

Appendix 1 – BAF extract for Board approval

As noted within the Performance and Finance Committee CKI report, the committee recommends a reduction in rating from 4x3=12 to 3x3=9. This is as a result of the risk being fully reviewed following completion of planned actions and associated improvements to controls during 2025/26. New actions have been articulated for 2026/27.

BAF7: Estates Development and Capital Equipment

Strategic Objectives:			
5. Drive technology enabled care			

Strategic Risk:			
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IF there is insufficient investment available and made in respect of the Trust's estate,	Then the Trust will be unable to maintain, develop and transform the physical estate of the Trust,	Resulting in a dilapidated, inconsistent and dated estate leading to an inability of the Trust to provide high-quality care; poor patient, staff and visitor experiences; and potential regulatory action.	Defined by Worse care - Cancelled or delayed appointments; Delayed diagnosis; Less modern care; Inconvenient locations Worse experience - Increase in complaints; Greater frequency and severity of incidents; Worse staff retention Worse governance - Increased unforecast reactive spend; Regulatory action; Increased Health and Safety risk Failure to reduce carbon footprint
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Lead Executive	Director of Estates and Facilities	Assurance committee	Performance and Finance Committee (PAF)
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	Impact	Likelihood	Score	Risk movement (last 3 quarters)			Risk rating
Inherent	5	4	20				9 Recommended
Residual	3	3	9	Q2 2025/26 4x4=16	Q3 2025/26 4x3=12	Q4 2025/26 4x3=12	
Target	3	2	6				

Key Controls	Assurances reported to Board and committees
a) Estates and Facilities Division's Strategies and Plans: <ol style="list-style-type: none"> Property and Estates Strategy 2025-2030 Property Strategy Green Plan 2024-2027 Master Control Plan and Development Control Plan for each major site. 	Aligned with Clinical Strategy. Each of the strategies is taken through the divisional DMT, Estates Strategy Programme Group (ESPG) one of the Committees (depending on content) and then the Board. Separately, the estates and property strategies are submitted to the ICB Estates Committee to ensure alignment to the wider system strategy. Annual ERIC (Estates Returns Information Collection) return to NHS England
b) Estates and Facilities Plans and Business Cases <ol style="list-style-type: none"> Master Control Plan and Development Control Plan for each major site. Annual and Medium Term Backlog Maintenance Plans 5 year annual capital and maintenance plan 	Six Facet Survey Specific condition reports (when deemed necessary) Each of the plans and business cases are taken through the Investment Group, BFBC Group (Building for Better Care) and/or ESGP with appropriate escalation to Trust Board and ICB Estates Committee
c) Estates and Facilities Performance metrics and KPIs Includes metrics for reactive and PPM works; HTM compliance; National standards of cleanliness; Food hygiene standards; environment standards; nutrition standards; waste segregation requirements; violence prevention and reduction standard; MHRA medical device regulations.	Annual PLACE (Patient Led Assessments of the Care Environment) Survey Annual PAM (Premises Assurance Model) survey HTM sub committees Health and Safety Committee EMC Compliance Report National standards of cleanliness report, cleanliness audits, food hygiene inspections to IPC Committee MHRA Compliance report to Medical Devices Management Group
d) Estates and Facilities financial reports Monthly divisional and Assistant Director level monthly report with performance metrics and forecast analysis. Monthly CIP and monthly departmental financial performance meetings	Monthly Divisional finance SMT meeting Monthly DMT meeting Monthly DAM and then EMC Monthly Capital spend meeting CIP Tracker report to Divisional Management Team and Divisional Accountability Meeting

e) Comprehensive asset register	Reporting to ESP Group, provides recommendations through Investment Group to BFBC Group with appropriate escalation to Trust Board.
f) Authorising Engineer audit reports	HTM Compliance tracker, Report to relevant HTM Groups, reporting to Health and Safety Committee, EMC and on to Trust Board.

Gaps in Controls and Assurances	Actions planned to improve controls and assurance	Impact of Actions on risk
<p>Gaps in control:</p> <ul style="list-style-type: none"> None documented <p>Gaps in assurance:</p> <ul style="list-style-type: none"> User satisfaction – hard and soft estate. Progress with capital maintenance programme Future PFI concession arrangements 	1. Implementation of property strategy and annual property plan – milestones to be achieved through to the end of strategy in 2030	Low
	2. Review proposed 2026/27 backlog maintenance programme against clinical priorities and capital availability	High
	3. Improved internal financial reporting of planned and reactive maintenance expenditure by end Q4 2025/26 currently being implemented	Medium
	4. Monthly review of backlog maintenance plan to ensure timely delivery (ongoing).	Medium
	5. Review of PFI concession within ESNEFT and termination dates end March 2026. NISTA National Infrastructure and Service Transformation Authority is to meet with the Trust March/April 2026	Medium
	6. Develop accurate programme of annual capital expenditure 2026/27	Medium
	7. Implementation of improved capital bidding, contract awards and construction management with effect of start of next financial year.	Medium

Target risk rating Audit committee questions

Audit and Risk Committee questions	Updated 17/02/2026
Based on current planned actions what will the risk rating be at end March 2027? (Include Impact and Likelihood, Overall Rating)	The Board approved a reduction in rating from 4x4=16 to 4x3=12 in January 2026. Consider further reduction in February 2026 to 9. Rationale for reduction: Reduced scoring of impact to target score of 3 due to the impact of actions taken in year and the impact of changes to NHS Property Services and potential acquisition.
Will the actions above deliver the end March 2027 target rating (Y/N), If No, what else needs to be done to deliver the target?	The actions above will maintain the current rating
When should we expect the overall target to be met (narrative description)	While the planned actions are expected to deliver a further reduction in the risk rating during the second quarter of 2026/27, the target rating of 6 represents a substantial improvement from the current position. As a result, achievement of the target rating is not forecast within 2026/27.

Definitions

BAF

The Board Assurance Framework (BAF) is designed to provide the Board with a simple but comprehensive method for effective and focused review of strategic risk. The BAF enables the Board to receive assurance from its committees that strategic risks are being appropriately managed.

Strategic risk

Strategic risks are those that represent major threats to achieving the Trust's strategic objectives or to its continued existence. Strategic risks also include key operational failures. Being clear about strategic risk allows the Board to ensure that the information it receives is pertinent to achievement of objectives and facilitates a clearer starting point for mitigation and control as well as business planning. These risks form the core content of the Board Assurance Framework.

Impact of actions (on controls / assurances)

For each of the actions recorded on the BAF, the impact (on controls / assurances) of completing these actions is indicated as either 'low', 'medium' or 'high'. This supports the effective evaluation of how planned actions are expected to strengthen control or assurance and reduce risk exposure.

High, medium low impact are defined as follows:

HIGH	Action is expected to significantly strengthen controls or close a major assurance gap. Potential residual risk rating reduction on completion.
MEDIUM	Action is expected to partially enhance controls or address a limited aspect of the risk. Improvement in control or assurance is expected but risk level will remain largely stable in the short term.
LOW	Action maintains or reinforces current control or assurance effectiveness; risk position likely unchanged.