

BOARD ASSURANCE FRAMEWORK 2025-2026

BAF Dashboard 2025-26

Strategic Priority	Risk No	Org Ref	Risk Description	Executive Lead	Lead Committee	Initial	Risk Score 2024/25				Risk Score 2025/26						Anticipated Closure Date	
							Aug/ Sept	Oct/ Nov	Dec/ Jan	Feb/ Mar	Apr/ May	Jun/ Jul	Aug/ Sep	Oct/ Nov	Dec/ Jan	Feb/ Mar		Target
Continually improving standards of excellence	B	NCHC	If we cannot maintain good quality care for our patients across the Trust, we will increase the incidents of harm and a deterioration in patient experience	Chief Nursing and Allied Health Professional Officer	Board / Quality Committee		16	16	16	16	16						12	30/06/2025
								→	→	→	→							
	I	NCHC	If we are unable to provide the required capacity for intermediate bedded care (Pathway 2 in Discharge to Assess - D2A), by either reducing demand or increasing capacity, then we risk poor patient care and outcomes due to extended acute hospital admissions, reduced flow across Urgent and Emergency Care (UEC), poor short and long term health and care outcomes and increased cost for people due to extended stays in hospital care.	CEO	Board/Norfolk Adults Service Assurance Committee		16	12	12	12	12						8	30/04/2025
								↓	→	→	→							
Advancing our use of data and technology and being a future focussed organisation.	F	NCHC	If NCHC do not address cybersecurity threats then there is an increased likelihood of a major service disruption and possible compromise to patient care.	Chief Information Officer	Board / Finance & Infrastructure		16	16	16	16	16						12	31/03/2025
								→	→	→	→							
Being a future focused organisation	G	NCHC	If the Trust is not able to deliver the 2025/26 financial breakeven plan then the Trust risks contributing to an ICS failure to break even. This will lead to a need to repay the system (and Trust) deficit in future years and will result in additional scrutiny from NHS England	CFO	Board / Finance & Infrastructure					16	16						9	31/03/2026
											→							
	J	NCHC	If the Trust cannot secure efficiencies and/or additional resources, it may not be able to fund increasing demand for services in future years.	CFO	Board / Finance & Infrastructure		16	16	16	16	16						9	31/03/2030
								→	→	→	→							
Collaborate with Others	3682	CCS/ NCHC	There is a risk that conflicts of interest between both CCS and NCHC Boards could exist at both at an individual board member and organisational level that would then lead to poor governance and a risk that the transaction leading to a single organisation being compromised	Director of Corporate Affairs	Board	12				9	9						2	31/03/2026
											→							
	3475	CCS	There is a risk that if Cambridgeshire and Peterborough Integrated Care System and the Trust fails to secure funding for the redevelopment of the Princess of Wales Hospital, Ely, this would prevent the facilities and infrastructure being upgraded and as a result impact on the quality of care provided to patient and service users.	Director of Corporate Affairs	Board / Finance & Infrastructure	16	12	12	12	12	12						4	23/05/2025
							↓	→	→	→	→							
	3655	CCS/ NCHC	There is a risk that the non-executive and executive and wider senior leadership capacity and expertise required to deliver the transaction to support the move to a new/single organisation, will result in failure to deliver the current quality, operational, workforce and financial performance and plans	Chief People Officer and Deputy Chief Executive	Board	9	9	9	6	9							6	31/03/2026
							→	→	→	↓	↑							
	3654	CCS/ NCHC	There is a risk that the implementation of the group model arrangements could lead to reduced board, executive and management oversight and support for the delivery of current plans leading to poor patient care and performance failures	Chief People Officer and Deputy Chief Executive	Board	15	12	12	6	4	12						8	31/03/2026
							↓	→	↓	↓	↑							

BOARD ASSURANCE FRAMEWORK 2025-2026

BAF Dashboard 2025-26

Strategic Priority	Risk No	Org Ref	Risk Description	Executive Lead	Lead Committee	Initial	Risk Score 2024/25				Risk Score 2025/26						Anticipated Closure Date	
							Aug/ Sept	Oct/ Nov	Dec/ Jan	Feb/ Mar	Apr/ May	Jun/ Jul	Aug/ Sep	Oct/ Nov	Dec/ Jan	Feb/ Mar		Target
	3656	CCS/ NCHC	If stakeholders withdraw their support, there is a risk that the group model programme and transaction could not be delivered and therefore impact the performance and delivery of the existing services of the Trust and sustainability in the future	CEO	Board	9	9	9	6	6	6						3	31/03/2026
							→	→	↓	→	→							
Provide outstanding care	3653	CCS	There is a risk that clinical quality and patient safety could be compromised if the following; gaps in staffing/staff morale, group model planning, financial pressures and cost efficiencies compliance with regulatory bodies, are not managed and mitigated. The impact of this potential risk could lead to increase level of 'harm,' a reduction in clinical quality/safety across services and an increase in patient dissatisfaction.	Chief Nursing and Allied Health Professional Officer	Board / Quality Committee	8	12	12	12	12	12						6	30/06/2025
							↑	→	→	→	→							
Excellent Employer	3699	CCS/ NCHC	There is a risk that staff morale and engagement may be adversely affected whilst we culturally align our two organisations	Chief People Officer and Deputy Chief Executive	Board / Service Assurance Committees / PPEC	16					12						8	31/06/2026
Be sustainable	3514	CCS	There is an increased risk of a cyber-attack upon the Trust which could result in a potential loss or disablement of services which would directly impact patients, service users and staff.	Chief Information Officer	Board / Finance & Infrastructure	12	12	12	12	12	12						12	28/11/2025
								→	→	→	→							
	3691	CCS	There is a risk that due to increasing inflationary pressures and a challenging efficiency target, the Trust may not deliver a balanced financial plan for 2025/26 which could impact on the delivery of services.	Director of Finance & Resources	Board	12					12					8	31/03/2026	
											N/A							

Risk Matrix					
Likelihood/ Frequency ↓	Consequence/Impact →				
	Insignificant 1	Minor 2	Moderate 3	Major 4	Catastrophic 5
5 Almost Certain	Moderate 5	High 10	Significant 15	Significant 20	Significant 25
4 Likely	Moderate 4	High 8	High 12	Significant 16	Significant 20
3 Possible	Low 3	Moderate 6	High 9	High 12	Significant 15
2 Unlikely	Low 2	Moderate 4	Moderate 6	High 8	High 10
1 Rare	Low 1	Low 2	Low 3	Moderate 4	Moderate 5

Group Trust Board Committees
Finance & Infrastructure Committee
Service Assurance Committees
People Participation & Equalities Committee (PPEC)
Quality Committee
Remuneration Committee
Audit & Risk Committee
Charitable Funds Committee

Risk Score = Consequence x Likelihood (C x L)

For grading risk, the scores obtained from the risk matrix are assigned grades as follows

	1 - 3	Low risk
	4 - 6	Moderate risk
	8 - 12	High risk
	15 - 25	Extreme risk

BAF Risk 3475	Redevelopment of Princess of Wales, Ely													
Strategic Priority	Collaborate with Others		Risk Score 2024/2025					Risk Score 2025/2026						
Anticipated Closure Date	23/05/2025													
Review Date	15 April 2025		Initial	Aug/Sept	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target
Executive Lead	Director of Corporate Affairs		16	12	12	12	12	12						4
Lead Committee	Board / Finance & Infrastructure			→	→	→	→	→						
Context			Gaps in Control or Assurance											
<p>There is a risk that if C&P ICS (Cambridgeshire & Peterborough Integrated Care System) and the Trust fails to secure funding for the redevelopment of the Princess of Wales Hosptial, Ely, this would prevent the facilities and infrastructure being upgraded and as a result impact on the quality of care provided to patient and service users.</p> <p>Progress since the last review: Multi-storey Car Park - discussions with contractors continue regarding completion works and handover. Revised handover date agreed for 17th March</p>			Adequate assurances in place											
Progress														
What's going well inc future opportunities			What are the current challenges inc future risks					How are these challenges being managed						
<p>Discussions continue with the Council and others regarding the Independent Living suites and a new project will be established for this phase of the work once an approach has been agreed.</p> <p>Conversations between CUH and NWAFT continue regarding how to maximise the use of current Outpatient facilities and a paper for discussion is being developed for submission to the planned care board of the ICB.</p>			<p>The remainder of the business case will still require significant capital funds in order for the redevelopment works to take place. The estate and infrastructure requires upgrading to provide fit for purpose facilities for the future</p>					<p>Existing infrastructure management arrangements for ICS partners. ICS estates group and PoW Project Board. CCS Executive Programme Board and PMO arrangements. Existing CCS policies and procedures</p>						

BAF Risk 3653	Quality & Safety Risk													
Strategic Priority	Provide outstanding care Be an Excellent Employer Collaborate with others	Risk Score 2024/2025					Risk Score 2025/2026							
Anticipated Closure Date	30/06/2025													
Review Date	1 May 2025	Initial	Aug/Sept	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target	
Executive Lead	Chief Nursing and Allied Health Professional Officer	8	12	12	12	12							6	
Lead Committee	Board / Quality Committee		→	→	→	→	→							
Context		Gaps in Control or Assurance												
<p>There is a risk that clinical quality and patient safety could be compromised if the following: gaps in staffing/staff morale group model planning, financial pressures and cost efficiencies compliance with regulatory bodies, are not managed and mitigated. The impact of this potential risk could lead to increase level of 'harm,' a reduction in clinical quality/safety across services and an increase in patient dissatisfaction.</p> <p>The CQC self-assessment outcomes have been reported through the Clinical Operational Boards (COBs) and Quality Improvement & Safety Committee (QIScom), this is the first time the Trust has reported against the new CQC framework. A number of actions, but no new risks have been identified through this process.</p> <p>Progress since the last review: Risk updated, changes to external bodies (ICB's/ NHSE) have been added and the mitigations reviewed. Quality and safety continues to be monitored at a local and Trust wide level - no new risks have been noted. This risk will be added to NCH and C's risk register when access to datix has been agreed.</p>		Adequate assurances are in place												
What's going well inc future opportunities		What are the current challenges inc future risks					How are these challenges being managed							
<p>The Trust as a real opportunity to ensure our patients and carers are involved in our CQC process moving forward - this work is being led by the co-production leads.</p> <p>The Trust has a comprehensive overview of it's CQC position, and any areas of need.</p> <p>The Trust is currently updating and strengthening it's EIA processes.</p> <p>Collaborative working with other organisations in relation to violence reduction.</p> <p>New policy on sexual safety has been agreed.</p> <p>CIP meetings are underway with Service Directors – to discuss new/ current schemes and identify potential impact on patient care.</p>		<p>Waiting lists</p> <p>Difficulties recruiting and retaining staff</p> <p>Staff morale</p> <p>Increase of incidents (no/low harm)</p> <p>Decrease in quality (patient care)</p> <p>Decrease in patient/carer experience</p> <p>The new CQC framework self assessment tool is more complex and has been challenging for services to complete</p>					<p>CQC self assessment and peer review processes</p> <p>Controls identified in risk 3619, 3620 and 3562</p> <p>Updated approach to violence and aggression against staff (including a zero tolerance model)</p> <p>Cost Improvement Programme - management and support in place (risk 3621)</p> <p>Equality Impact Assessment process</p> <p>Quality Impact Assessment process</p> <p>Quality data triangulation processes</p> <p>Incident huddles (weekly)</p> <p>Patient and carer feedback processes</p> <p>Patient Safety partner scrutiny</p> <p>The People Strategy objectives - focus on staff wellbeing</p> <p>Positive relation with CQC via monitoring meetings (quarterly)</p> <p>Group model governance in place - with robust communication plan</p> <p>Freedom to Speak Up Trust approach</p> <p>Board to ward visits</p> <p>QEWETT monitoring</p> <p>Quality dashboards</p> <p>Sexual safety assurance framework review</p>							

BAF Risk 3514	Cyber Security													
Strategic Priority	Be a Sustainable Organisation Be an Excellent Employer Provide Outstanding Care Collaborate with Others		Risk Score 2024/2025					Risk Score 2025/2026						
Anticipated Closure Date	28/11/2025													
Review Date	11 March 2025		Initial	Aug/Sept	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target
Executive Lead	Chief Information Officer		15	12	12	12	12	12						12
Lead Committee	Board / Finance & Infrastructure				→	→	→	→						
Context			Gaps in Control or Assurance											
<p>There is an increased risk of a cyber-attack upon the Trust which could result in a potential loss or disablement of services which would directly impact patients, service users and staff.</p> <p>Progress since the last review: There was a probe/attempt on the 4/3/2025 of one of the trust's public facing Web Servers by a Russian Federation address - our Security Operation Centre intervened - Issue 3686. As a result we have added further mitigations to the trusts Web Application Firewall (WAF). The trust are also prioritising moving the current websites located on that server to the trusts new digital platform programme infrastructure.</p>			Adequate assurances in place											
Progress														
What's going well inc future opportunities			What are the current challenges inc future risks					How are these challenges being managed						
<p>There have been no Cyber security incidents over the last few months. We continue with the regular monthly Security Forum sessions with SBS Cyber team to review the security technical processes in each month and to have knowledge share around best practices. A full penetration test was carried out by SBS and all risks identified were mitigated.</p> <p>In Oct 24 we implemented a new industry best practice Security Incident and Event Management solution to the trust to increase protection – Microsoft Sentinel</p> <p>The NHS E Regional Cyber Lead attended Wider Exec on the 12th Nov to give the leadership team across the trust a presentation around the cyber threat NHS providers are facing and how to mitigate the level of threat.</p> <p>The BI and Digital Service and Wider Exec have piloted a new National Cyber Security Centre work life/personal life cyber training package – looking to roll out to the rest of the trust in the near future – not as mandatory training but as a extra resource.</p>			Outside Threat Factors					<p>Regular review of hardware and software status.</p> <p>Information Security Policy</p> <p>DSP (Data Security & Protection) Toolkit compliant</p> <p>SBS (Shared Business Support services) – Quality Assurance statement – DSP, ISO 27001 and CE+</p> <p>Recipient of CareCERT alerts</p> <p>Daily use of NHS Digital MDE ATP (Microsoft Defender Endpoint - Advanced Threat Protection) software.</p> <p>Training and awareness education activities for staff.</p> <p>National Cyber conversations</p>						

BAF Risk 3691	Failure to deliver a balanced financial plan in 25/26												
Strategic Priority	Be a Sustainable Organisation	Risk Score 2024/2025					Risk Score 2025/2026						
Anticipated Closure Date	31/03/2026												
Review Date	10 April 2025	Initial	Aug/Sept	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target
Executive Lead	Director of Finance & Resources	12					12						8
Lead Committee	Board/Finance & Infrastructure						N/A						
Context		Gaps in Control or Assurance											
<p>There is a risk that due to increasing inflationary pressures and a challenging efficiency target, the Trust may not deliver a balanced financial plan for 2025/26 which could impact on the delivery of services.</p> <p>Progress since the last review:</p>		Adequate assurances in place.											
Progress													
What's going well inc future opportunities	What are the current challenges inc future risks	How are these challenges being managed											
	The Trust could be required to further review areas of non-recurrent spend and discretionary commitments to support mitigating measures to address unfunded price and demand increases.	The Trust will focus on various efficiency and productivity improvements, supported by benchmarking and collaborative engagement with partners. In addition we will seek to identify discretionary expenditure and risk assess against other measures to mitigate the increase in cost pressure. This will include maximising planned and unplanned additional efficiencies, understanding the impact of the main cost drivers and maximising supply chain and procurement opportunities. In addition the Trust will continue in its discussions with commissioning bodies to agree funding or service delivery adjustments to support further mitigation											

BAF Risk 3699	Group Model Cultural Alignment												
Strategic Priority	Excellent Employer	Risk Score 2024/2025					Risk Score 2025/2026						
Anticipated Closure Date	31/06/2026												
Review Date	12 May 2025	Initial	Aug/Sept	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target
Executive Lead	Chief People Officer and Deputy Chief Executive	16					12						8
Lead Committee	Trust Board												
Context		Gaps in Control or Assurance											
There is a risk that staff morale and engagement may be adversely affected whilst we culturally align our two organisations		Adequate assurances in place.											
Progress since the last review:													
Progress													
What's going well inc future opportunities	What are the current challenges inc	How are these challenges being managed											
<ul style="list-style-type: none"> Teams across both organisations are connecting. Some joint team development sessions have also taken place in some of the support service teams – ie: people; communications. Strong partnership working in place across both organisations. Operational and Clinical leads linking up to share their intelligence ie: urgent community response services; unscheduled care services. Norfolk and Waveney Children and Young People's Services all linked up and being led by a single leadership team Joint governance systems and processes in place at Group Board and Committee level and first round of meetings starting to take place. Positive discussions taking place. Have aligned some national days across the group ie: staff networks day; international nurses day and national professional administrators day. Staff network leads connected and discussing future plans. 	Our people become disengaged and not motivated which could directly impact on the delivery of high quality care.	Building Trust Programme Plan OD Plan in place to align our two organisations positively - engagement activities planned with our people to agree revised values and behaviours - new clinical and care strategy from April 26 Regular Q&A sessions underpinned by relevant FAQs Strong partnership working in place with staff side in both organisations People strategies in both organisations focused on improving staff morale and engagement - implementation plan for 25/26 in place Service plans for 25/26 signed off Group Leadership Team established and meeting monthly Wider Leadership Forum set up - meeting quarterly from June 25 - focus on sharing, learning and developing together Annual staff survey and pulse surveys Service Assurance Committees in place where staff morale/engagement will be discussed											

BAF Risk 3654	Group model organisational structure												
Strategic Priority	Collaborate with others	Risk Score 2024/2025					Risk Score 2025/2026						
Anticipated Closure Date	31/03/2026												
Review Date	13 April 2025	Initial	Aug/Sept	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target
Executive Lead	Chief People Officer and Deputy Chief Executive	15	12	12	6	4	12						8
Lead Committee	Board						↑						
Context		Gaps in Control or Assurance											
<p>There is a risk that the implementation of the group model arrangements could lead to reduced board, executive and management oversight and support for the delivery of current plans leading to poor patient care and performance failures</p> <p>Progress since the last review: Consequence score increased as underscored previously. No evidence of CCS strategy or service plans not being delivered as a consequence of the group model, however, early days. Keep under close review.</p>		Adequate assurances in place.											
Progress													
What's going well inc future opportunities	What are the current challenges inc future risks	How are these challenges being managed											
Group Board announced and in place for April 2025. Business as usual activities being maintained. Programme Board in place with relevant workstreams identified.	Group model work and focus distracts from the business as usual activities. Programme board arrangement in place to focus on Group arrangements to mitigate.	<ol style="list-style-type: none"> 1. Leadership capacity and focus separated out to ensure the vast majority of staff in both organisations are focused on the core delivery elements of roles and are insulated from any organisational change activities 2. Small dedicated team focuses on leading and delivery the group model and preparing for any transaction process, to avoid people having to undertake multiple roles and functions 3. Board and executive activities balanced on the core requirements of care delivery vs future issues 4. 3 x Service Assurance Committees in place and met for the first time in May 2025. 											

BAF Risk 3655	Group Model transaction												
Strategic Priority	Collaborate with others	Risk Score 2024/2025					Risk Score 2025/2026						
Anticipated Closure Date	31/03/2026												
Review Date	9 May 2025	Initial	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target
Executive Lead	Chief People Officer and Deputy Chief Executive	9	9	9	9	6	9						6
Lead Committee	Board						↑						
Context		Gaps in Control or Assurance											
<p>There is a risk that the non-executive and executive and wider senior leadership capacity and expertise required to deliver the transaction to support the move to a new/single organisation, will result in failure to deliver the current quality, operational, workforce and financial performance and plans</p> <p>Progress since the last review: Risk description extended to include non-executive directors as we will be losing 3 of our current ones, 2 of whom are our vice chairs - 1 for each organisation and long standing Non-Execs. Recruitment process in train and interviews lined up for June/July 25 to mitigate this risk as hoping for handover time. Risk in relation to loss of historical knowledge of both organisations. No change to scoring at the current time as all 3 Non-Execs remain on the group Board. 1 leaves end June the other 2 in October 25.</p>		Adequate assurances in place.											
Progress													
What's going well inc future opportunities	What are the current challenges inc future risks	How are these challenges being managed											
Focus on BAU activities continues to be managed effectively and programme board established to manage establishing our group model. No unanticipated issues have arisen to date.	Making sure we are being realistic on what can and cannot be delivered for the remainder of this financial year.	<ol style="list-style-type: none"> 1. Capacity plan developed by executive teams 2. Individual priorities and objectives refined to accommodate this change 3. Agreement on work to defer or de-prioritise 4. Additional resources identified internal and external) to fulfil all planned priorities 5. Programme Board in place to manage workstreams for the group model 6. Recruitment Campaign in place and interviews scheduled for June/July 25 for the new non-executive directors. This should give sufficient time for a handover with our 2 Vice-Chairs. 											

BAF Risk 3656	Group Model: Stakeholder support												
Strategic Priority	Collaborate with others	Risk Score 2024/2025					Risk Score 2025/2026						
Anticipated Closure Date	31/03/2026												
Review Date	15 April 2025	Initial	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target
Executive Lead	CEO	9	9	9	6	6	6						3
Lead Committee	Board						→						
Context		Gaps in Control or Assurance											
If stakeholders withdraw their support, there is a risk that the group model programme and transaction could not be delivered and therefore impact the performance and delivery of the existing services of the Trust and sustainability in the future Progress since the last review: Stakeholder engagement and any issues discussed at fortnightly programme board. No issues raised to date. Letters of support received for strategic business case submission.		Adequate assurances in place.											
Progress													
What's going well inc future opportunities	What are the current challenges inc future risks	How are these challenges being managed											
Continued engagement with NHSE on the process of the group model and transaction. Agreement to engage Legal advisors to the support the process to Group and for the Transaction for both Trusts. Engagement work and plans continue develop under the director of the Group Programme Board	Insufficient stakeholder enagement and support.	Implementation of the programme communications plan including: 1. Engagement plan developed and enacted to ensure stakeholder management is undertaken well 2. Performance of the organisation and transformational work is undertaken – increasing trust and confidence as we go through this process 3. Regular 1:1s set up with key influencing leaders in local authorities and the NHS											

BAF Risk 3682	Group model and transaction												
Strategic Priority	Collaborate with Others	Risk Score 2024/2025					Risk Score 2025/2026						
Anticipated Closure Date	31/03/2026												
Review Date	15 April 2025	Initial	Aug/Sept	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target
Executive Lead	Director of Corporate Affairs	12				9	9						2
Lead Committee	Trust Board						→						
Context						Gaps in Control or Assurance							
<p>There is a risk that conflicts of interest between both CCS and NCHC Boards could exist at both at an individual board member and organisational level that would then lead to poor governance and a risk that the transaction leading to a single organisation being compromised.</p> <p>Progress since the last review: Discussions with Legal team and NHSE continue specifically relating to the decision to the transaction.</p>						Adequate assurances in place.							
Progress													
What's going well inc future opportunities			What are the current challenges inc future risks				How are these challenges being managed						
<p>Governance arrangements agreed for the Group Board and Committees including policy for managing conflicts of interest and joint policy for Fit and proper Persons Test. In addition due diligence arrangements which will help identify conflicts of interest agreed for the development of the full business case.</p>							<p>Due diligence work of the Group programme, Conflicts of interests policy, Board member declarations, FPPT policy, review of all contracts, Group HR workstream, Group Communications programme for managing stakeholder relationships. Regular briefing of board members.</p>						

BAF Risk: B	Quality of Care													
Strategic Priority	Continually improving standards of excellence		Risk Score 2024/2025					Risk Score 2025/2026					Target Score	
Anticipated Closure Date	30 June 2025													
Review Date	15 April 2025		Initial Score	Aug/Sept	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan		Feb/Mar
Executive Lead	Chief Nursing and Allied Health Professional Officer			16	16	16	16	16						
Lead Committee	Board, Quality Committee			→	→	→	→							
Context			Gaps in Control or Assurance											
If we cannot maintain good quality care for our patients across the Trust, we will increase the incidents of harm and a deterioration in patient experience			<p>Gaps in controls:</p> <ol style="list-style-type: none"> 1. Robust community safe staffing tool. 2. Workforce capacity not meeting the service demand, with high turnover, and increased acuity of patients. 3. Skills and resources to meet increasing dependency, acuity and complexity, demand in unplanned care. 4. Community accreditation, in conjunction with rolling out the Quality assurance tool. 5. Consistent staffing resource across 7 days reviewed and changes agreed. Implementation July 2025. 6. Investment into community service under national review (Darzi Report 2024). <p>Gaps in assurances:</p> <ol style="list-style-type: none"> 7. System learning from incidents 											
Progress														
What's going well inc future opportunities	What are the current challenges inc	How are these challenges being managed												
		<ol style="list-style-type: none"> 1. Robust learning from the Incidents framework- implementation of Patient Safety Incident Response Framework. 2. Quality standards for waiting safely. 3. Adherence to national standard for access to services. 4. Daily safe Staffing meeting (SSEG), twice weekly community SSEG. 5. Yearly establishment reviews for inpatient and community. 6. Implementation of Trust Strategy and outcome measures. 7. Patient experience and involvement strategy. 8. NHSE guidance on Temporary Escalation Spaces compliance. 												

BAF Risk No: F	Cyber Security													
Strategic Priority	Advancing our use of data and technology and being a future focussed organisation. 31 March 2025 15 April 2025 CIO Board/Finance & Infrastructure	Risk Score 2024/2025						Risk Score 2025/2026						
Anticipated Closure Date														
Review Date		Initial Score	Aug/Sept	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target Score	
Executive Lead						16	16						12	
Lead Committee						↑	→							
Context						Gaps in Control or Assurance								
If NCHC do not address cybersecurity threats then there is an increased likelihood of a major service disruption and possible compromise to patient care. Progress since the last review: The BAF risk and associated report for monitoring the cyber security position will be closed in light of digital services undertaking regular audits against NHS England and Data Security and Protection Toolkit (DSPT) cyber security protection recommendations. Management of the risk will continue to be undertaken by NCHC digital services alongside an active documented action plan. Scrutiny of the cyber security risk will be provided by NCHC digital services steering group and any new governance structures that are established														
Progress														
What's going well inc future opportunities				What are the current challenges inc				How are these challenges being managed						

BAF Risk: I	Intermediate bedded care capacity and flow													
Strategic Priority	Continually improving our standards of excellence / Deepening our integration with partners	Risk Score 2024/2025						Risk Score 2025/2026						
Anticipated Closure Date		30 April 2025												
Review Date	15 April 2025	Initial Score	Aug/Sept	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target Score	
Executive Lead	Matthew Winn					12	12						8	
Lead Committee	Board/Norfolk Adults Service Assurance Committee					↑	→							
Context						Gaps in Control or Assurance								
<p>If we are unable to provide the required capacity for intermediate bedded care (Pathway 2 in Discharge to Assess - D2A), by either reducing demand or increasing capacity, then we risk poor patient care and outcomes due to extended acute hospital admissions, reduced flow across Urgent and Emergency Care (UEC), poor short and long term health and care outcomes and increased cost for people due to extended stays in hospital care.</p> <p>Progress since the last review:</p>						<p>Gaps in controls:</p> <ol style="list-style-type: none"> 1. Current delays in process and capacity leading to patients increased levels of dependency minimising opportunity to reduce demand significantly. 2. Some intermediate bedded care remains funded short term, which if removed increases the risk 3. Care market capacity and access 4. Gaps in specialist workforce skills, most notably social workers and therapists to enable ways of working. <p>Gaps in assurances:</p> <ol style="list-style-type: none"> 5. Long term agreed demand and capacity model for intermediate care based on varying length of stay models 								
Progress														
What's going well inc future opportunities				What are the current challenges inc				How are these challenges being managed						
								<p>Keys controls:</p> <ol style="list-style-type: none"> 1. Discharge Programme Boards in place, both strategically with all system partners led by ICB, and operational in partnership with NCC to oversee improvements. 2. Senior patient flow meetings and strengthened governance process in place 3. Increased use of Business Intelligence with new discharge dashboard in development to track progress. Includes demand and capacity planning tool available. 4. New Willow Therapy Unit build and delivery programme. 5. Virtual Ward has expanded to all areas and is supporting pt flow and community step up capacity. Focus is now on care home support to prevent avoidable admissions. 6. Implemented new social care model and discharge from intermediate care units to improve pt outcome destinations 7. Use of surge capacity and opening of Birch unit while awaiting Willow Therapy Unit opening <p>Key assurances:</p> <ol style="list-style-type: none"> 8. Performance reports 						

BAF Risk: J	Long Term Financial Sustainability												
Strategic Priority	Being a future focused organisation	Risk Score 2024/2025					Risk Score 2025/2026						
Anticipated Closure Date	31 March 2030												
Review Date	10 April 2025	Initial Score	Aug/Sept	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target Score
Executive Lead	CFO					16	16						9
Lead Committee	Board/Finance & Infrastructure					↑	→						
Context		Gaps in Control or Assurance											
<p>If the Trust cannot secure efficiencies and/or additional resources, it may not be able to fund increasing demand for services in future years.</p> <p>Progress since the last review:</p> <ol style="list-style-type: none"> 2025/26 financially balanced plan submitted to NHS E Investment funding secured, including £4.0m to support (and prove the case of) left shift activity from acute to community services Of the £8.8m (5%) 2025/26 Efficiency programme 37%(£3.3m) of plans are fully developed and 25%(£2.2m) of plans have been identified as low risk 		<ol style="list-style-type: none"> No proven case that a funded acute to community shift in activity will deliver cash releasing efficiency for the system Gap in internal resources to roll out digital solutions Lack of multi-year funding agreements (revenue and capital) No sustainable central capital funding for digital innovations Government expectation that use of robotics and automation will significantly increase productivity, but unclear this will generate significant efficiencies in a community setting Increasing demands for services from an ageing population with co-morbidities may not be met by central government funding increases Conversion of system discussions on service reductions into deliverable efficiency plans to meet the efficiency target in 2025/26, and sustainable service delivery in subsequent years <p>Gaps in assurances:</p> <ol style="list-style-type: none"> No MTFP assurance as an ICS (long term plan for financial sustainability as a system) No assurance that the ICS collaborative working will continue due to changing landscape of both NHS E and ICBs 											
Progress													
What's going well inc future opportunities		What are the current challenges inc				How are these challenges being managed							
<ol style="list-style-type: none"> Building relations with system partners influencing importance of left shift opportunities. Initial conversations on Group model benefits, estates, corporate benchmarking two areas of focus Identifying opportunities for future income growth with proposed changes to the commissioners structures. 		<ol style="list-style-type: none"> Identifying a multi-year approach to efficiency planning (and delivery) with a greater weighting on recurrent efficiencies. Having the capacity (and skill set) for off the shelf investment / business cases to access available funding for investment opportunities (incl growth / left shift / digital) Data driven evidence to support business cases and benefits realisation 				<ol style="list-style-type: none"> Trust financial plans and policies Performance reporting and monitoring Efficiency project lead with Exec review of progress Contribution to fixed costs added to each revenue contract EDT agreement to fund a digital discovery team to identify potential digital efficiency solutions (to Jun-25) 							

BAF Risk: G	Delivery of 2025/26 Financial Plan													
Strategic Priority	Being a future focused organisation		Risk Score 2024/2025					Risk Score 2025/2026						
Anticipated Closure Date	31 March 2026													
Review Date	10 April 2025		Initial Score	Aug/Sept	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target Score
Executive Lead	CFO						16	16						9
Lead Committee	Board/Finance & Infrastructure					↑	→							
Context			Gaps in Control or Assurance											
<p>If the Trust is not able to deliver the 2025/26 financial breakeven plan then the Trust risks contributing to an ICS failure to break even. This will lead to a need to repay the system (and Trust) deficit in future years and will result in additional scrutiny from NHS England</p> <p>Progress since the last review:</p>			<p>1. £4.0m left shift funding risk of losing (with stranded costs) if the case is unable to be proven that a left shift to community delivers cash releasing efficiency for the system</p> <p>2. £8.8m (5%) efficiency target, with £4.5m (51%) identified as high risk and £5.6m (63%) where plans are not yet fully developed</p> <p>3. Inflationary rises above 1.65% used in the financial plan (assumed for all non-pay expenditure)</p> <p>4. National Nursing profile review concludes an increase in nurses pay bands, beyond the current bandings</p> <p>5. Increasing demands for services from an ageing population with co-morbidities beyond our funding allocation</p> <p>6. Conversion of system discussions on service reductions into deliverable efficiency plans to meet the efficiency target in 2025/26, and sustainable service delivery in subsequent years</p> <p>Gaps in assurances:</p> <p>7. Delivery of bank expenditure reduction (10% from NHS E assessment)</p> <p>8. Delivery of agency expenditure reeduction (30% from NHS E assessment)</p> <p>9. Cost pressures arising from other system partners leading to additional financial constraints on NCH&C</p>											
Progress														
What's going well inc future opportunities			What are the current challenges inc					How are these challenges being managed						
<p>1. New group model, introduction of Service Assurance Committees to review performance, risks and monitor recovery plans</p> <p>2. Initial conversations on Group model benefits, estates, corporate benchmarking two areas of focus</p> <p>3. Project lead identified to support Directors and Services in the identification and delivery of efficiencies</p> <p>4. Development of CCS system "Verto" to report efficiencies underway</p>			<p>1. Identifying a multi-year approach to efficiency planning (and delivery) with a greater weighting on recurrent efficiencies</p> <p>2. Having the capacity (and skill set) to identify efficiencies taking and working outside of linear budget manager boundaries</p> <p>3. Changing landscape, with Group model, and also NHS E and ICB</p>					<p>1. Trust financial plans and policies</p> <p>2. Performance reporting and monitoring</p> <p>3. Efficiency project lead with Exec review of progress</p> <p>4. Contribution to fixed costs added to each new revenue contract</p> <p>5. EDT agreement to fund a digital discovery team to identify potential digital efficiency solutions (to Jun-25)</p>						