

BOARD ASSURANCE FRAMEWORK 2026-2027

BAF Dashboard 2026-27





Strategic Priority	Risk No	Risk Description	Executive Lead	Lead Committee	Initial	Risk Score 2025/26					Risk Score 2026/27						Anticipated Closure Date	
						Aug/ Sept	Oct/ Nov	Dec/ Jan	Feb/ Mar	Apr/ May	Jun/ Jul	Aug/ Sep	Oct/ Nov	Dec/ Jan	Feb/ Mar	Target		
People in control of their care	3904	There is a risk that insufficient resource and funding for digital development and implementation will prevent the organisation from delivering a patient engagement portal, limiting people's ability to be informed, involved and in control of their care	Chief Information Officer	Board / Finance & Infrastructure	12					12						6	31/10/2026	
	3751	Long waits for Children for a diagnostic assessment from our neurodevelopmental services.	Chief Medical Officer	Board / CYP Service Assurance Committee	20		16	16	16	16							6	31/03/2028
Innovate and transform our organisation	3837	There is a risk that if suppliers integrate AI (Artificial Intelligence) components or subcontract to third-party AI providers without disclosure or adequate contractual controls, then the organisation will have no visibility or assurance over how patient or operational data is processed and how AI influences clinical or business decisions, leading to potential patient harm, regulatory breaches (GDPR/DSPT), financial penalties, and reputational damage to the Trust.	Chief Information Officer	Board / Finance & Infrastructure	16			12	12	12							9	31/03/2027
	3917	There is a risk that our staff suffer change fatigue as we continuously look to innovate and transform our services, which in turn may impact on staff morale and the delivery of services.	Director of Strategy & Transformation	Board / Service Assurance Committees	9					9							6	31/12/2026
	3708	If the Trust cannot secure recurrent and long term efficiencies and/or additional resources, it may not be able to fund increasing demand for services in future years.	Chief Finance & Resources Officer	Board / Finance & Infrastructure / Service Assurance Committees	20	12	12	12	12	12							9	31/03/2028
	3709	If we do not address cybersecurity threats (such as data breaches and patient privacy, ransomware, operational disruption, insider threats and third-party risks) then there is an increased likelihood of a major service disruption and possible compromise to patient care.	Chief Information Officer	Board / Finance & Infrastructure	20	16	16	16	16	16							12	30/06/2027
	3770	There is a risk that fraudulent activity could result in significant loss to the Trust	Chief Finance & Resources Officer	Board / Audit & Risk Committee	16		9	9	9	9							6	31/03/2028
	3911	There is a risk that financial pressures, including limited access to funding and the impact from deconstruction of block contracts, will prevent the Trust from developing and delivering a balanced financial plan for 2026/27, resulting in financial instability and adverse impacts on service sustainability and delivery.	Chief Finance & Resources Officer	Board / Finance & Infrastructure	12					9							6	30/04/2027
	3895	There is a risk that services and the organisation is not commissioned well, due to changes in the restructuring of Integrated Care Boards, due to changes in personnel and relationships not established with staff and the Trust.	Chief Executive Officer	Board	9					9							3	30/03/2027
Valuing our colleagues	3699	There is a risk that staff morale and engagement may be adversely affected whilst we culturally align our new organisation.	Deputy Chief Executive	Board/SACs/PPEC	16	12	12	12	8	8							8	30/09/2026
	3914	There is a risk that there is insufficient leadership and support service capacity and capability to deliver the clinical and care strategy and 26/27 annual plans, which may impact on the delivery of high quality services.	Deputy Chief Executive	Board	12					12							8	31/03/2027
	3916	There is a risk of a reduction in staff wellbeing and increased staff sickness absence levels due to growing levels of demand on our services, which could impact on the delivery of patient care.	Deputy Chief Executive	Board / Service Assurance Committees	9					9							6	26/02/2027
	3915	There is a risk that staff morale may reduce as we work to develop and implement single support service structures, which in turn could impact on the level of service delivered to our clinical teams.	Deputy Chief Executive	Board	12					12							4	31/10/2026

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

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 3709	Cyber Security												
Strategic Priority	Innovate and transform our organisation	Risk Score 2025/2026					Risk Score 2026/2027						
Anticipated Closure Date	30 June 2027												
Review Date	23 April 2026	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	Chief Information Officer	20	16	16	16	16	16						12
Lead Committee	Board/Finance & Infrastructure		↓	→	→	→	→						
Context		Gaps in Control or Assurance											
If we do not address cybersecurity threats (such as data breaches and patient privacy, ransomware, operational disruption, insider threats and third-party risks) then there is an increased likelihood of a major service disruption and possible compromise to patient care.		Adequate assurances in place											
Progress since the last review: Continuing to monitor and prevent new threats where applicable.													
Progress													
What's going well inc future opportunities		What are the current challenges inc future risks				How are these challenges being managed							
<p>What's going well</p> <p>Regular Cyber Exercises: Ongoing EPRR exercises and updated BCPs ensure robust testing of incident response protocols.</p> <p>Alignment with National Standards: Exercises and protocols are aligned with NHS Digital standards and DSPT requirements, strengthening compliance.</p> <p>Embedded Governance: Cybersecurity governance principles are integrated into DSPT and risk management frameworks.</p> <p>Increased Penetration Testing: Frequency of penetration testing has been increased to six-monthly, improving proactive threat detection.</p> <p>Deployment of New Software: Enhanced ability of newly deployed systems to support security controls.</p> <p>Cyber Awareness Culture: Continued expansion of staff training beyond compliance to include simulated phishing and real-time awareness campaigns.</p> <p>Future Opportunities</p> <p>Advanced Threat Intelligence: Implement AI-driven threat detection and predictive analytics to identify vulnerabilities before exploitation.</p> <p>Supplier Assurance Framework: Develop a comprehensive third-party risk management program, including mandatory cyber compliance certifications.</p> <p>Cross-Trust Collaboration: Share best practices and threat intelligence across CCS and NCHC to create a unified cyber defense posture.</p> <p>Automation of Compliance: Use automation tools to streamline DSPT evidence collection and vulnerability patching.</p>		<p>1. Digital skills gaps among some staff increase vulnerabilities to the system.</p> <p>2. Desire to use new technology without full and proper assurance.</p> <p>3. Fragmented systems and interoperability issues.</p>				<p>1. EPRR exercises and updated BCPs.</p> <p>2. Review of digital literacy to include attitudinal change and awareness of cyber security.</p> <p>3. Mandatory training being undertaken by staff as an awareness.</p> <p>4. DSPT submission.</p> <p>5. Both trusts to keep up to date with patch testing, prevent access to untrusted services, reduce access to removable media, constrain network access, remove unnecessary services, constrain remote access and ensure / teach good user management.</p> <p>6. Upskill key digital staff in future cyber threat responses.</p> <p>7. Ensure all third party suppliers have BCPs, have they completed DSPT and whether they do table top exercises.</p> <p>8. Penetration testing has been increased to six monthly. Increased ability of new software deployed.</p> <p>9. Invested in interoperable platforms and alignment with NHS Digital architecture standards.</p>							

BAF Risk 3837	AI Use and Third Party Suppliers												
Strategic Priority	Innovate and transform our organisation	Risk Score 2025/2026					Risk Score 2026/2027						
Anticipated Closure Date	31 March 2027												
Review Date	07 April 2026	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	Chief Information Officer	16			12	12	12						9
Lead Committee	Board/Finance & Infrastructure					→	→						
Context		Gaps in Control or Assurance											
<p>There is a risk that if suppliers integrate AI components or subcontract to third-party AI providers without disclosure or adequate contractual controls, then the organisation will have no visibility or assurance over how patient or operational data is processed and how AI influences clinical or business decisions, leading to potential patient harm, regulatory breaches (GDPR/DSPT), financial penalties, and reputational damage to the Trust.</p> <p>Progress since the last review: AI Policy now in place with guidelines around procuring and building AI systems.</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>What's going well: Proactive risk identification through ensuring DPIAs and DSAs are completed prior to implementation. Also have controls such as AI policy and compliance with DCB0129 and 0160 are in place.</p> <p>Maintaining a central record of AI-enabled systems will help with transparency and control.</p> <p>Future Opportunities AI questions into tenders and renewal processes demonstrate embedding into procurement.</p> <p>Build an AI governance model aligned with NHS and ICO frameworks.</p> <p>Develop regular audits for AI bias and clinical safety audits to improve compliance and build trust.</p> <p>Continue to build staff awareness of AI risks and responsible use.</p> <p>Work with other NHS Trusts and regulators to share best practices and create standardised AI frameworks.</p>		<p>Undisclosed AI Components - Suppliers embedding third-party AI without transparency or contractual controls.</p> <p>Data Leakage / Privacy Breach- PID shared with external AI services or pasted into unsanctioned tools.</p> <p>Clinical Safety Failure - AI influencing diagnosis or treatment without validation or MHRA/DCB compliance.</p> <p>Bias- AI outputs disadvantaging certain populations.</p> <p>Model Drift / Uncontrolled Updates - AI performance degrading or changing without notice, leading to incorrect outputs.</p> <p>Automation Bias -Staff accepting AI outputs without critical review, introducing errors into records or decisions.</p> <p>Prompt Injection / Adversarial Manipulation - Malicious prompts or content causing AI to behave unpredictably or expose sensitive data.</p> <p>Records Management Failure - AI-generated content not properly retained or audited, creating medico-legal and FOI risks.</p> <p>Regulatory Non-Compliance - Breach of GDPR, DSPT, NHS AI standards, or MHRA guidance.</p> <p>Vendor Lock-In & Service Disruption - Dependency on proprietary AI services causing continuity issues or costly exits.</p> <p>Ethical & Safeguarding Risks- AI outputs containing harmful, inappropriate, or misleading content.</p>				<p>Ensure all suppliers declare all AI use and third-party integrations.</p> <p>Maintain our own central record of AI enabled systems and services and check against NHS AI registry.</p> <p>Include AI questions in tenders and renewal processes.</p> <p>All DPIA and DSAs to include explicit clauses on data handling and AI usage. DPIAs to be mandatory for all new software / programme accessing PID or staff data.</p> <p>Domain blocks in place for unsanctioned AI tools.</p> <p>AI Policy for new organisation.</p> <p>DCB0129 and 0160 compliance is mandated.</p> <p>Suppliers required to supply fairness and bias reports, along with audits of accuracy for AI outputs.</p> <p>Suppliers required to inform of AI updates written into contract and DPIA.</p>							

BAF Risk 3895	Relationships with NHS commissioning and regulatory organisations												
Strategic Priority	Work in partnership	Risk Score 2025/2026					Risk Score 2026/2027						
Anticipated Closure Date	30 March 2027												
Review Date	14 April 2026	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 Executive Officer						9						6
Lead Committee	Trust Board												
Context						Gaps in Control or Assurance							
There is a risk that services and the organisation is not commissioned well, due to changes in the restructuring of Integrated Care Boards, due to changes in personnel and relationships not established with staff and the Trust. Progress since the last review: New risk						Adequate assurances in place - Leadership team using stakeholder analysis to drive focus on relationships.							
Progress													
What's going well inc future opportunities			What are the current challenges inc future risks				How are these challenges being managed						
Need to develop/re-fresh relationships with both Board members and those leading work impacting the portfolio of services delivered by the Trust. Under our stakeholder relationships analysis, all executives and service directors have aligned relationships with ICB leads and are ensuring mutually beneficial relationships develop.			1) Key roles have not yet been appointed to for statutory functions, such as safeguarding. 2) new Iwads for contracts are not in place 3) both ICBs want to undertake contracting and strategic planning differently and the personell need to align to this way of operating first in the ICBs. 4) still a disononse between national regulatory expectations on 18 week pathways/services and the reality of ICBs commissioning enough capacity to achieve the performance standards.				a. Realignment of leaders in the team, once ICB teams and structures are finalised. b. Re-introduction of regular forums across our services and commissioners, so people have relationships to do business together. c. Invite new commissioning leads to visit services and teams d. Align executive board members with lead executives to trouble shoot any issues emerging						

BAF Risk 3708	Long Term Financial Sustainability													
Strategic Priority	Innovate and transform our organisation	Risk Score 2025/2026					Risk Score 2026/2027							
Anticipated Closure Date	31 March 2028													
Review Date	22 April 2026	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	CFRO	20	12	12	12	12	12						9	
Lead Committee	Board/Finance & Infrastructure/Service Assurance Committees		↓	→	→	→	→							
Context		Gaps in Control or Assurance												
If the Trust cannot secure recurrent and long term efficiencies and/or additional resources, it may not be able to fund increasing demand for services in future years.		Adequate assurances in place.												
Progress since the last review: Further analysis is underway as part of the annual planning process. The recurring gap is diminishing, but further work is required to understand the initiatives behind actions to eliminate the gap.														
Progress														
What's going well inc future opportunities			What are the current challenges inc future risks				How are these challenges being managed							
The Trust has delivered a surplus position in 25/26. The Trust has an approved medium term financial plan that achieves break even with modest efficiency requirements. 98% of the £7m of efficiencies identified to date on a recurring basis.			1. Identifying a multi-year approach to efficiency planning (and delivery) with a greater weighting on recurrent efficiencies. 2. 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) 3. Data driven evidence to support business cases and benefits realisation				1. Trust financial plans and robust rolling forecasting 2. Performance reporting and scenario monitoring 3. Efficiency targets embedded in operational plans and programme board governance 4. Contribution to fixed costs added to each revenue contract 5. Long-term transformation and investment programmes 6. Benchmarking against peer organisations							

BAF Risk 3770	Fraud													
Strategic Priority	Innovate and transform our organisation	Risk Score 2025/2026					Risk Score 2026/2027							
Anticipated Closure Date	31 March 2028													
Review Date	22 April 2026	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	CFRO	16		9	9	9	9						6	
Lead Committee	Board/Audit & Risk Committee				→	→	→							
Context					Gaps in Control or Assurance									
There is a risk that fraudulent activity could result in significant loss to the Trust Progress since the last review: Work continues to align our fraud processes under the new Trust structure and appointment of a single LCFS.					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						
Fraud specific training is scheduled, national alerts have been issued, and cross trust collaboration has increased to proactively manage fraud risks. Our 25/26 counter fraud standards self assessment for both legacy Trusts were positive.				Challenges include: - inadequate segregation of duties in small teams - scale and breadth of our operations - staff awareness and training - system limitations□				Strong control framework, including: - access and system controls - Policies and procedures - Governance and oversight - Monitoring and detection, with support from local counter fraud specialist and counter fraud champion. - Overview and relaunch of our counter fraud outcome based metrics						

BAF Risk 3751	Long waits for Children for a diagnostic assessment from our neurodevelopmental services												
Strategic Priority	People in control of their care	Risk Score 2025/2026					Risk Score 2026/2027						
Anticipated Closure Date	31 March 2028												
Review Date	14 April 2026	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 Medical Officer	20		16	16	16	16						6
Lead Committee	Group Board, CYP Service Assurance Committee				→	→	→						
Context		Gaps in Control or Assurance											
<p>There is a risk that if Children and Young People cannot access the NDS (Neurodevelopment Services) assessment in a timely fashion that this will impact on their learning and development through childhood.</p> <p>There is a risk to our teams that they will feel demoralised by the size of the waiting list and the inability to provide great care in a timely fashion.</p> <p>Progress since the last review: The First Phase of tackling the waiting lists (the sprint) has been completed with approximately 2400 children seen during that timeframe. Another 800 children were referred in to the services during that timeframe. We are now working on Phase 2 which will be twofold working addressing both the backlog and the BAU incoming referrals. This will involve digital solutions (e.g Heidi AVT), increasing our skill mixing staff workforce, and outsourcing to Pertemps. The risk remains unchanged as we still have a 6989 children waiting more than 52 weeks for an assessment so the rating is unchanged, although there has been a lot of work undertaken.</p>		<p>The controls in place will currently reduce the waiting list by 400 over the next 4 months, but the backlog remains high.</p> <p>The pilots will help, but will not help in the short-term.</p>											
What's going well inc future opportunities		What are the current challenges inc future risks					How are these challenges being managed						
<p>There is an NDS working group looking at how we manage the backlog of long waits.</p> <p>Shared learning across the Group re Service offers - Bedfordshire & Luton recruiting to a non-medical model pilot based on services in NCHC.</p> <p>Established relationships with Schools and Councils in regard to provision to support children waiting for a diagnosis.</p> <p>Digital Pilots in the three CYP (Children & Young People) Directorates to then share the processes more widely across the group to reduce times for triage/referral.</p> <p>Chief Medical Officer (CMO)engaging with GP hubs and other CMOs to look for other solutions.</p> <p>We now have one Service Director focusing on reducing waits with the current non-recurrent funding and another focusing on ensuring we have a sustainable model.</p> <p>We have a reliable method of tracking the data and outcomes.</p> <p>We are working mostly with one in-sourcing company as this gives us some leverage in regards to contracts and outcomes. Our teams have not worked with companies in this way and are learning through this process.</p> <p>We have made our LAs aware that we are asking for the school assessments to fit with timings of the work in-sourced.</p> <p>Our Norfolk CYP team have reviewed 19 cases seen by the in-sourcing company and the reviews were positive. We have shared this information across all our CYP services.</p> <p>Staff morale has improved where we are working through the longest waits as we are focused on and driving change in the waiting lists.</p> <p>We are aiming to remove 2000 children from our waiting list by 31.03.2026 and by 31.03.2028 to have no child waiting over 52 weeks for assessment.</p>		<p>Children will come to harm and this will impact on there longer term wellbeing.</p> <p>The backlog is great and the current workforce could not manage the backlog withough investment.</p> <p>Families are upset at the length of time thier children have to wait, and this causes complaints to be made.</p> <p>Staff morale is affected by the long waiting lists, as they see no solutions to this.</p>					<p>A single Group-wide validated dataset has been developed with will be the focus for looking at our long waits for NDS.</p> <p>Additional clinical capacity is being sought across the CYP Directorates with their own teams.</p> <p>Pilots are being undertaken looking at non-medical models for diagnostic pathways.</p> <p>Additional resource (non-recurrent funding) has been provided to manage the longest 400 children waiting on the list (156-208 week waits).</p> <p>Early intervention team and additional nurse resource for school present in Bedfordshire and Luton.</p> <p>Digital solutions being trialled include development of a patient resource portal, digital applications for referrals and triage, and ambient vice technology to reduce clinic administrative times.</p>						

BAF Risk 3699	Cultural Alignment												
Strategic Priority	Valuing our colleagues	Risk Score 2025/2026					Risk Score 2026/2027						
Anticipated Closure Date	30 September 2026												
Review Date	30 April 2026	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	12	12	8	8						8
Lead Committee	Services Assurance Committees/ PPEC/ Quality Committee/ 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 new organisation. Progress since the last review: This risk remains current. No change to scoring at this time. Will continue to monitor. Anticipated closure date extended to 30.09.26						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						
<ul style="list-style-type: none"> Support service teams have come together under single line management. Team development sessions continuing to take place. Discussions taking place within teams in relation to any proposed changes Strong partnership working continues. 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. MSK services across both Trusts being led by the same leadership team. Single governance systems and processes in place at Board and Committee level. Positive discussions taking place. Staff networks aligned and national days being celebrated across new organisation. 			Some pressures and challenges being seen across support service areas as we look to introduce new ways of working and a single team approach. Capacity pressures also being seen for these teams being able to manage the business-as-usual activities as well as integration activities. Actions in place to support leads with their pressures and areas of challenge.				Building Trust Programme Plan and regular review at execs OD Plan in place - refreshed values and new 5 year strategy agreed. Over 1000 individuals fed back on these. Regular Q&A sessions in place with executive team. Strong partnership working in place and new Staff Partnership Committee in place and meeting monthly. Consultation processes being put in place as needed. People plan for 26-27 agreed and being implemented. Service plans for 26/27 signed off Group Leadership Team established and meeting monthly Wider Leadership Forum set up - meeting quarterly - 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 3911	Financial Sustainability												
Strategic Priority	Innovate and transform our organisation	Risk Score 2025/2026					Risk Score 2026/2027						
Anticipated Closure Date	30 April 2027												
Review Date	05 May 2026	Initial	Aug/Sept	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target
Executive Lead	CFRO	12					9						6
Lead Committee	Board/Finance & Infrastructure						N/A						
Context		Gaps in Control or Assurance											
<p>There is a risk that financial pressures, including limited access to funding and the impact from deconstruction of block contracts, will prevent the Trust from developing and delivering a balanced financial plan for 2026/27, resulting in financial instability and adverse impacts on service sustainability and delivery.</p> <p>Progress since the last review: New risk.</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											
<ul style="list-style-type: none"> - Focus on improving financial capability across the organisation, increasing ownership and more informed decision-making - Progress in integrating core finance functions within the new Trust, creating more consistent and aligned processes - Exploring possible funding sources for NDS and inpatient wards progressing as a priority 	<ul style="list-style-type: none"> - Only 45% of efficiencies required identified to date - Impact of block deconstruction from 27/28 unknown - Impact of national nursing profile review an unknown financial risk to the Trust 	<p>The Trust will focus on various efficiency and productivity improvements, supported by benchmarking and collaborative engagement with partners - task force is being established.</p> <p>NHSE guidance on block deconstruction due in June.</p> <p>Modelling underway to understand the range of exposure regarding the review of nursing roles.</p>											

BAF Risk 3904	Digital Investment												
Strategic Priority	People in control of their care	Risk Score 2025/2026					Risk Score 2026/2027						
Anticipated Closure Date	31 October 2026												
Review Date	28 April 2026	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 Information Officer	12					12						6
Lead Committee	Trust Board / Finance & Infrastructure												
Context		Gaps in Control or Assurance											
<p>There is a risk that insufficient resource and funding for digital development and implementation will prevent the organisation from delivering a patient engagement portal, limiting people's ability to be informed, involved and in control of their care</p> <p>Progress since the last review: new risk</p>		<p>Adequate assurances in place.</p>											
Progress													
What's going well inc future opportunities	What are the current challenges inc future risks	How are these challenges being managed											
	<p>Lack of patient autonomy and involvement in care</p> <p>Increased risk of disjointed communication</p> <p>Reduced ability to detect deterioration or unmet need early</p> <p>Widening health inequalities</p> <p>Increased operational pressure and clinical burden</p> <p>poor patient experience and reputational harm</p> <p>Inability to scale or transform care models, EEC lags behind peers in digital readiness, innovation and adoption</p>	<p>Existing analogue records management and communications in place that maintain safety and engagement, but are labour intensive</p> <p>Bidding for funding where available</p>											

BAF Risk 3914	Leadership and support services capacity and capability to deliver strategy and annual plans												
Strategic Priority	Valuing our colleagues	Risk Score 2025/2026					Risk Score 2026/2027						
Anticipated Closure Date	31 March 2027												
Review Date	11 May 2026	Initial	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target
Executive Lead	Deputy Chief Executive	12					12						8
Lead Committee	Trust Board												
Context		Gaps in Control or Assurance											
There is a risk that there is insufficient leadership and support service capacity and capability to deliver the clinical and care strategy and 26/27 annual plans, which may impact on the delivery of high quality services. Progress since the last review: new risk		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											
- Clinical and Care strategy signed off and success measures agreed. - Service and enabling plans for 26/27 agreed and being implemented. - Priorities and capacity being kept under constant review. - Monthly leadership team meeting in place to discuss progress and challenges.	Lack of resources Too many demands in the same time period for the same resources	- Annual plan in place for all services and enabling functions - Regular review of priorities and capacity with Executive team and wider leadership team - Monthly review of capacity and priorities with Director of Strategy & Transformation, Chief Information Officer and Chief Finance and Resources Officer - Regular Board updates on progress - Service Assurance Committees - PMO structure in place											

BAF Risk 3915	Single support service structures												
Strategic Priority	Valuing our colleagues	Risk Score 2025/2026					Risk Score 2026/2027						
Anticipated Closure Date	31 October 2026												
Review Date	11 May 2026	Initial	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target
Executive Lead	Deputy Chief Executive	12					12						4
Lead Committee	Trust Board												
Context		Gaps in Control or Assurance											
<p>There is a risk that staff morale may reduce as we work to develop and implement single support service structures, which in turn could impact on the level of service delivered to our clinical teams.</p> <p>Progress since the last review: new risk</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											
<ul style="list-style-type: none"> - 2025 staff survey results for both sets of support service functions - Sept - Dec 2025 reporting period. - Regular briefing sessions. - Executive and senior leadership of all support service functions in place. - Team development sessions continue to be run across teams. 	<ul style="list-style-type: none"> - Bringing two teams together into one and harmonising systems and processes. 	<ul style="list-style-type: none"> - Executive lead in place for each support function - Operating as one Trust Board since April 2025 - Single line management structures in place for all since April 2026 - Harmonisation process for policies, systems and processes currently taking place - Staff Partnership Committee in place for new organisation - Formal consultation processes will take place as and when needed - Regular communications taking place 											

BAF Risk 3916	Reduction in staff wellbeing and increase in sickness absence												
Strategic Priority	Valuing our colleagues	Risk Score 2025/2026					Risk Score 2026/2027						
Anticipated Closure Date	26 February 2027												
Review Date	11 May 2026	Initial	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target
Executive Lead	Deputy Chief Executive	9					9						6
Lead Committee	Trust Board												
Context		Gaps in Control or Assurance											
<p>There is a risk of a reduction in staff wellbeing and increased staff sickness absence levels due to growing levels of demand on our services, which could impact on the delivery of patient care.</p> <p>Progress since the last review: new risk</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											
- Currently pulling together a 3 week Health and Wellbeing Festival which will run across the whole Trust. Service plans and enabling plans in place for all services for 26/27.	Staff burnout and increased sickness levels Too much demand on our services with insufficient capacity available to meet this	<ul style="list-style-type: none"> - Service Assurance Committees - Executive team and leadership team overview - Annual service plans - Workforce planning - Health and Wellbeing focus - Health and Wellbeing festival being run - mid June for 3 weeks - Staff Networks - Appraisal processes/regular 1:1s/Objective setting and supervision - Health and Wellbeing newsletters and regular communications 											

BAF Risk 3917	Taking our people with us												
Strategic Priority	Innovate and transform our organisation	Risk Score 2025/2026					Risk Score 2026/2027						
Anticipated Closure Date	31 December 2026												
Review Date	11 May 2026	Initial	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Apr/May	Jun/Jul	Aug/Sep	Oct/Nov	Dec/Jan	Feb/Mar	Target
Executive Lead	Director of Strategy & Resources	9					9						6
Lead Committee	Trust Board												
Context		Gaps in Control or Assurance											
<p>There is a risk that our staff suffer change fatigue as we continuously look to innovate and transform our services, which in turn may impact on staff morale and the delivery of services.</p> <p>Progress since the last review: new risk</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											
<ul style="list-style-type: none"> - QI academy in place. - Innovation and Transformation team in place and supporting services with change. - Service plans signed off for 26/27 and being shared across teams. - Objective setting process currently taking place to link everyones objectives to service plans and/or clinical and care strategy. 	<ul style="list-style-type: none"> Staff suffering change fatigue Staff becoming less engaged 	<ul style="list-style-type: none"> - Clinical and Care Strategy - Annual service and enabling plans - Service Assurance Committees - Regular Q&A sessions Trust wide - Leadership team meetings - Weekly check in - Regular newsletters - Staff Networks 											