibilities with social care.			Chief Operating Officer				
			Risk Scoring				
			Gross RAG Rating	This Month <div><div></div><div>R</div></div>	Last Month	Monthly Movement	
Risk Dependencies		Source	Owner	Risk Score Detail			
1. Funding for the new team was included in the Policy Directorate business plan. The funding for the National Data Repository and to address the Information Governance issues was included in the Patients and Information Directorate 2014/15 business plan. The Specialist Commissioning function is funding additional work from its programme budget.		Internal	National Director: Policy; National Director: Patients and Information; Chief Operating Officer		Likelihood	Impact	RAG
2. Mitigation is dependent upon changes to legislation to enable access to Patient Confidential Data for commissioning purposes.		External	National Director: Patients and Information	Previous Month			
				Gross (this month)	4	4	R
				When Mitigated	3	4	AR
				Impact Division (Gross Risk Score)			
				Operational	4		
				Financial	4		
				Reputational	4		
Assurance							
Internal	1. Monthly Activity Reporting Programme Oversight Group (ARPOG).						
External	None identified						
Mitigating Actions					Owner		By When
1. Establish a new post and team at a national level to operationalise and take responsibility and accountability for the delivery of the activity reporting programme.					Chief Operating Officer		30/04/14
2. Identify and implement long term solutions for Information Governance.					National Director: Patients and Information		31/03/15
3. Establish a National Data Repository to collate the activity information required to support the end to end commissioning system to fulfil its duties and responsibilities.					National Director: Patients and Information		31/07/14
4. Identify the future information requirements for commissioning to inform the design and specification of standards, data-sets, data-flows, and data collections for key national systems, e.g. Unify, Secondary Uses Services etc.					Chief Operating Officer		31/03/15

## 7. Urgent Care

Risk Description			National Director				
There is a risk that, as a result of increased demand and exacerbation by extreme and/or prolonged winter weather, we are unable to meet an increasing need for urgent and emergency care services, or that in meeting this demand elected activity is compromised. This would lead to reductions in quality of care and failure to deliver key constitutional standards.			Chief Operating Officer				
			Risk Scoring				
			Gross RAG Rating	This Month <div>R</div>	Last Month	Monthly Movement	
Risk Dependencies		Source	Owner	Risk Score Detail			
1. Agreement with the Department of Health on the use of additional funds.		External	Chief Financial Officer; Chief Operating Officer		Likelihood	Impact	RAG
2. Whole system response including actions by providers and their regulators and the Department of Health actions.		External	Chief Operating Officer	Previous Month			
3. Strategy and planning for out-of-hospital care, including primary care strategy and the vulnerable and older people's plan.		Internal/ External	Chief Operating Officer	Gross (this month)	4	4	R
4. Understanding of the appropriate use of urgent and emergency care services by the public.		Internal/ External	National Director: Patients and Information	When Mitigated	2	4	A
5. Success of Transforming Primary Care programme.		External	Chief Operating Officer; National Director: Commissioning Development	Impact Division (Gross Risk Score)			
				Operational	4		
				Financial	2		
				Reputational	4		
6. Continuing success of 111 programme.		Internal	Chief Operating Officer				
Assurance							
Internal	1. Chief Operating Officer reports to the Executive Group and to the Board on current performance and related issues.						
Internal	2. Weekly data published on NHS England website.						
External	1. Weekly delivery stocktake meetings.						
External	2. NHS Trust Development Authority, Monitor and Association of Directors of Adult Social Services represented in regional and national tripartite groups providing assurance functions.						
External	3. Roundtable groups with ambulance, community, mental health sectors to understand pressures and agree appropriate response established.						
Mitigating Actions					Owner		By When
1. National and regional tripartite (inc. Monitor, NHS Trust Development Authority and Association of Directors of Adult Social Services) meeting weekly.					Chief Operating Officer		31/03/15

Mitigating Actions	Owner	By When
2. Work with the independent and voluntary sector.	Chief Operating Officer	31/03/15
3. Informed by Emergency Care Intensive Support Teams (intensive support teams are part of NHS Improving Quality), and a joint intelligence group represented by NHS England, the Department of Health, NHS Trust Development Authority and Monitor.	Chief Operating Officer	31/03/15
4. Seven-day working as recommended in the Urgent and Emergency Care Review Phase One report.	National Medical Director	31/03/15
5. Planning guidance (Everyone Counts: Planning for patients 2014/15 to 2018/19) and other guidance produced for clinical commissioning groups.	Chief Operating Officer; National Director: Commissioning Development	31/03/15
6. Communication plan for providing public information around winter and A&E performance.	National Director: Patients and Information	31/03/15
7. Urgent and emergency care review - phase two work underway, inc. production of necessary commissioning guidance and specs during 2014/15, and any resulting action.	National Medical Director	31/03/15
8. Release of any supplementary funding and oversight of use.	Chief Operating Officer	31/10/14
9. GP contract incentives, aligned to ensure appropriate hospital care.	Chief Operating Officer; National Director: Commissioning Development	31/03/15
10. Urgent Care Working Groups will publish resilience plans and report against them.	Chief Operating Officer	31/08/14
11. Publish resilience guidance and assurance framework with NHS Trust Development Authority and Monitor.	Chief Operating Officer	31/05/14
12. Review application and impact of winter funding deployed in 2013/14.	Chief Operating Officer	31/05/14

# 10. Primary Care Support Services

Risk Description			National Director				
There is a risk that Primary Care Support Services do not successfully transition to a new model.			Chief Operating Officer				
			Risk Scoring				
			Gross RAG Rating	This Month <div>R</div>	Last Month	Monthly Movement	
Risk Dependencies		Source	Owner	Risk Score Detail			
1. Robust assessment of internal and external options available to ensure Board can make decision on preferred new model by June.		Internal	Chief Operating Officer		Likelihood	Impact	RAG
2. Organisational change and pay protection policies in place.		Internal/ External	National Director: Transformation and Corporate Operations	Previous Month			
3. Adequate resource in place to implement preferred option.		Internal	Chief Operating Officer; Chief Financial Officer; National Director for Transformation and Corporate Operations	Gross (this month)	4	4	R
				When Mitigated	3	3	A
				Impact Division (Gross Risk Score)			
				Operational		4	
				Financial		4	
		Reputational		4			
Assurance							
Internal	1. Programme Board in place with regular reporting to the Executive Group.						
Internal	2. Reporting to the NHS England Board November 2013, January 2014, May 2014.						
Internal	3. Monthly update to the Executive Risk Management Group.						
Internal	4. Internal audit review.						
External	1. Health gateway review.						
External	2. External assurance of business case options.						
Mitigating Actions					Owner		By When
1. Internal and external governance arrangements in place. Internal audit report received and action plan in place. Health gateway report complete and action plan in place.					Chief Operating Officer		31/05/14

Mitigating Actions	Owner	By When
2. Staff engagement through a comprehensive communications programme. An external stakeholder engagement plan is being implemented.	National Director: Transformation and Corporate Operations	31/03/15
3. Identification of funding to cover slippage in programme.	Chief Financial Officer	31/05/14
4. Oversight by task and finish group as subset of Directly Commissioned Services Committee.	Chief Operating Officer	31/05/14
5. Due diligence of options supported by external contract.	Chief Operating Officer	31/05/14
6. Full implementation process to be put in place once preferred option is finalised.	Chief Operating Officer	31/03/15

# 14. Organisational capacity and capability

Risk Description			National Director				
There is a risk that NHS England is unable to deliver its objectives and commitments effectively, because it does not have the right organisational capabilities and processes in place, in the context of running cost reductions and additional priorities.			National Director: Transformation and Corporate Operations				
			Risk Scoring				
			Gross RAG Rating	This Month <div>R</div>	Last Month	Monthly Movement	
Risk Dependencies		Source	Owner	Risk Score Detail			
1. Alignment of people, structures, recruitment, retention, staff development, reward and talent management process and policies, culture, and ways of working through excellent organisation work.		Internal	National Director: Transformation and Corporate Operations (TCO)		Likelihood	Impact	RAG
2. Delivery of effective corporate operations (IT, accommodation, etc.) to support the operation of NHS England, including a step change in the use of IT and productive and efficient use of the estate as a support to agile working.		Internal	National Director: TCO	Previous Month			
3. Agreement with the Department of Health on budget and limitations of commitments, creating explicit understanding of impacts on priorities if new tasks are required. Freedom to act and flexibilities, e.g. restrictions on recruitment and salary terms and conditions.		External	National Director: TCO	Gross (this month)	4	4	R
4. Clear focus of NHS England in terms of role, function and required competencies, to achieve focus on the right priorities and our core purpose.		Internal/ External	National Director: TCO	When Mitigated	2	3	A
5. Leadership alignment and mobilisation, in 2014/15, to ensure better performance by year end.		Internal	National Director: TCO	Impact Division (Gross Risk Score)			
6. Effective review of governance arrangements, in particular scheme of delegation, to enable correct decisions taken by officers at the right time.		Internal	National Director: TCO	Operational		4	
7. Proactive and robust planning ahead to manage the requirements to further reduce costs by 10% from 2015.		Internal	National Director: TCO	Financial		4	
8. Effective internal communications to engage employees in understanding how and mobilising them to contribute to delivering on key priorities.		Internal	National Director: TCO	Reputational		4	
Assurance							
Internal	1. Integrated performance report to Board to include qualitative and quantitative workforce data.						
Internal	2. Remuneration and Terms of Service Committee business.						
Internal	3. Staff barometer.						
External	1. 360 feedback from stakeholders and partners.						

Mitigating Actions	Owner	By When
1. Stocktake currently underway will review and make recommendations to address current organisational capability issues.	National Director: TCO	31/05/14
2. Capturing staff insight through qualitative and quantitative data gathering, working with excellent organisation champions, and working in partnership with staff representatives.	National Director: TCO	31/03/15
3. Develop and implement a talent management and succession planning strategy, an attractive strategy linked to brand, deliver a corporate learning and development offer to staff and ensure all staff participate in PDR.	National Director: TCO	31/03/15
4. Develop a strategy to drive efficient and effective use of the corporate estate. Support the development of agile working through capital refurbishment of key sites as part of the 2014/15 capital programme.	National Director: TCO	30/09/15

## 2. Health inequalities and parity of esteem

Risk Description			National Director				
There is a risk to delivering our commitment to help reduce health inequalities; in particular, closing the gap between people with mental health problems and the population as a whole.			National Director: Policy				
			Risk Scoring				
			Gross RAG Rating	This Month <div>AR</div>	Last Month	Monthly Movement	
Risk Dependencies		Source	Owner	Risk Score Detail			
1. Successful access to data across the system leads to an understanding of the gap in health inequalities and improvements.		Internal/ External	National Director: Policy		Likelihood	Impact	RAG
2. Achievement of quality surveillance arrangements to ensure learning is embedded from mental health serious untoward issues, including homicides.		Internal	National Director: Policy	Previous Month			
3. Improved access to psychological therapies.		External	National Director: Policy	Gross (this month)	3	4	AR
4. Achievement of a cross-organisational response to the Secretary of State key areas to provide assurance and demonstrate delivery of a reduction in health inequalities.		External	National Director: Policy	When Mitigated	2	4	A
5. Successful cross-organisational analysis and reporting on health inequalities to understand how health inequalities are being tackled and in particular the progress being made to reduce the gap.		Internal	National Director: Policy	Impact Division (Gross Risk Score)			
6. Implementation of appropriate governance across NHS England to enable coordination and decision-making around the agenda.		Internal	National Director: Policy	Operational		4	
7. Clarity of what needs to be delivered to successfully achieve health equality and parity of esteem.		Internal	National Director: Policy	Financial		4	
8. Delivery of an additional 4,200 health visitors nationally by April 2015, including transformation of the service and safe transition to local authority commissioning.		Internal/ External	Chief Nursing Officer	Reputational		4	
Assurance							
Internal	1. Equalities policy.						
Internal	2. Included in the internal audit plan for review.						
External	1. Department of Health assessment of NHS England's performance against duty to reduce health inequalities and to integrate services which reduce health inequalities.						
External	2. Her Majesty's Treasury reporting against Public Accounts Committee's outstanding recommendations on health inequalities.						
Mitigating Actions					Owner		By When
1. A data sub-group of the Equality and Diversity Council (EDC) established to develop a strategic approach to the collection and monitoring of data and the production and dissemination of required methodologies and resources. They will report back to the EDC and the Commissioning Assembly Health Inequalities Working Group.					National Director: Policy		31/03/15

Mitigating Actions	Owner	By When
2. Developing a strategic approach to data and intelligence and defining core data set, standards (including monitoring, recording and disaggregation capability) to underpin the Health Inequalities strategy, working as appropriate with relevant leads in NHS England, Public Health England, the Department of Health, Health and Social Care Information Centre and the Office of National Statistics.	National Director: Policy	31/03/15
3. Instant access to psychological therapies (IAPT) intensive support team, continue support to pilots for adults with severe mental illness and IAPT for children and young people.	National Medical Director	31/03/15
4. Coordinate a cross-organisational response to provide assurance on the Secretary of State Health Inequalities key areas within NHS England and with the Department of Health.	National Director: Policy	31/03/15
5. Assurance of clinical commissioning groups in how they are tackling health inequalities and their progress towards reducing the gap.	Chief Operating Officer	31/03/15
6. Work with Public Health England and local authorities to ensure broader determinants are achieved.	National Director: Policy	31/03/15
7. Transforming Primary Care programme will include focus on patients with mental health problems.	Chief Operating Officer	30/04/14 (document) 30/04/15 (ongoing monitoring)
8. Develop and deliver a programme to support the diagnosis and treatment of dementia including supporting the national ambition of 67% diagnosis rate by March 2015.	National Medical Director	31/03/15

## 4. Strategy and Service Transformation

Risk Description			National Director			
There is a risk that there is insufficient capability to develop and lead transformation.			National Director: Policy			
			Risk Scoring			
			Gross RAG Rating	This Month <b>AR</b>	Last Month	Monthly Movement
Risk Dependencies		Source	Owner	Risk Score Detail		
1. Coordination of an effective support and promotion package including 'products' of NHS England and our National Partners resulting in transformational change.		External	National Director: Policy		Likelihood	Impact
2. Effective communication plans to help support local initiatives promoting change and product/thought leadership productions/events.		Internal	National Director: Patients and Information	Previous Month		
3. Ability to mobilise high level and local public and professional support for change.		External	National Director Policy	Gross (this month)	3	4
4. Successful engagement of clinicians to support the leadership of service transformation.		External	National Medical Director	When Mitigated	3	3
				Impact Division (Gross Risk Score)		
				Operational	4	
				Financial	3	
				Reputational	4	
Assurance						
Internal	1. Programme governance established.					
Internal	2. Regular reporting to the Board.					
Internal	3. Included in the internal audit plan for review.					
External	1. Arm's Length Body joint executive group.					
Mitigating Actions				Owner	By When	
1. NHS England with National Partners agrees a coordinated approach to supporting transformational change and also agrees processes for considering any supporting responses to 'unblocking' barriers to change.				National Director: Policy	30/06/14	
2. Effective working-level arrangements in place to share and agree NHS England strategic ambitions, data and other relevant information with National Partners.				National Director: Policy	31/03/15	
3. Establishment and coordination of a network of 'leading edge' health economies prepared to commit to programme of transformative change based around 6 characteristics.				National Director: Policy	30/06/14	

Mitigating Actions	Owner	By When
4. Two-year operational plans and five-year strategic plans to be produced by clinical commissioning groups in accordance with planning guidance including financial templates and the Better Care Fund guidance and templates.	National Director: Policy	01/06/14
5. Build with partners a network of support for transformation systems (see 4 above), including technical, financial and operational support, delivered in conjunction with the Royal College of Physicians, NHS Confederation, Health Foundation, academic health science networks, commissioning support units and leading business schools.	National Director: Policy	31/03/15

## 6. Transition to a future operating model for complaints

Risk Description			National Director			
There is a risk that we do not learn effectively through our management of complaints and concerns.			Chief Nursing Officer			
			Risk Scoring			
			Gross RAG Rating	This Month <b>AR</b>	Last Month	Monthly Movement
Risk Dependencies	Source	Owner	Risk Score Detail			
1. Development of a customer contact operating model and staff capability for engaging patients about their concerns, e.g. Care Connect.	Internal	Chief Nursing Officer		Likelihood	Impact	RAG
2. The patient-led vision for good complaints management, being led by the Department of Health, NHS England and the Care Quality Commission.	External	Chief Nursing Officer	Previous Month			
3. Clear definition of proposed future operating models and successful implementation of preferred option.	Internal	Chief Nursing Officer	Gross (this month)	3	4	AR
4. Customer contact improvement programme provides a stable base for the changes.	Internal	Chief Nursing Officer	When Mitigated	2	3	A
			Impact Division (Gross Risk Score)			
			Operational	2		
			Financial	1		
			Reputational	4		
Assurance						
Internal	1. Customer Contact Programme Board monitors current performance and the development of the future operating model.					
Internal	2. Regular reporting of progress to the Board.					
External	1. Engagement with Healthwatch England, Parliamentary and Health Service Ombudsman, Patients Association and others where appropriate.					
Mitigating Actions			Owner		By When	
1. Programme Board now established with a focus of moving on from stabilisation to future design of processes for managing complaints and concerns.			Chief Nursing Officer		31/07/14	
2. Active engagement with all areas of NHS England on emerging patient-led vision for complaints management.			Chief Nursing Officer		31/03/15	
3. Effective stakeholder engagement with Healthwatch England, Parliamentary and Health Service Ombudsman and Patients Association.			Chief Nursing Officer		30/09/14	
4. Strategy for learning from complaints has been developed and is being implemented along with external partners.			Chief Nursing Officer		31/03/15	
5. Effective working across local, regional and national teams.			Chief Nursing Officer		31/03/15	

Mitigating Actions	Owner	By When
6. Customer contact improvement programme is putting in place the systems and processes to enhance our analysis of complaints, our ability to manage engagement with stakeholders and provide a responsive NHS England service.	Chief Nursing Officer	31/03/15
7. Development and consideration of options and actions for the future operating model.	Chief Nursing Officer	31/07/14

## 8. NHS 111 Service

Risk Description			National Director				
There is a risk that due to increasing demand for urgent care, and the changes required to increase resilience and provide necessary improvements for patients, the NHS 111 system is not delivered consistently, effectively and safely across England within the assumed resource envelope.			Chief Operating Officer				
			Risk Scoring				
			Gross RAG Rating	This Month <div>AR</div>	Last Month	Monthly Movement	
Risk Dependencies		Source	Owner	Risk Score Detail			
1. NHS 111 service contracts and re-procurements successfully completed.		Internal	Chief Operating Officer		Likelihood	Impact	RAG
2. Design of NHS 111 Future Vision and Service Specification and alignment with other NHS England priorities.		Internal	National Director: Patients and Information	Previous Month			
3. Recommendations from the Urgent and Emergency Care Review.		Internal	National Medical Director	Gross (this month)	3	4	AR
4. Additional funding from winter monies.		External	Chief Operating Officer	When Mitigated	2	4	A
5. Appropriate range of providers available and willing to deliver service within funding range.		External	Chief Operating Officer	Impact Division (Gross Risk Score)			
				Operational		4	
				Financial		4	
				Reputational		2	
Assurance							
Internal	1. Programme governance in place (the Programme Oversight Group).						
Internal	2. Regular reporting to the Executive Group Meeting as Major Organisational Programme.						
External	1. Gateway reviews of programme and procurement activity.						
External	2. External assurance of service transfers.						
Mitigating Actions				Owner		By When	
1. National performance management and roll-out checkpoint assurance process in place.				Chief Operating Officer		31/03/15	
2. Engaging stakeholders and the provider market in the development of a vision and business case for the provision of the NHS 111 service in the future.				National Director: Patients and Information		31/03/15	
3. Quality assurance of service.				Chief Operating Officer		31/03/15	
4. Coordinated support for clinical commissioning groups to undertake new procurements.				Chief Operating Officer		30/04/15	
5. Development and agreement of new commissioning specifications.				Chief Operating Officer		31/05/15	

Mitigating Actions	Owner	By When
6. Review of provider performance variations.	Chief Operating Officer	31/03/15
7. Review of provider Value for Money and contracts.	Chief Operating Officer	31/03/15
8. Development of commissioning strategy to both improve performance and develop solution.	Chief Operating Officer	31/03/15

# 12. Information and Data Sharing

Risk Description			National Director								
There is a risk that commissioners may have inadequate access to the information they need, due to changes in information governance, impacting the delivery of the vision for transparency and the safe sharing of data and information between clinicians, patients and the public, and leading to clinicians' inability to share patient information as required, to the detriment of joined-up, high quality care. Further, public concerns about the holding and expansion of patient data means that NHS England is unable to achieve its vision of transparency.			National Director: Patients and Information								
			Risk Scoring								
			Gross RAG Rating	This Month <div>AR</div>	Last Month	Monthly Movement					
Risk Dependencies		Source	Owner	Risk Score Detail							
1. Health & Social Care Information Centre using the Grant in Aid funding to deliver business-critical activity monitoring.		External	National Director: Patients and Information		Likelihood	Impact	RAG				
				Previous Month							
				Gross (this month)	3	4	AR				
				When Mitigated	2	4	A				
				Impact Division (Gross Risk Score)							
				Operational		3					
				Financial		3					
				Reputational		4					
				Assurance							
				Internal	1. Monthly Patients and Information Senior Management Team meetings.						
Internal	2. Weekly Patients and Information Corporate Approvals and Assurance Board.										
Internal	3. Monthly Patients and Information Directorate Programme Delivery Boards.										
Internal	4. Fortnightly Information Governance Activity Review (IGAR) Executive Group.										
Internal	5. The The Information Governance Transition Programme established to ensure that the immediate problems relating to legally valid access to data are addressed. The Programme Board overseeing this work have approved the scope of the programme that addresses:										
	1 – Development of short-term solutions through temporary exemptions under Section 251 of the H&SC Act via approval from the Confidentiality Advisory Group (CAG) run by the Health Research Authority (HRA).										
	2 – Working with Department of Health who are establishing new statutory regulations to enable the lawful access to data necessary to support those activities currently reliant on Section 251 approvals										
	3 – Supporting the analysis phase of the Data Services For Commissioners programme by identifying Information Governance issues associated with the longer term data requirements of commissioners.										

Assurance		
Internal	6. Independent care.data advisory group, chaired by Chief Executive of Macmillan Cancer Support (NHS England non-executive director), established to advise the care.data programme board chaired by National Director for Patients and Information.	
External	None identified.	
Mitigating Actions		Owner
		By When
1. No official roll-out date, with phased testing of the GP data extraction process to begin in the autumn following discussions with the British Medical Association, Healthwatch, Royal College of General Practitioners and the independent advisory group. In parallel, changes to the law are being progressed to increase the protection of confidentiality and greater transparency around data release by the Health & Social Care Information Centre.		National Director: Patients and Information
		31/10/14
2. Care.data programme working with stakeholders to provide greater assurance on issues such as: patient's right to object to their identifiable data being shared; protecting privacy; the burden on GPs; and the controls around data. Engaging with patient groups, GPs and other stakeholders through local and regional engagement events to produce support materials, such as an optional template letter for patients and ways of making opting-out more straightforward.		National Director: Patients and Information
		31/03/15

## 5. Relationship with Patients and the Public

Risk Description			National Director				
There is a risk that there that we do not ensure full engagement with public and patients.			National Director: Patients and Information				
			Risk Scoring				
			Gross RAG Rating	This Month <div>AR</div>	Last Month	Monthly Movement	
Risk Dependencies		Source	Owner	Risk Score Detail			
1. Maturity and capacity of new clinical commissioning group organisations and area team direct commissioners to prioritise patient and public engagement.		External	National Director: Patients and Information; Chief Operating Officer		Likelihood	Impact	RAG
				Previous Month			
2. Development of a customer care strategy and new programmes for engaging patients about their concerns, e.g. Care Connect.		Internal	National Director: Patients and Information	Gross (this month)	3	4	AR
3. The patient-led vision for good complaints management, being led by the Department of Health, NHS England and the Care Quality Commission.		Internal	Chief Nursing Officer	When Mitigated	2	3	A
4. Partnership working between NHS England and its strategic partners to lead to the delivery of system-wide change programmes, such as those emerging from the Winterbourne View Concordat and the Francis Report in a transactional way which achieves the culture change required.		Internal	National Director: Policy	Impact Division (Gross Risk Score)			
				Operational		3	
				Financial		4	
				Reputational		4	
5. Engagement of public/patient groups and other key stakeholders early enough and in a meaningful way regarding commissioning intentions for directly commissioned services.		Internal	Chief Operating Officer				
6. Ability to support good and early public/patient engagement on service changes and reconfigurations.		Internal	Chief Operating Officer				
Assurance							
Internal	None identified.						
External	None identified.						
Mitigating Actions				Owner		By When	
1. To establish a citizens' assembly that has three main purposes: <ul style="list-style-type: none"><li>• To give citizens and organisations a direct transparent route for their voices to reach the heart of the NHS England decision-making process, in a way that cannot be ignored.</li><li>• To give the NHS England Board and others a new source of evidence and opinion on the NHS now and in future.</li><li>• To give the public an open and robust accountability mechanism for the work of NHS England, and opportunities to participate in every aspect of the organisation's work.</li></ul>				National Director: Patients and Information		30/04/15	

Mitigating Actions	Owner	By When
2. To develop a participation academy, a networked programme of learning and development for people who want to explore their roles as patients, community leaders and experts by experience in health and care. We will work with communities to identify routes to reach a diverse range of people who can champion the health needs and interests of their local communities and citizens.	National Director: Patients and Information	30/04/15
3. To establish a 'people bank' where citizens and organisations can register their interest in participation opportunities across NHS England's activities and/or commissioners can identify interested people to engage with.	National Director: Patients and Information	TBC
4. To establish commissioning support unit (CSU) support for public participation. Funding CSU capacity to support clinical commissioning groups to make progress in relation to both individual and collective participation. Support to develop public participation recognising, highlighting, celebrating and spreading good practice.	National Director: Patients and Information	30/04/15
5. To develop strong networks with clinical commissioning groups, lay members, and to build health partnerships.	National Director: Patients and Information	30/04/15
6. To provide a comprehensive programme of support to develop patient participation, by developing centres of advice, help and expertise in each region, hosted in commissioning support units.	National Director: Patients and Information	30/04/15
7. To increase digital access and skills for the 8m people who have never been online, including many older, vulnerable and socially excluded people, by: <ul style="list-style-type: none"> <li>• increasing volumes of citizens trained to a further 150,000 in 2014-15 and 200,000 in 2015-16;</li> <li>• providing sufficient time for longitudinal evaluation of impacts and benefits; and</li> <li>• building genuine local engagement and championing of digital inclusion by opinion leaders.</li> </ul>	National Director: Patients and Information	01/03/16
8. To encourage and continue clinical commissioning groups and area teams to regularly engage with patients and the public around commissioning of services.	National Director: Patients and Information	31/03/15

# 15. Major emergency

Risk Description			National Director				
There is a risk that the health system is not able to fully respond to a major emergency, such as a national disaster, terrorist attack or a significant loss of national infrastructure, as effectively as its planned preparedness should allow.			Chief Operating Officer				
			Risk Scoring				
			Gross RAG Rating	This Month <div>AR</div>	Last Month	Monthly Movement	
Risk Dependencies		Source	Owner	Risk Score Detail			
1. Delivery of policy by the Department of Health/Public Health England - aligned to the delivery framework.		Internal	Chief Operating Officer		Likelihood	Impact	RAG
2. All parts of the NHS to respond and for NHS England to oversee them.		External	Chief Operating Officer	Previous Month			
3. Effective response from partner agencies outside the NHS.		Internal	Chief Operating Officer	Gross (this month)	3	4	AR
4. NHS England fully able to discharge command and control function.		Internal	Chief Operating Officer	When Mitigated	2	2	AG
				Impact Division (Gross Risk Score)			
				Operational		4	
				Financial		2	
				Reputational		3	
Assurance							
Internal	1. Quarterly updates to the Emergency Preparedness, Resilience and Response (EPRR) partnership group.						
Internal	2. Weekly meeting with the Department of Health, Public Health England and NHS England Training and Exercise Group.						
Internal	3. Monthly meetings with Regional EPRR Leads.						
Internal	4. Emergency preparedness, resilience and response assurance completed in Q4 with statements to NHS England and the Department of Health.						
Internal	5. Internal audit by Deloitte in Q1 aligned to internal audit of Public Health England and the Department of Health.						
External	1. Following each of the exercises (commissioned and paid for by the Department of Health), written reports to the Department of Health, Public Health England and NHS England group.						
Mitigating Actions					Owner		By When
1. Redesign, agree and manage an Emergency Preparedness, Resilience and Response assurance process for 2014-15. Deliver an updated Emergency Preparedness, Resilience and Response Assurance Process.					Chief Operating Officer		31/03/2015

Mitigating Actions	Owner	By When
2. Maintain robust and constructive communication links with NHS England Emergency Preparedness, Resilience and Response Leads, including in relation to exercise scheduling and completion.	Chief Operating Officer	31/03/2015
3. Maintain robust and constructive communication links with NHS England Regional Directors of Operations and Delivery, including in relation to exercise scheduling and completion.	Chief Operating Officer	31/03/2015
4. Other exercises, i.e. Emergo exercises and other regional and cross-government exercises such as Home Office-led exercises, Cabinet Office exercises (Tier 1 and Tier 2).	Chief Operating Officer	31/03/2015
5. Regular engagement with Public Health England, the Department of Health and Cabinet Office policy to understand where they are with guidance and ensure any publications are aligned and complementary where possible.	Chief Operating Officer	31/03/2015
6. Forward awareness in respect of national cross-government (Tier 1) pandemic influenza exercises for delivery into 2014/15 with the majority of the planning taking place in the current fiscal period.	Chief Operating Officer	31/03/2015
7. Regular engagement with partner organisations, including regular testing and exercises, to ensure consistency of approach and shared understanding of processes.	Chief Operating Officer	31/03/2015
8. Review of regional and local arrangements.	Chief Operating Officer	31/03/2015

# 11. Commissioning Support Services

Risk Description			National Director				
There is a risk that commissioning support units do not develop effectively fast enough; and that customers of commissioning support are not clear on their requirements; leading to insufficient capacity and capability to support quality improvement, service transformation and public confidence in the service and potential financial liabilities for NHS England.			National Director: Commissioning Development				
			Risk Scoring				
			Gross RAG Rating	This Month <div>A</div>	Last Month	Monthly Movement	
Risk Dependencies		Source	Owner	Risk Score Detail			
1. Clinical commissioning groups exercising choice about who they contract with for commissioning support services.		External	National Director: Commissioning Development		Likelihood	Impact	RAG
2. Commissioning support units to meet customer requirements.		External	National Director: Commissioning Development	Previous Month			
3. Organisational change support (finance, HR) in place for commissioning support units.		Internal	National Director: Transformation and Corporate Operations	Gross (this month)	3	3	A
				When Mitigated	2	3	A
				Impact Division (Gross Risk Score)			
				Operational		3	
				Financial		3	
				Reputational		3	
Assurance							
Internal	1. Monthly commissioning support unit (CSU) performance dashboard.						
Internal	2. Specific committee established to oversee assurance and development of CSUs and market development.						
Internal	3. NHS England's audit arrangements.						
External	None identified.						
Mitigating Actions				Owner		By When	
1. Stimulate providers by enabling commissioning support units to compete effectively in future developing a clear and transparent process to autonomy, with the option of value-added partnerships and alliances.				National Director: Commissioning Development		31/03/15	
2. Put in place central support for a commissioning support unit cost-reduction initiative to be completed by March 2015.				National Director: Commissioning Development		31/03/15	

Mitigating Actions	Owner	By When
3. Ensure sustainable commissioning support units remain in place through ongoing monitoring of commissioning support unit performance and tailored development support.	National Director: Commissioning Development	01/03/15
4. Stimulate the demand-side through systematic engagement with clinical commissioning groups and area teams to support buyers of commissioning support services to better understand their commissioning support services needs (including sign-posting to tools developed by NHS England – e.g. the make/share/buy toolkit) and the providers offering these services throughout 2014/15.	National Director: Commissioning Development	01/03/15
5. Through systematic engagement with clinical commissioning groups and area teams, ensure a long-term view of commissioning support services is taken (which includes understanding the potential benefits of coordinated system-wide approaches to securing future commissioning support services) throughout 2014/15.	National Director: Commissioning Development	01/03/15
6. Develop a Lead Provider framework and supporting products (e.g. specifications, standard contract etc.) by December 2014 to reduce transactions costs and make it easier for clinical commissioning groups to buy services in compliance with public procurement rules and drive value for money.	National Director: Commissioning Development	01/12/14
7. Assess and monitor the market as it develops, including an independent evaluation, to ensure that NHS England has early warning of emerging capacity and capability gaps and can develop an appropriate response.	National Director: Commissioning Development	01/05/15
8. Developing a clear and agreed set of roles, responsibilities, HR policies, processes and governance and assurance arrangements to deliver the required organisational changes at pace ahead of autonomy between NHS England, commissioning support units, NHS Business Services Authority (and clinical commissioning groups where relevant).	National Director: Commissioning Development	30/06/14
9. Developing robust and clear guidance for commissioning support units on autonomy including agreed organisational change and HR policies and processes agreed with the commissioning support unit partnership forum from June to November 2014.	National Director: Commissioning Development	30/11/14