

Meeting: Trust Board Meeting in Public

Date: 24 September 2025

Assurance Report

Agenda item	Organisational Risk Report
EMC Lead	Joanna James, Head of Corporate Governance
Author	Joanna James, Head of Corporate Governance
Appendices	Appendix 1: Corporate Risk Register Update (CRR) Report Appendix 2: Board Assurance Framework (BAF) Report Appendix 3: Risk & Compliance Monitoring Group (RCMG) Report – August 2025
Onward governance	n/a

Report overview

This report provides an overview of current top scoring risks within the organisation against the risk appetite. The information within this report is intended to support Board and Committee decision making.

Level of assurance

<input type="checkbox"/> Substantial assurance High level of confidence in delivery of objectives	<input checked="" type="checkbox"/> Acceptable assurance General confidence in delivery of objectives	<input type="checkbox"/> Partial assurance Some confidence in delivery of objectives	<input type="checkbox"/> No assurance No confidence in delivery of objectives
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Previously considered	Executive Management Committee – 09 September 2025 Audit Committee – 11 September 2025
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Decision	The Board is requested to: a) Take assurance from the contents of the report and utilise this, including the summary of top scoring risks and the risk appetite, in decision making. b) Note the revised BAF in line with the BHT Clinical Strategy (approved May 2025).
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Relevant strategic priority

Outstanding Care <input checked="" type="checkbox"/>	Healthy Communities <input checked="" type="checkbox"/>	Great Place to Work <input checked="" type="checkbox"/>	Net Zero <input checked="" type="checkbox"/>
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Relevant breakthrough objective – 2025/26

<input type="checkbox"/> Reduction in emergency admissions <input type="checkbox"/> Reduction in elective waiting times	<input type="checkbox"/> Supporting people to live healthier lives	<input type="checkbox"/> Zero tolerance to bullying	<input checked="" type="checkbox"/> Governance / Statutory Requirement
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Implications / Impact

Quality	Quality & Safety is considered for both planned and emergency care within the Board Assurance Framework. An additional risk related specifically
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	to Patient Experience has also been included, the detail of which will be included for the next report.
People (BHT colleagues)	A specific risk related to BHT colleagues is included within the Board Assurance Framework.
Risk: link to Board Assurance Framework (BAF) and local or Corporate Risk Register	This paper attempts to highlight and map risks from the Corporate Risk Register (CRR) aligned to the Trust's strategic objectives and principal risks.
Financial	A specific risk related to delivery of the financial plan is included within the Board Assurance Framework.
Compliance	An effective, comprehensive process is required to be in place to identify, understand, monitor and address current and future risks to the organisation
Partnership: consultation / communication	A specific risk related to Integrated Working is included within the Board Assurance Framework.
Equality	A specific risk related to Health Inequalities is included within the Board Assurance Framework.

Executive Summary

The purpose of this report is to provide a summary of current risk within the organisation considering the detail of both those risks within the Corporate Risk Register (CRR) and the Board Assurance Framework (BAF).

The Trust is carrying risk in line with the Board's appetite related to the infrastructure (digital and estate) and finance but is open to more risk in the delivery of its other objectives.

There are currently 12 risks within the CRR.

Heatmap – September 2025

Consequence Likelihood	1	2	3	4	5
5			394 – Pharmacy Robotics Infrastructure 888 – Equipment Supply 903 – Continence Provision	410 – Wycombe Theatres 415 – SMH Theatres	
4				790 – Inadequate Aseptic Unit 851 – Paediatric Audiology Service 754 – Consultant Staffing, Burns Unit 875 – Industrial Action 819 – Provision of Psychiatric Care	
3					184 – Ageing Wycombe tower block (interior) 225 – Disruption to Trust technology caused by cyber incidents
2					
1					

Following the approval of the BHT Strategy 2025-2035 in May 2025, the strategic risks within the BAF have been reviewed with headline risks being approved by the Committee in July 2025. Additional detail has been added to these risks and further detail is available in appendix 2.

Focus is maintained on improving risk management understanding and processes across the organisation. A programme of training is being launched internally during Q2 2025.

A number of emerging risks were noted during Board and Committee meetings in July and August which relate to a broad range of areas and were discussed by the Executive Management Committee.

Report

1. Purpose

The purpose of this report is to provide a summary of current risk within the organisation considering the detail of both those risks within the Corporate Risk Register (CRR) and the Board Assurance Framework (BAF).

2. Background

This paper is considered by the Committee on an alternate monthly basis. The following sections provide an overview of the current position and changes since the previous report.

3. Current Position

3.1 Risk Mapped to Strategic Objectives

In May 2025, the Trust Board formally approved the BHT Strategy 2025-35. There are four key parts to this strategy:

- Integrate care
- Delivery of excellence within core services
- Reduce health inequalities
- Focus on prevention.

These are supported by key enablers such as digitisation.

In line with this, the key risks affecting the delivery of this strategy have been reviewed and summarised as follows:

1. **Health Inequalities** – *if lifestyle factors and socioeconomic barriers within the local population cannot be addressed and/or there is limited uptake and engagement with health initiatives, local health inequalities may widen.*
2. **Integrated Working** – *if there is a lack of collaborative working across partner organisations, supported by the effective sharing of data, our services are unlikely to be sustainable in the future, and we are unlikely to improve population health outcomes of our local population.*
3. **Patient Experience** – *detail to be confirmed.*
4. **People** – *if the Trust cannot recruit and retain an engaged and motivated workforce, this may result in poor patient care.*
5. **Finance** – *if the Trust are unable to deliver the financial plan for 2025/26, there are consequences on future funding and relationships with system partners.*
To note – the wording of this will be amended to align with the risk related to longer term financial sustainability.
6. **Quality & Safety** – *if the demand for services continues to rise and actions planned/taken do not address this, there is a risk to the quality and safety of care provided by the Trust.*

NB. This is split into two sub-risks; Planned and Emergency Care.

7. **Enablers** – if the Trust is unable to provide appropriate digital and physical infrastructure, there is a risk to the delivery of high quality, safe, care and the provision of a positive environment for colleagues to work in.
NB. This is split into two sub-risks; Digital and Estate & Medical Equipment.

Table 1 below lists these risks alongside the risk appetite of the Board and a summary of related risk from the CRR to provide an overview of risk within each area. RAG rating is used to highlight those areas of most significant risk.

Strategic Risk	Risk Appetite (max. 5)	Strategic Risk Score	No. of Corporate Risks mapped to Objective	Maximum RRS* (Corporate Risks)	Minimum RRS* (Corporate Risks)	Average RRR - Mean (Corporate Risks)
Strategy Enablers Digital	Cautious (3)	9	1	15	15	15
Strategy Enablers Estate & Medical Equipment	Cautious (3)	15	4	12	16	15
Finance	Cautious (3)	15	0	-	-	0
Health Inequalities	Open (4)	9	0	-	-	0
Integrated Working	Open – Hungry (4.5)	8	0	-	-	0
Patient Experience	Cautious (3)	TBC				
People	Cautious (3)	9	1	16	16	16
Quality & Safety Emergency / Planned Care	Cautious (3)	9	7	20	6	14

Table 1. *RRS – Residual Risk Rating.

3.2 Risk Appetite

The Trust Board reviewed and approved a revised risk appetite statement in November 2024.

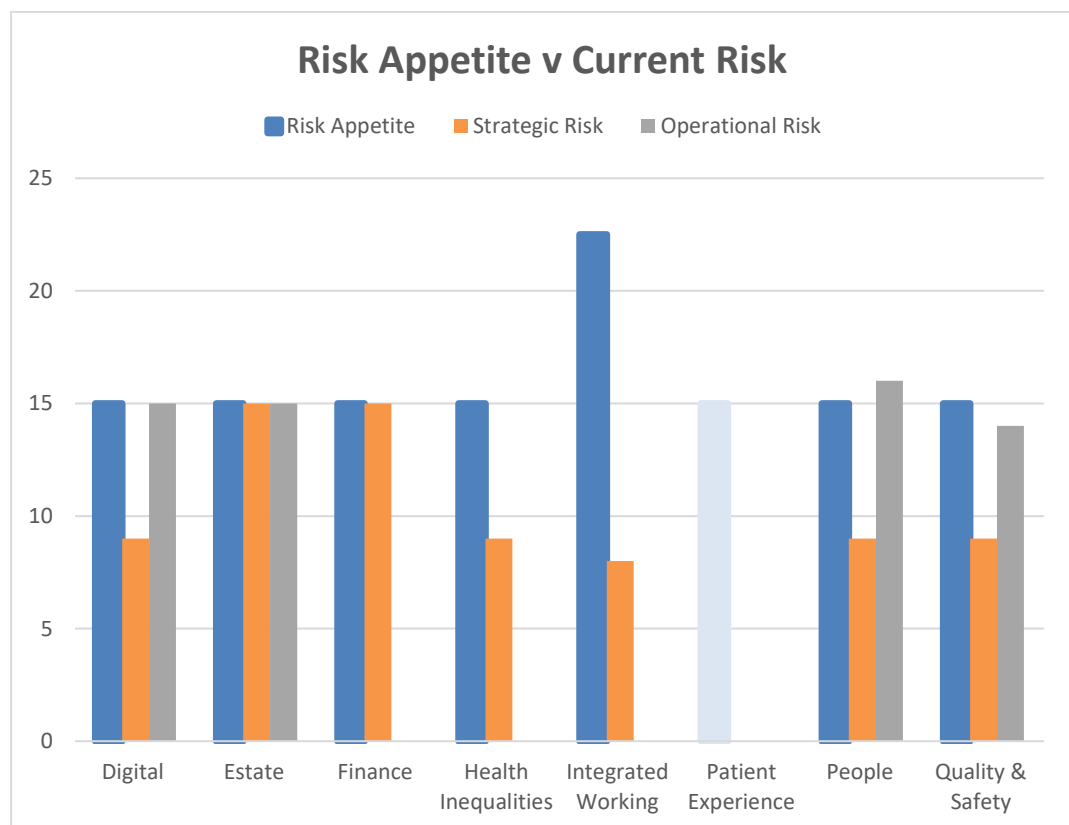
Buckinghamshire Healthcare NHS Trust recognises that its long-term sustainability depends upon the delivery of its strategic objectives and its relationships with its patients, the public and strategic partners.

The Trust has the lowest tolerance for risks that materially impact on the safety and wellbeing of our patients and colleagues and we will not accept these. We recognise that decisions about our level of exposure to risk must be taken in context but are committed to a proactive approach. We have a greater appetite for risk where we are persuaded there is potential for benefit to patient outcomes/experience, service quality and/or value for money, particularly where

this relates to collaboration with external partners, integration of services and wider population health. The Trust has the greatest appetite to pursue innovation and challenge current working practices where such positive gains can be anticipated whilst operating within appropriate governance arrangements and regulatory constraints.

Where we engage in risk strategies, we will ensure they are actively monitored and managed and would not hesitate to withdraw our exposure if benefits fail to materialise. Our risk appetite statement is dynamic, and its drafting is an iterative process that reflects the challenging environment facing the Trust and the wider NHS. The Trust Board will review the risk appetite statement annually.

Figure 1 below demonstrates the Trust is carrying slightly higher risk than set out in the risk appetite in relation to it's buildings and facilities and is in line with the Board's appetite related to quality and performance. The Trust is open to more risk in relation to the delivery of all other strategic objectives.



The Trust is carrying risk in line with the Board's appetite related to the infrastructure (digital and estate) and finance but is open to more risk in the delivery of its other objectives.

3.3 Corporate Risk Register (CRR)

There are currently 12 risks within the CRR and appendix 1 provides the most recent update for each of these along with the number of open and overdue actions and the time the risk has been on the CRR.

Since the last report in July 2025, the following risks have been added:

- Risk 888: Equipment Supply

- Risk 903: Continence Provision
- Risk 875: Industrial Action
- Risk 819: Provision of Psychiatric Care

3.4 Board Assurance Framework (BAF)

See section 3.1 for overview of changes. Appendix 2 provides further detail.

3.5 System Risk

The Buckinghamshire, Oxfordshire and Berkshire West (BOB) Integrated Care Board (ICB) risk report was last shared with EMC and Audit Committee in May 2025. This will be provided again in November 2025.

4. Risk Management

4.1 Organisation wide risk management

Risk management processes within the organisation are acknowledged to require improvement and remain under review and a programme of training is planned to launch later in Q2, run internally by the Associate Chief Nurse and Head of Corporate Governance.

4.2 KPI Dashboard

Table 2 provides high level information on how risk is, administratively, being managed each month.

Month	% Strategic Risks reviewed	% Operational Risks reviewed	% Actions Overdue Operational risks	Balance of assurance Internal v External	Number of new risks New or escalated to the CRR	Number of removed risks Closed/de-escalated from CRR	% risks with increased scores Strategic	% risks with reduced scores Strategic	% risks with static scores Strategic	% risks with increased scores Operational	% risks with reduced scores Operational	% risks with static scores Operational	Risks to be approved Operational
Feb 2025	100%	77%	33%	Med	0	0	0%	0%	100%	0%	13%	87%	-
Apr 2025	100%	77%	33%	Med	0	0	0%	0%	100%	0%	0%	100%	-
Jun 2025	75%	50%	20%	Med	0	0	0%	0%	100%	0%	20%	80%	43
Aug 2025	89%	31%	42%	Med	3	2	-	-	-	-	8%	92%	56

Table 2.

5. Emerging Risks

Table 3 summarises those new/emerging risks identified at Board and Board Committee meetings during the months of July and August.

Month	Meeting	New/Emerging Risks Noted
Jul 2025	EMC	- Plastic pipework in the retained estate; potential for this to become brittle over time, crack and release hot water as per the recent critical incident. Potential for harm to patients, visitors and colleagues as well as Trust property.
	Audit	None identified.
	F&BPC	None identified.
	Q&CGC	None identified.
	SPC	None identified.
	Public Board	None identified.
	Private Board	- BHPL & viability of current model.
Aug 2025	EMC	- Potential impact of committing to fund therapies re-build on other significant priorities across the Trust.
	F&BPC	- Potential for the health inequalities gap to widen through work to reduce waiting lists, noting the importance of robust data and monitoring to manage and mitigate against this. - Delivery of year-end financial position, noting the need for significant change related to current pay spend.
	Q&CGC	None identified.

Table 3.

Where risks are highlighted in grey, these are not currently reflected within the CRR or BAF. Table 4 below pulls together actions held by the Board and Committees where these have been set to address the identified risks.

Risk(s)	Action Details	Committee	Owner	Due Date
Plastic pipework in the retained estate	Overall risk assessment and action plan for Trust pipe infrastructure	EMC	CEFO	October 2025

Table 4.

Following discussion by the Executive Management Committee on 9 September, the following should be noted:

- Plastic pipework in the retained estate – *action underway to review.*
- BHPL – *review to commence following receipt of information on pharmacy costing/charges.*
- Potential impact of committing to fund therapies re-build on other significant priorities across the Trust – *considered through capital conversations.*
- Potential for health inequalities gap to widen through work to reduce waiting lists – *ongoing breakdown of data through inequalities lens.*

- Delivery of year-end financial position (pay spend) – *to be reflected within revised operational risk.*

6. Action required from the Board or Committee

The Committee is requested to:

- a) Take **assurance** from the contents of the report and utilise this, including the summary of top scoring risks and the risk appetite, in decision making.
- b) **Note** the revised BAF in line with the BHT Clinical Strategy (approved May 2025).

APPENDICES

Appendix 1: Corporate Risk Register (CRR) Update Report

Appendix 2: Board Assurance Framework (BAF) Report