

Board Assurance Framework

**Threats to the achievement of the Trusts strategic priorities and
multi-year goals**

April 2024

5 strategic priorities

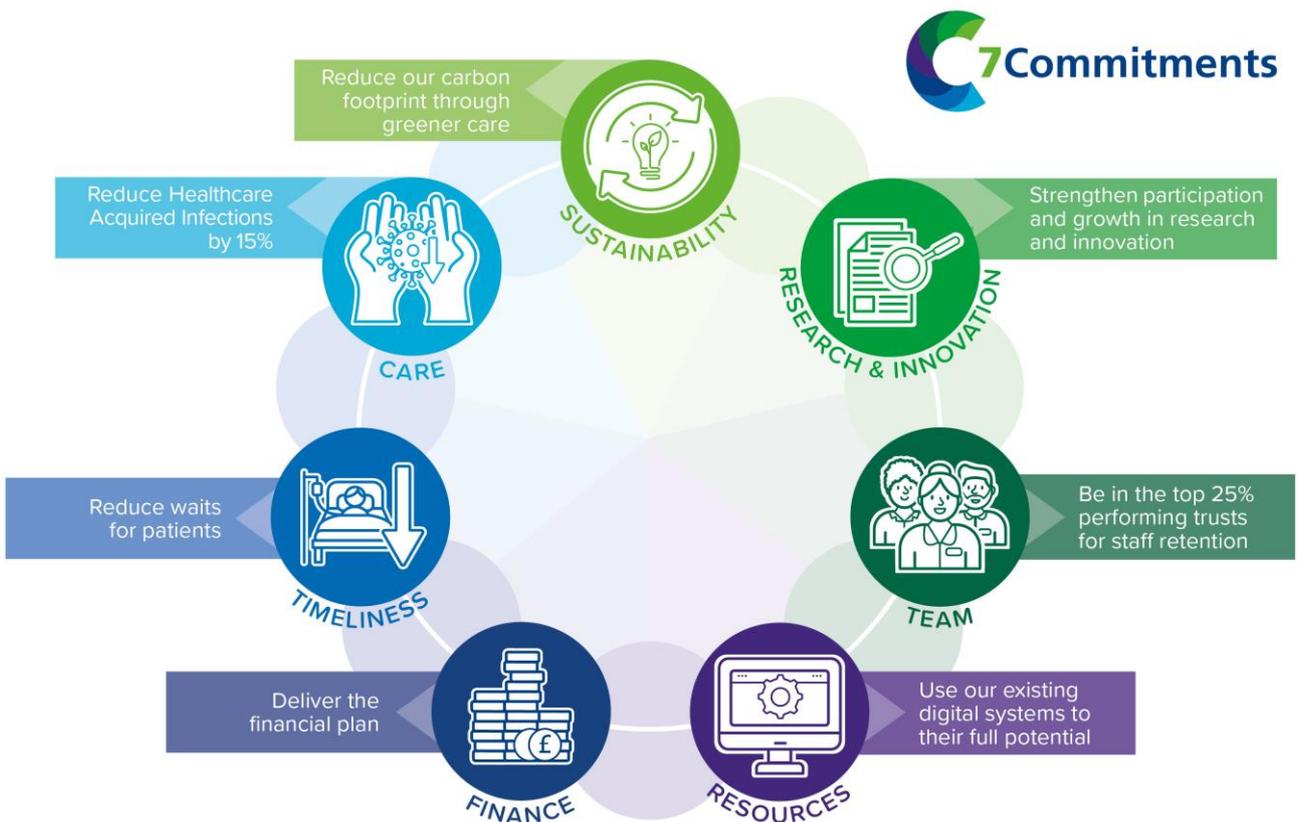
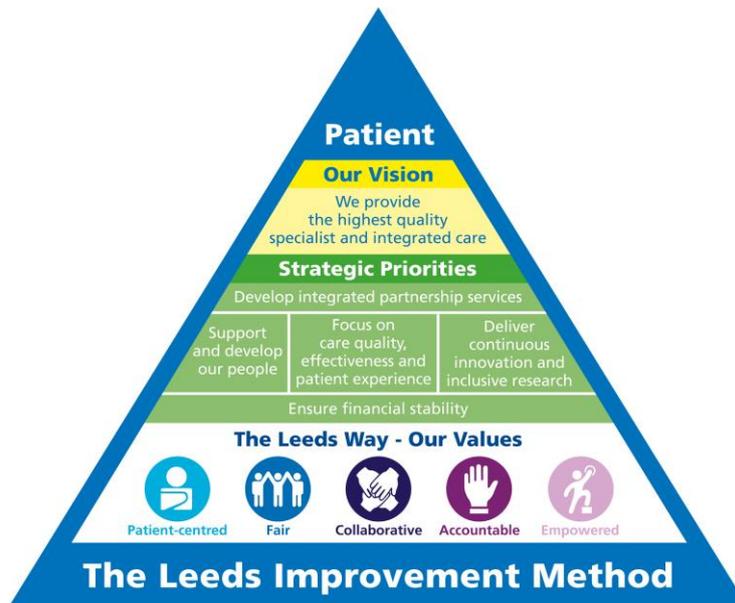
- Focus on care quality, effectiveness, and patient experience
- Support and develop our people
- Develop integrated partnership services
- Deliver continuous innovation and inclusive research
- Ensure financial stability

The Trust's multi-year goals

- Deliver a sustainable surplus by becoming the most efficient teaching hospital
- Deliver fit for purpose healthcare infrastructure
- Deliver top quartile holistic healthcare performance
- To be a leading academic healthcare institution
- To have an embedded culture of service improvement & innovation
- To have a consistent, high performing and sustainable workforce
- People receive person-centred care in the most appropriate environment and setting

Annual Commitments 2024/25

- Reduce wait for patients
- Reduce Healthcare Acquired Infections by 15%
- Reduce our carbon footprint through greener care
- Use our existing digital systems to their full potential
- Strengthen participation and growth in research and innovation
- Deliver the financial plan
- Be in the top 25% performing Trusts for staff retention



Trust Strategic Priority:

Focus on care quality, effectiveness, and patient experience

Strategic risk description	
<p>There is a risk that the Trust cannot achieve its strategic priority to focus on care quality, effectiveness, and patient experience due to:</p> <ul style="list-style-type: none"> Increased demand due to the impact of deprivation, multi-morbidity and an ageing population Increased demand – unplanned care, emergency department attendances, impacting on patient flow across the system Significant growth in the number of patients waiting for elective treatment Inability to treat patients within national standard timeframes for both planned and unplanned care due to capacity and demand and ongoing impact of Covid-19 Ageing estate and building/digital infrastructure leading to poor patient experience Insufficient workforce due to availability, competition, long term impact of Covid-19. <p>Resulting in potential harm to patients, impact on outcomes, experience and quality of care, impact on external relations, and long-term threat to service sustainability, regulatory breach (CQC).</p>	<p>Lead Executive Director(s): Rabina Tindale, Chief Nurse Date: June 2023 Date last reviewed: April 2024</p> <p>Multi-year goals Deliver top quartile holistic healthcare performance People receive person-centred care in the most appropriate environment and setting</p> <p>Annual commitments Reduce healthcare associated infections by 15% Reduce waits for patients Use our existing digital systems to their full potential</p> <p>Links to Corporate Risks CRRW4 (workforce) CRR04 (Staff absence, health, safety and wellbeing) CRRC1 (Healthcare Associated Infection) CRRC3 (patient harm – falls/pressure ulcers) CCRC4 (emergency care standard) CRRC5 (18 weeks RTT) CRRC7 (cancelled operations) CRRC6 (62-day cancer target) CRRC8 (52-week RTT) CRRC9 (diagnostic tests) CCRC10 (patient flow)</p>

Key Controls (to manage risks related to goal)	Key assurances (effectiveness of controls)
<ul style="list-style-type: none"> Quality Strategy 2021-24 Nursing and Midwifery Strategy Operational Transformation Strategy Trust capital plan Public Health and Health Inequalities Strategy Building the Leeds Way programme Leeds Improvement Method Quality and Safety review programme Integrated Accountability Framework Benchmarking against peers through model hospital and specialty GIRFT reviews Bed demand modelling and winter planning Corporate Risk Register 	<ul style="list-style-type: none"> National Inpatient and outpatient survey National Staff survey Complaints report to Board Serious incident report to QAC Quality Account CQC inspection report(s) CQC Regulation 10 – dignity and respect CQC Regulation 12 - safe care and treatment CQC Regulation 17 – good governance AQUA well-led development review and preparation for external review in response to new criteria for Well-led. Internal audit programme (PwC)

<ul style="list-style-type: none"> • Risk Management Committee oversight of risks related to patient safety, quality and experience: risk framework (risk categories/risk appetite) • Quality Assurance Committee oversight of patient safety and quality metrics • Finance and Performance Committee oversight of delivery against constitutional standards including in year deep dives • DIT oversight of delivery of the digital strategy • CQC engagement process • International recruitment plan and support programme 	<ul style="list-style-type: none"> • Health & Safety annual report, including Controls Assurance Audit • Quality Assurance Committee (QAC) annual report • Healthcare Associated infection annual report • DIT Committee annual report • Risk Management Committee annual report • Integrated Quality and Performance Report to the Trust Board, key metrics: mortality (SHMI), Healthcare Associated Infection, maternity safety, pressure ulcers, falls, patient safety incidents and Never Events. • Board Leadership visits (report to QAC) • Trust annual governance statement
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Significant gaps in control	Further assurance required
The international recruitment context is increasingly competitive	

Risk category and risk appetite statement		
Level 1 Risk Type	Risk appetite	Relevant to strategic risk
Workforce		
Workforce supply	Cautious	√
Workforce deployment	Cautious	√
Workforce retention	Cautious	√
Workforce performance	Cautious	
Operational		
Business Continuity	Cautious	
Change	Cautious	
Health and safety	Minimal	√
Information Governance	Cautious	√
Information Security	Cautious	
Information Technology	Cautious	√
Physical Assets	Cautious	
Clinical Risk		
Capacity Planning	Cautious	√
Infection Prevention and Control	Minimal	√
Patient Experience	Minimal	√
Patient Safety and Outcomes	Minimal	√
Research, Innovation and Development	Cautious	
Financial Risk		
Counter-fraud	Averse	
Financial management and waste reduction	Cautious	
Financial reporting	Minimal	
Revenue funding and liquidity	Cautious	
Supply Chain	Cautious	
External Risk		
Legal and Governance	Averse	
Partnership Working	Open	√

Regulatory	Averse	√
Strategic Planning	Cautious	

**Trust strategic priority:
To support and develop our people**

Strategic risk description	
<p>There is a risk that the Trust cannot achieve its strategic priority to support and develop our people due to:</p> <ul style="list-style-type: none"> • Reduced workforce availability due to sickness absence, including long term impact of Covid-19 and other respiratory viruses and infections • Sustained operational pressures leading to staff burnout; staff fatigue; staff leaving the Trust, senior staff taking early retirement. • Insufficient workforce supply due to national workforce shortages • Industrial action • Ageing workforce profile • Ageing estate and digital infrastructure leading to poor staff experience • Management time, capacity to implement, deliver and sustain change • Management support, capability and leadership <p>Resulting in staff leaving the organisation, inability to recruit to key specialty areas, impact on external relations, and long-term threat to service sustainability, regulatory breach (CQC).</p>	<p>Lead Executive Director(s): Jenny Lewis, Director of Human Resources and Organisational Learning Date: June 2023 Date last reviewed: April 2024</p> <p>Multi-year goals To have a consistent, high performing and sustainable workforce</p> <p>Annual commitments Be in the top 25% performing trust for staff retention Use our existing digital systems to their full potential Strengthen participation and growth in research and innovation</p> <p>Links to Corporate Risks CRRW4 (workforce) CRR04 (Staff absence, health, safety and wellbeing)</p>

Key Controls (to manage risks related to goal)	Key assurances (effectiveness of controls)
<ul style="list-style-type: none"> • Trust People Plan and refreshed people priorities • Operational Workforce Plan • 7C focus on staff retention • Health & Wellbeing strategy • Equality, Diversity & Inclusion strategy • Learning, Education and Training Strategy • Digital Strategy • Leeds One Workforce board and targeted recruitment as anchor institution • Corporate Risk CRR04 Staff health, safety and wellbeing • Staff vaccination programme and support • Freedom to speak up policy • Leeds Improvement Method – visual management and weekly Gemba walks • People Link/production boards • Joint Accountability Framework for Workforce • Escalation process from CSUs to Workforce Committee • Risk Management Committee oversight of risks related to workforce, staff safety, health, and wellbeing: risk framework (risk categories/risk appetite) 	<ul style="list-style-type: none"> • National Staff survey • Workforce Committee annual report • CQC inspection report(s) • AQUA well-led development review and preparation for external review in response to new criteria for Well-led. • CQC Regulation 18 - staffing • Internal audit programme (PwC) • Finance and Performance Committee annual report • DIT Committee annual report • Integrated Quality and Performance Report to the Trust Board • Hard Truths safer staffing report to Board • Freedom to speak up Guardian report • Publication of Trust’s annual Public Sector Equality Duty • Board leadership visits • Trust annual governance statement • Incident Command Centre in the event of industrial action with identification of lessons learned through debrief

<ul style="list-style-type: none"> • Workforce Committee and its sub-committees, oversight of progress against each of the People Priorities • DIT oversight of delivery of the digital strategy • Industrial Action Planning Group 	
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Significant gaps in control	Further assurance required

Risk category and risk appetite statement		
Level 1 Risk Type	Risk appetite	Relevant to strategic risk
Workforce		
Workforce supply	Cautious	√
Workforce deployment	Cautious	√
Workforce retention	Cautious	√
Workforce performance	Cautious	√
Operational		
Business Continuity	Cautious	√
Change	Cautious	
Health and safety	Minimal	√
Information Governance	Cautious	
Information Security	Cautious	
Information Technology	Cautious	
Physical Assets	Cautious	
Clinical Risk		
Capacity Planning	Cautious	√
Infection Prevention and Control	Minimal	√
Patient Experience	Minimal	√
Patient Safety and Outcomes	Minimal	√
Research, Innovation and Development	Cautious	
Financial Risk		
Counter-fraud	Averse	
Financial management and waste reduction	Cautious	
Financial reporting	Minimal	
Revenue funding and liquidity	Cautious	
Supply Chain	Cautious	
External Risk		
Legal and Governance	Averse	
Partnership Working	Open	√
Regulatory	Averse	√
Strategic Planning	Cautious	

**Trust strategic priority:
Develop integrated partnership services**

Strategic risk description	
<p>There is a risk that the Trust cannot achieve its strategic priority to develop integrated partnership services due to:</p> <ul style="list-style-type: none"> • Lack of system resilience due to workforce and funding pressures in community/primary/social care • Cultural differences with system partners • Lack of system resilience due to workforce and funding pressures in acute hospital partners • Lack of digital integration with system partners • Lack of commercial innovation expertise to develop and leverage strategic partnerships <p>Resulting in possible harm to patients, poor experience, impact on external relations, failure to deliver the transformation programme and a long-term threat to service sustainability, regulatory breach (CQC).</p>	<p>Lead Executive Director(s): Clare Smith, Chief Operating Officer Date: October 2021 Date last reviewed: April 2024</p> <p>Multi-year goals People receive person-centred care in the most appropriate environment and setting</p> <p>Annual commitments Reduce healthcare associated infections by 15% Reduce waits for patients Use our existing digital systems to their full potential</p> <p>Links to Corporate Risks CRRC10 (patient flow across the system) CRRW3 (workforce) CRR04 (Staff absence, health, safety and wellbeing)</p>

Key Controls (to manage risks related to goal)	Key assurances (effectiveness of controls)
<p>LTHT influences citywide and regional strategy and work programmes via membership of key partnership forums, ensuring strategic alignment with partners including:</p> <ul style="list-style-type: none"> • Membership of the West Yorkshire Integrated Care Partnership and Leeds Committee of the Integrated Care Board. • Membership of Health and Wellbeing Board, responsible for joint strategic assessment and health and wellbeing strategy for Leeds. • Membership of the West Yorkshire Association of Acute Trusts (WYAAT). <p>LTHT Operational Transformation Strategy 2022 - 27 and programme:</p> <ul style="list-style-type: none"> • Outpatients • Diagnostics • Planned Care • Unplanned Care • Cancer <p>Healthier Leeds Plan The Home First programme incorporating the redesign of intermediate care. Leeds Clinical Executive Group The One Workforce programme for Leeds includes specific priorities on integrated workforce design and working across organisations. West Yorkshire Association of Acute Trust (WYAAT) work programme and shared learning group Leeds Innovation Partnership</p>	<ul style="list-style-type: none"> • Outputs from the NHS England, CQC visits and reports • CQC system review • Healthwatch Leeds visits • National Inpatient and outpatient survey • Integrated Quality and Performance Report to the Trust Board • Progress reports to Board - LTHT Operational Transformation Strategy 2022 - 27 • How Does It Feel for Me patient experience balanced scorecard reviewed at Partnership Executive Group. • Reports to Board re WYAAT, ICB, key system transformation programmes e.g., HomeFirst programme, LTHT as an Anchor Institution etc.

<p>Leeds Anchor Network Formal partnerships/network arrangements with other specialist centres to ensure LTHT is an outstanding centre for specialist services e.g:</p> <ul style="list-style-type: none"> • Genomic Laboratory Hub with Newcastle and Sheffield: LTHT is the central lab location for the network • Children’s Hospital Alliance: collaborating with other Children’s Hospitals. 	
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Significant gaps in control	Further assurance required
<ul style="list-style-type: none"> • Current programme leadership and resourcing arrangements for system flow programme stops at end of April 2024. • NHS England policy constraints mean that LTHT has been unable to appoint a Director of Innovation to lead strategic commercial partnerships. 	

Risk category and risk appetite statement		
Level 1 Risk Type	Risk appetite	Relevant to strategic risk
Workforce		
Workforce supply	Cautious	√
Workforce deployment	Cautious	
Workforce retention	Cautious	
Workforce performance	Cautious	
Operational		
Business Continuity	Cautious	√
Change	Cautious	√
Health and safety	Minimal	
Information Governance	Cautious	
Information Security	Cautious	
Information Technology	Cautious	
Physical Assets	Cautious	
Clinical Risk		
Capacity Planning	Cautious	√
Infection Prevention and Control	Minimal	
Patient Experience	Minimal	√
Patient Safety and Outcomes	Minimal	√
Research, Innovation and Development	Cautious	
Financial Risk		
Counter-fraud	Averse	
Financial management and waste reduction	Cautious	√
Financial reporting	Minimal	
Revenue funding and liquidity	Cautious	
Supply Chain	Cautious	
External Risk		
Legal and Governance	Averse	
Partnership Working	Open	√
Regulatory	Averse	√
Strategic Planning	Cautious	√

Trust strategic priority:

Deliver continuous innovation and inclusive research

Strategic risk description

There is a risk that the Trust cannot achieve its strategic priority to deliver continuous innovation and inclusive research due to:

- The impact of clinical demand pressure crowding out research capacity.
- Delays to Hospitals of the Future (New Hospitals Programme)
- Inability to deliver high quality education, research, and innovation due to ageing estate and equipment and inadequate digital infrastructure
- Deskillling of workforce in partner hospitals due to increased specialisation
- The wider longer-term impact on research, education and training resulting from the pandemic, including recovering lost ground
- Possible lack of effective specialist services planning due to devolvement of specialist commissioning budgets to ICB level.

Resulting in failure to deliver research, innovation and education programmes, failure to deliver the innovation village project, impact on staff recruitment and retention and award of research funding grants, timely and effective treatment of patients requiring specialist services, and the further development of future specialist services.

Lead Executive Director(s):
Magnus Harrison, Chief Medical Officer
Date: June 2023
Date last reviewed: April 2024

Multi-year goals
To be a leading academic healthcare institution
To have an embedded culture of service improvement and innovation
To have a consistent, high performing and sustainable workforce

Annual commitments
Strengthen participation and growth in research and innovation
Use our existing digital systems to their full potential

Links to Corporate Risks
CRRF1 (financial plan)
CRRW1 (nurse staffing)
CRRW2 (medical staffing)
CRRW3 (workforce)

Key Controls (to manage risks related to goal)

- Research and Innovation Strategy
- Research and Innovation Committee
- Risk Management Committee oversight of risks related to research and innovation, education and provision of specialist services
- Trust capital and estate plan
- Hospitals of the Future project
- LGI Development Site/Innovation Village project including redevelopment of the OMS
- Leeds Improvement Method
- Benchmarking against peers and through model hospital and specialty GIRFT reviews
- WYAAT Elective Co-ordination Group
- Planned Care Programme (Transformational Services Group)
- Planned Care Delivery Board (Leeds ICB)
- Leeds Innovation Partnership
- WY Investment Zone status
- Digital Strategy
- Learning, Education & Training (LET) Committee
- Learning, Education & Training Strategy
- Joint Education Strategy with University of Leeds, plan for collaboration to deliver excellence in education/training
- Joint Partnership Group with University of Leeds

Key assurances (effectiveness of controls)

- Research and Innovation Committee annual report
- CQC inspection report(s)
- Internal audit programme (PwC)
- Finance and Performance Committee annual report
- DIT Committee annual report
- Trust annual governance statement
- Learning, Education & Training Committee annual report
- LET Committee report
- Annual update on R&I Strategy
- Reports to Board on progress with the Innovation Village and OMS redevelopment

<ul style="list-style-type: none"> Leeds Academic Health Partnership 	
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Significant gaps in control	Further assurance required
<ul style="list-style-type: none"> NHS England policy constraints mean that LTHT has been unable to appoint a Director of Innovation to lead strategic commercial partnerships. 	

Risk category and risk appetite statement		
Level 1 Risk Type	Risk appetite	Relevant to strategic risk
Workforce		
Workforce supply	Cautious	√
Workforce deployment	Cautious	
Workforce retention	Cautious	
Workforce performance	Cautious	
Operational		
Business Continuity	Cautious	
Change	Cautious	√
Health and safety	Minimal	
Information Governance	Cautious	
Information Security	Cautious	
Information Technology	Cautious	
Physical Assets	Cautious	
Clinical Risk		
Capacity Planning	Cautious	
Infection Prevention and Control	Minimal	
Patient Experience	Minimal	
Patient Safety and Outcomes	Minimal	√
Research, Innovation and Development	Cautious	√
Financial Risk		
Counter-fraud	Averse	
Financial management and waste reduction	Cautious	
Financial reporting	Minimal	
Revenue funding and liquidity	Cautious	√
Supply Chain	Cautious	
External Risk		
Legal and Governance	Averse	
Partnership Working	Open	√
Regulatory	Averse	√
Strategic Planning	Cautious	

**Trust strategic priority:
Ensure financial stability**

Strategic risk description	
<p>There is a risk that the Trust cannot achieve its strategic priority to ensure financial stability due to:</p> <ul style="list-style-type: none"> • Funding uncertainty and minimal funding growth. • Inflation • Inability to achieve efficiency requirements due to sustained operational pressures • Lack of capital investment to address estate/digital/equipment needs • Ageing population, deprivation, morbidity and health inequalities. • Funding in Social Care • Political and economic framework, legislation and regulatory changes. • Poor system financial performance <p>Resulting in failure to deliver a balanced financial plan and savings targets, possible harm to patients, poor experience, impact on external relations and a long-term threat to service sustainability.</p>	<p>Lead Executive Director(s): Simon Worthington, Director of Finance Date: June 2023 Date last reviewed: April 2024</p> <p>Multi-year goals Deliver a sustainable surplus by becoming the most efficient teaching hospital Deliver fit for purpose healthcare infrastructure</p> <p>Annual commitments Deliver the financial plan Reduce Waits for Patients Use our existing digital systems to their full potential</p> <p>Links to Corporate Risks CRRF1 (financial plan) CRRF2 (capital) CRR07 (Hospital of the Future Project) CRR08 (Pathology Project) CRR09 (LGI Site Development Project) CRR011 (DIT capacity)</p>

Key Controls (to manage risks related to goal)	Key assurances (effectiveness of controls)
<ul style="list-style-type: none"> • Financial governance framework. • Trust five-year financial plan in place (including five-year efficiency strategy) • Financial planning with WYICB and Leeds DOFs • Trust wide capital development plan (including estate, digital and medical equipment) in place • Integrated accountability and financial performance framework meetings with CSU's/ Business Units • Waste Reduction Programme in place with oversight by Waste Reduction Programme Board chaired by CEO. • Centrally managed Waste Reduction Programme Board • Strengthened expenditure controls e.g. vacancy management processes overseen by Trust Expenditure Review Group • Annual waste reduction conference • Finance Leeds Way Improvement Programme. • West Yorkshire and Harrogate Sustainability and Transformation Plan. The Trust has Integrated Care System status • Overarching Financial Governance framework including Standing Orders, Standing Financial Instructions and Scheme of Delegation, • Value for Money Self-Assessment Counter fraud strategy and team in place 	<ul style="list-style-type: none"> • Fundamental Financial Review to Board • CQC Use of Resources Framework review - rated outstanding for its use of resources, February 2019 • Integrated Quality and Performance Report to the Trust Board relevant metrics: key indicators re effective financial management • Finance and Performance Committee annual report. • Audit Committee annual report • Board approved five-year plan • Trust annual governance statement • Programme Management Office (PMO) report on delivery of waste reduction programme • Building Development Committee annual report • External auditors Value for money report • Internal audit programme reports re financial governance and BtIW programme (PWC) • Level Three accreditation for Future Focused Finance • Board approved financial sustainability self-assessment

<ul style="list-style-type: none"> • Trust Green Plan and decarbonisation plan. • CQC Use of Resources Framework • CSU strategic business plans • Leeds Improvement Method - Finance the Leeds Way Improvement Programme • Building Development Committee oversight of the Hospitals of the future project • Finance and Performance Committee oversight of key finance metrics • Audit Committee oversight of the effective design and operation of internal control, financial reporting, counter fraud activities and use of single tender waivers • Risk Management Committee oversight of risks related to finance, capital, Building the Leeds Way 	
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Significant gaps in control	Further assurance required

Risk category and risk appetite statement		
Level 1 Risk Type	Risk appetite	Relevant to strategic risk
Workforce		
Workforce supply	Cautious	
Workforce deployment	Cautious	
Workforce retention	Cautious	
Workforce performance	Cautious	
Operational		
Business Continuity	Cautious	
Change	Cautious	√
Health and safety	Minimal	
Information Governance	Cautious	
Information Security	Cautious	
Information Technology	Cautious	√
Physical Assets	Cautious	√
Clinical Risk		
Capacity Planning	Cautious	
Infection Prevention and Control	Minimal	
Patient Experience	Minimal	
Patient Safety and Outcomes	Minimal	
Research, Innovation and Development	Cautious	
Financial Risk		
Counter-fraud	Averse	√
Financial management and waste reduction	Cautious	√
Financial reporting	Minimal	√
Revenue funding and liquidity	Cautious	√
Supply Chain	Cautious	√
External Risk		
Legal and Governance	Averse	
Partnership Working	Open	

Regulatory	Averse	√
Strategic Planning	Cautious	