



Royal Papworth Hospital
NHS Foundation Trust

Board Assurance Framework

February 2022

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1. Executive summary



Royal Papworth Hospital
NHS Foundation Trust

Purpose: The Board Assurance Framework (BAF) forms a part of the overall risk management and assurance process of the Trust and allows the Board to maintain oversight of the principal risks to delivery of the Trust's strategic objectives. All BAF risks are mapped to the Trust's strategic objectives and reporting is managed through the DATIX system and escalated through the relevant Trust Committee structures.

The BAF tracker report includes the Residual Risk Rating (RRR) and long-term trend for each BAF risk showing risks above Risk Appetite and within Appetite. Risks are mapped to the CQC Key Lines of Enquiry (KLOEs). Committee reports include further detail on controls and assurance for each BAF risk.

Headlines: Seventeen risks have a Residual Risk Rating above Risk Appetite.

New BAF Risks: None

Other updates:

BAF 1021: Cyber: RRR 20 (C5xL4): Cyber provision is functioning within expected parameters. One significant phishing attack was detected in the last reporting period, with no harm identified as staff recognised and reported this attempt. All cyber alerts are responded to as they are received and the CareCert records updated accordingly. All actions resulting from alerts received are tracked and acted upon. All available Log4j patches applied, and remaining vulnerabilities have had additional security applied to mitigate the risk

BAF 2985: Key Supplier Risk: RRR 20 (C5xL4): Previous contract escalation reported to the Board now close to resolution. Reviews being completed by the ICS on shared supplier risk. ICS strategy is in development on how to approach shared suppliers for services

BAF 678: Waiting List: RRR 16 (C4xL4): Waiting list continues to grow. Workforce related capacity constraints are limiting the volume of surgical operations undertaken each day. Patients continue to be treated in order of clinical priority.

BAF 2833: Secure Environment: RRR 16 (C4xL4): Work between Trust and partners has been initiated however from a practical perspective this requires continued monitoring

BAF 2532: COVID Pandemic: RRR 15 (C5xL3): Stable position. Community prevalence remains high but COVID patients in RPH currently less than 10. Regular reviews of the current position continue with the DIPC and IPC team. Risk rating to stay the same

BAF 3040: M.Abscessus: RRR 15 (C5xL3): No new patients identified. New governance structure in place and epidemiology study undergoing final review.

Closed Risks: None

Principal Risks (PR) The November BAF report reflects the earlier discussion at Board with principal risks relating to:

1. COVID19 pandemic and the need to sustain operational effort and resources to the COVID19 readiness and response.
2. Workforce, and the need to focus on recruitment and retention to support flow and our ability to deliver activity
3. Failure to optimise the new facility to deliver activity plans and meet patient demand.
4. The requirement to deliver our financial plan on a sustainable basis, addressing the underlying the structural deficit and our contribution to the wider system
5. Cyber security and data loss - the need to ensure that our services are resilient to cyber-attack and that residual risks to resilience are managed.

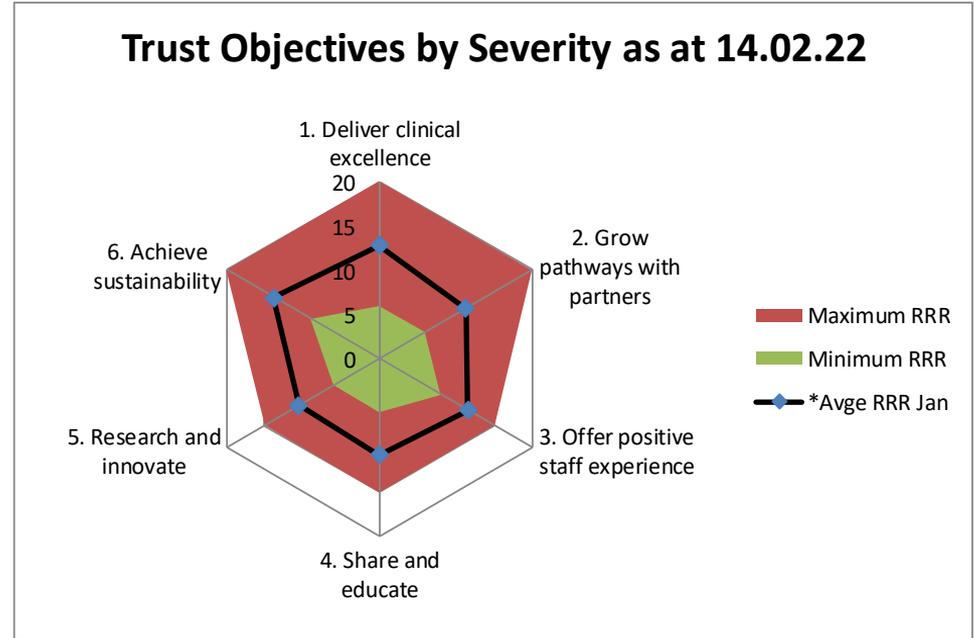
Recommendation

The Board is requested to note the BAF report for February 2022.

2. Risks Mapped to Strategic Objectives

| Trust Objective 2021/22 | *Avge RRR Dec | *Avge RRR Jan | Maximum RRR | Minimum RRR | change in Avge RRR |
|------------------------------------|---------------|---------------|-------------|-------------|--------------------|
| 1. Deliver clinical excellence | 12.8 | 12.8 | 20 | 6 | ● |
| 2. Grow pathways with partners | 11.3 | 11.3 | 20 | 6 | ● |
| 3. Offer positive staff experience | 11.6 | 11.6 | 15 | 8 | ● |
| 4. Share and educate | 10.8 | 10.8 | 15 | 6 | ● |
| 5. Research and innovate | 10.5 | 10.5 | 15 | 6 | ● |
| 6. Achieve sustainability | 13.9 | 13.9 | 20 | 9 | ● |

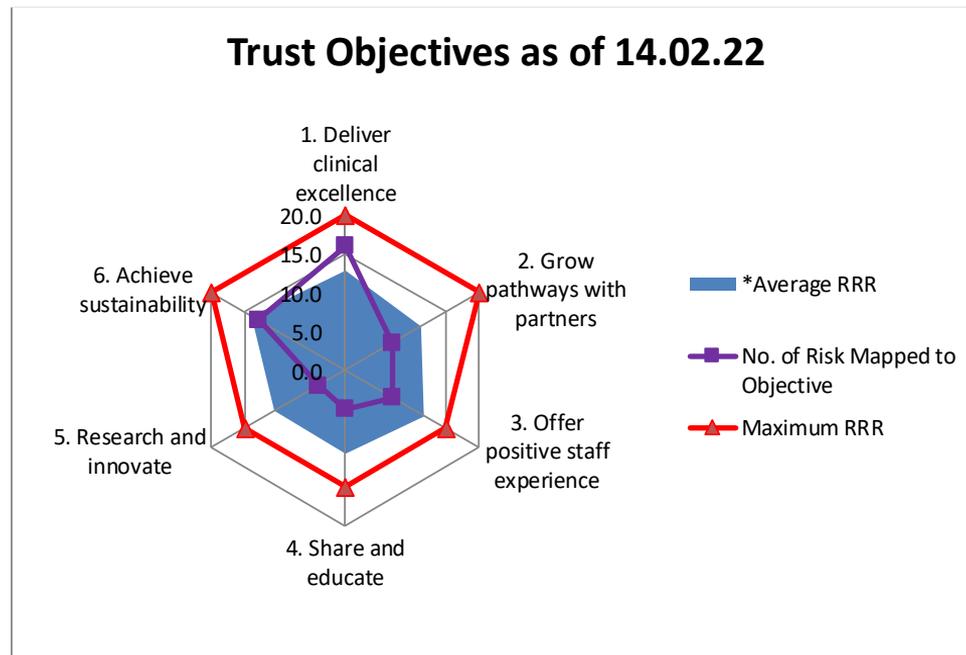
* Average for risks included in current tracker report



3. Strategic Objectives by Severity of RRR

| Trust Objective 2021/22 | No. of Risk Mapped to Objective | * Average RRR | Maximum RRR | Minimum RRR | Risks Opened | Risks Closed |
|------------------------------------|---------------------------------|---------------|-------------|-------------|--------------|--------------|
| 1. Deliver clinical excellence | 16 | 12.8 | 20 | 6 | | |
| 2. Grow pathways with partners | 7 | 11.3 | 20 | 6 | | |
| 3. Offer positive staff experience | 7 | 11.9 | 15 | 8 | | |
| 4. Share and educate | 5 | 10.8 | 15 | 6 | | |
| 5. Research and innovate | 4 | 10.5 | 15 | 6 | | |
| 6. Achieve sustainability | 13 | 14.0 | 20 | 9 | | |

* Average for risks included in current tracker report



4. BAF Tracker Risks Above Risk Appetite



Royal Papworth Hospital
NHS Foundation Trust

BAF Tracker 14/02/2022 (Committee update 16/02/22)

Produced by Anna Pearman, Risk Manager

| ID | Exec | Opened | Title | Nov-21 | Dec-21 | Jan-22 | Status since last month | Long running Trend | Risk Appetite | Risk Appetite achieved | % Risk Assurance against risk appetite | SO1 | SO2 | SO3 | SO4 | SO5 | SO6 | Responsible Committee | Safe | Effective | Finance | People Manag. & Cult. | Responsive | Transformation | |
|------|------|------------|---|--------|--------|--------|-------------------------|--------------------|---------------|------------------------|--|-----|-----|-----|-----|-----|-----|-----------------------|------|-----------|---------|-----------------------|------------|----------------|---|
| 675 | MS | 11/06/2014 | Failure to protect patient from harm from hospital acquired infections | 8 | 8 | 8 | ↔ | | 5 | ☑ | 63% | ★ | | | | | | Q&R | ★ | | | | | | |
| 678 | EM | 11/06/2014 | Waiting list management | 16 | 16 | 16 | ↔ | | 8 | ☑ | 50% | ★ | | | | | | Performance | | | | | | ★ | |
| 742 | MS | 30/01/2015 | Failure to meet safer staffing (NICE guidance and NQB) | 12 | 12 | 12 | ↔ | | 6 | ☑ | 50% | ★ | ★ | ★ | ★ | | | Q&R | ★ | | | | | | |
| 841 | EM | 01/02/2016 | Delivery of Efficiency Challenges - CIP Board approved | 12 | 12 | 12 | ↔ | | 8 | ☑ | 67% | | | | | | ★ | Performance | | ★ | | | | | |
| 1021 | AR | 17/02/2016 | Potential for cyber breach and data loss | 16 | 20 | 20 | ↔ | | 9 | ☑ | 45% | ★ | | | | | ★ | Performance | ★ | | | | | ★ | |
| 1853 | OM | 27/04/2018 | Staff turnover in excess of our target level | 15 | 15 | 15 | ↔ | | 8 | ☑ | 53% | ★ | | ★ | | | | Performance | | | | | ★ | | |
| 1854 | OM | 27/04/2018 | Unable to recruit number of staff with the required skills/experience | 10 | 12 | 12 | ↔ | | 8 | ☑ | 67% | ★ | | ★ | | | | Performance | ★ | | | | ★ | | |
| 1929 | OM | 23/07/2018 | Low levels of Staff Engagement | 12 | 12 | 12 | ↔ | | 4 | ☑ | 33% | ★ | | ★ | | | | Q&R | | | | | ★ | | |
| 2829 | TG | 23/02/2021 | Achieving financial balance | 16 | 16 | 16 | ↔ | | 8 | ☑ | 50% | | | | | | ★ | Performance | | | | ★ | | | |
| 2833 | TG | 06/02/2021 | Risk of maintaining safe and secure environment across the organisation | 16 | 16 | 16 | ↔ | | 6 | ☑ | 38% | ★ | | | | | | SPC | ★ | | | | | | |
| 2901 | EM | 06/05/2021 | Delivery of Trust 5 year strategy | 9 | 9 | 9 | ↔ | | 4 | ☑ | 44% | ★ | ★ | ★ | ★ | ★ | ★ | SPC | | ★ | ★ | ★ | ★ | ★ | |
| 2904 | TG | 11/05/2021 | Achieving financial balance at ICS level | 20 | 20 | 20 | ↔ | | 12 | ☑ | 60% | ★ | ★ | | | | ★ | Performance | | | ★ | | | | |
| 2985 | TG | 18/08/2021 | Key Supplier Risk | 20 | 20 | 20 | ↔ | | 8 | ☑ | 40% | ★ | | | | | | Performance | | ★ | | | | ★ | |
| 3008 | TG | 27/08/2021 | Clinical Research Facility Core Grant Funding | 12 | 12 | 12 | ↔ | | 9 | ☑ | 75% | ★ | ★ | | | ★ | ★ | SPC | | | | ★ | | ★ | |
| 3009 | TG | 27/08/2021 | Continuity of supply of consumable or services failure | 10 | 10 | 10 | ↔ | | 6 | ☑ | 60% | ★ | | | | | | Performance | ★ | ★ | ★ | | | ★ | |
| 3040 | MS | 29/09/2021 | M.Abscessus (linked to BAF risk ID675) | 15 | 15 | 15 | ↔ | | 10 | ☑ | 67% | ★ | | | ★ | ★ | ★ | Q&R | ★ | | | | | | |
| 3074 | TG | 16/11/2021 | NHS Reforms & ICS strategic risk | 12 | 12 | 12 | ↔ | | 8 | ☑ | 67% | ★ | | ★ | | ★ | | Performance | | ★ | ★ | | | ★ | ★ |

5. BAF Tracker Risks Below Risk Appetite



BAF Tracker 14/02/2022 (Committee update 16/02/22)

Produced by Anna Pearman, Risk Manager

| ID | Exec | Opened | Title | Nov-21 | Dec-21 | Jan-22 | Status since last month | Long running Trend | Risk Appetite | Risk Appetite achieved | % Risk Assurance against risk appetite | S01 | S02 | S03 | S04 | S05 | S06 | Responsible Committee | Safe | Effective | Finance | People Manag. & Cult. | Responsive | Transformation |
|------|------|------------|--|--------|--------|--------|-------------------------|--------------------|---------------|-------------------------------------|--|-----|-----|-----|-----|-----|-----|-----------------------|------|-----------|---------|-----------------------|------------|----------------|
| 730 | RH | 01/04/2015 | R&D strategic direction and recognition | 6 | 6 | 6 | ↔ | | 8 | <input checked="" type="checkbox"/> | 133% | | | | | ★ | | Q&R | | | | | ★ | |
| 858 | AR | 01/02/2016 | Lorenzo Optimisation Electronic Patient Record System - benefits | 8 | 8 | 8 | ↔ | | 12 | <input checked="" type="checkbox"/> | 150% | ★ | ★ | ★ | | | | SPC | | | | | | ★ |
| 2532 | MS | 05/03/2020 | COVID Pandemic | 10 | 15 | 15 | ↔ | | 25 | <input checked="" type="checkbox"/> | 167% | ★ | | ★ | | | ★ | Q&R | ★ | ★ | | ★ | ★ | |
| 2854 | EM | 15/03/2021 | ICS engagement | 6 | 6 | 6 | ↔ | | 6 | <input checked="" type="checkbox"/> | 100% | ★ | ★ | | ★ | | | SPC | | | | | | ★ |