

Board Assurance Framework

April 2022





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1. Executive summary

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: Nineteen risks have a Residual Risk Rating above Target Risk Rating.

New BAF Risks: None

Other updates:

BAF 2829: Achieving financial balance: RRR increased to 20 (C4XL5): Risks in relation to inpatient activity levels and inflation are crystallising. There is continued negotiation at ICS level and consideration of additional measures is underway.

BAF 2833: Secure Environment: RRR increased to 16 (C4xL4) following service delivery issues reported in March BAF. Action plans and reviews in place supported by board level meetings and follow up.

BAF 1854: Recruitment: RRR increased to 16 (C4xL4) in light of the continued reduction in number of applicants for advertisements and increasing vacancy rates for a number of roles across the Trust.

BAF 675: Hospital acquired infections: RRR increased to 12 (C4xL3) COVID IPC guidelines and testing guidance reviewed, and processes updated. SSI rate remains above national benchmark. Action plan in place be presented at Q&R.



BAF 858: Lorenzo Optimisation: RRR increased to 12 (C4xL3) following Dedalus announcement on future of Lorenzo EPR. Review underway.

Closed Risks: BAF 841: CIP programme has been delivered in year.

Principal Risks (PR) The Board has agreed the following as the principal risks to delivery of its strategic objectives which underpin the delivery of outstanding, safe and high-quality care:

PR1 Workforce: Failure to maintain a committed and skilled workforce in adequate numbers to support delivery of high-quality care, through staff that are aligned to our shared values, behaviours and purpose.

PR2 Productivity: Failure to achieve sufficient patient throughput to support timely and equitable access to care, and achieve financial stability, through optimising the productivity of our people and facilities.

PR3 Finances: Failure to deliver our financial plan on a sustainable basis addressing the underlying structural deficit and our contribution to the wider system through rigorous financial management and an effective response to uncertainties in the future mechanisms for commissioning and innovation in specialised services.

PR4 Cyber security and data loss: Failure to ensure that our services are as resilient as possible to ever present and escalating Cyber-attacks through the application of up-to-date cyber security controls, training, surveillance and early warning of potential threats, applying systems and management practices that ensure residual risks are mitigated appropriately.

Recommendation

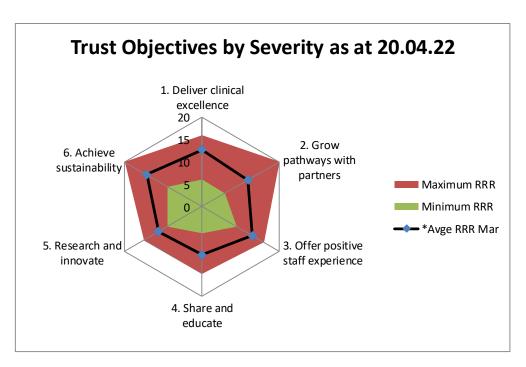
The Board is requested to note the BAF report for April 2022.

2. Risks Mapped to Strategic Objectives



Trust Objective 2021/22	*Avge RRR Feb	*Avge RRR Mar	Maximum RRR	Minimum RRR	change in Avge RRR
1. Deliver clinical excellence	12.4	12.8	16	6	
2. Grow pathways with partners	11.3	11.9	20	6	
3. Offer positive staff experience	11.9	13.0	16	9	
4. Share and educate	10.8	10.8	15	6	
5. Research and innovate	11.3	11.3	15	9	
6. Achieve sustainability	14.0	14.3	20	9	

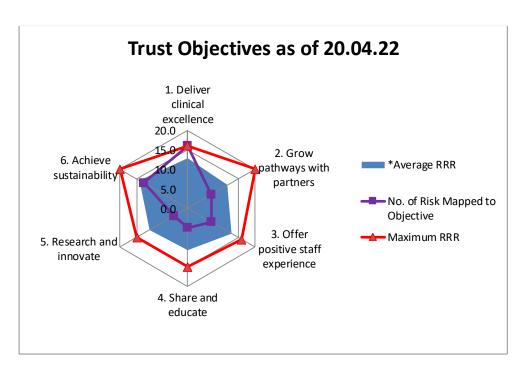
^{*} Average for risks included in current tracker report



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	16	6		
2. Grow pathways with partners	7	11.9	20	6		
3. Offer positive staff experience	7	13.0	16	9		
4. Share and educate	5	10.8	15	6		
5. Research and innovate	4	11.3	15	9		
6. Achieve sustainability	13	14.3	20	9		1



^{*} Average for risks included in current tracker report

4. BAF Tracker Risks Above Target

Royal Papworth Hospital NHS Foundation Trust

BAF Tracker Committee Update 20/04/2022

Produced by Anna Pearman, Risk Manager

ID	Exec	Opened	Title	Jan-22		Mar-	tatus s 	Long running Trend	Target Risk Rating	% TRR achieved	Risk Target achieved	SO1	so2	503	SO4	SO5 SO6	esponsible Committee	Safe	Effective	Finance	eople Manag. & Cult.	responsive Transformation
675	MS	11/06/2014	Failure to protect patient from harm from hospital aquired infections	∀	3 8	_	1	· · · · · · · · ·	5	42%	×	_	*	7	*	Y ,	Q&R	_ ✓	*	*	Ť	* *
678	EM		Waiting list management	16		16	- /		0	50%	×	2					Performance				+	<u>_</u>
730	RH	01/04/2015	R&D strategic direction and recognition	6) 10	0 0	\leftrightarrow		0	67%	×	X				→	Q&R				- 5	<u> </u>
742	MS	30/01/2015	Failure to meet safer staffing (NICE guidance and NQB)	12	12	2 12	\leftrightarrow		0	67%	×	<u> </u>	4	▲	4	A 4	Q&R	4				4
841	EM	01/02/2016	Delivery of Efficiency Challenges - CIP Board approved - CLOSED	12	_	2 12	\leftrightarrow		Ω	67%	×	_			A	4	Performance	_	4		+	+
858	AR	01/02/2016	Lorenzo Optimisation - Electronic Patient Record System - benefits	8	_	-	7		6	50%	×	4	4	→			SPC		_		+	-
1021	AR	17/02/2016	Potential for cyber breach and data loss	20	20	16		*********	0	56%	×	-				4	Performance	→			+	-
1853	OM	27/04/2018	Staff turnover in excess of our target level	15	15	15	\leftrightarrow		6	40%	×	→		→		4	Performance	_			<u>_</u>	
1854	OM		Unable to recruit number of staff with the required skills/experience	12	2 12	2 16	\overline{X}		8	50%	×	A		4			Performance	4		-		+
1929		23/07/2018	Low levels of Staff Engagement	12	_	_	\leftrightarrow	•••••	8	67%	×	-		4		4	Q&R			-	2	+
2532		05/03/2020	COVID Pandemic	15	1.5	15	\leftrightarrow		10	67%	×	1		4			Q&R	4	4	-	2 4	-
2829		23/02/2021	Achieving financial balance	16	16	3 20	1	.,,,,,,,,	8	40%	×					4	Performance			★	7	•
2833	1	06/02/2021	Maintaining safe and secure environment across the organisation	16	8	3 16	†		8	50%	×	1					SPC	1			+	+
2901	EM	06/05/2021	Delivery of Trust 5 year strategy	Ç	9 9	9 9	\leftrightarrow		6	67%	×	1	₩	☆	₩	☆ ☆	SPC		☆	☆	♣ ₹	*
2904		11/05/2021	Achieving financial balance at ICS level	20	20	20	\leftrightarrow	***************************************	12	60%	×		₩		7		Performance			→	7 -	1
2985	TG	18/08/2021	Key Supplier Risk	20	20	10	Ţ		6	60%	×	☆					Performance		*		4	k
3008			Clinical Research Facility Core Grant Funding	12	2 12	2 12	\leftrightarrow	•••••	9	75%	×	*	☆			☆ ☆	SPC			*	Ť	*
3009		27/08/2021	Continuity of supply of consumable or services failure	10	_	-	\leftrightarrow		6	60%	×	*	- 1				Performance	*	*	*	4	F -
3040	MS	29/09/2021	M.Abscessus (linked to BAF risk ID675)	15	15	15	\leftrightarrow	•••••	10	67%	×	*			☆	☆ ☆	Q&R	☆			Ť	
3074	TG	16/11/2021	NHS Reforms & ICS strategic risk	12	2 12	2 12			8	67%	×		\bigstar		*	***	Performance		☆	*	4	* *

5. BAF Tracker Risks Below Target



BAF Tracker Committee Update 20/04/2022

Produced by Anna Pearman, Risk Manager

ID	Exec	Opened	Title	Jan-22	Feb-22	Mar-22	tatus since last month	Long running Trend	Target Risk Rating	% TRR achieved	Risk Target achieved	801	802	803	804	SO5	908	esponsible Committee	Safe	Effective	Finance	Responsive	Transformation
~	~	▼	▼	~	~	~	S	▼	~	~	Ţ	~	~	~	~	▼	▼	Ŷ v	~	▼	▼	~ ~	~ ~
2854	EM	15/03/2021	ICS engagement	6	6	6	\leftrightarrow	***************************************	6	100%	V	*	*		*		SPC	•					\Rightarrow