



Royal Papworth Hospital
NHS Foundation Trust

Board Assurance Framework

August 2022

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1. Executive summary



Royal Papworth Hospital
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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). All BAF risks are assigned to a Board Committee and Committee reports include further detail on controls and assurance for each risk.

Headlines: Eighteen risks have a Residual Risk Rating above Target.

New BAF Risks:

BAF 3223 Productivity RRR 16 (C4xL4): If the trust does not recover its activity throughput and productivity to optimal levels **then** there is a risk that the financial stability of the Trust and ICS will be adversely impacted and the backlog of waiting patients for care will not be addressed. Cath lab and theatre productivity projects are in place with 6:4:2 meetings being embedded as 'business as usual' practice. These MDT meetings provide assurance that our capacity is maximised. Staffing to support the project is identified and in place.

Other updates:

BAF 678: Waiting List Management: This risk was increased to RRR 20 (C4xL5) in July, reflecting the pressures from the current constraints on activity. The risk has been linked to BAF 3223 Productivity.

BAF 2532: COVID Pandemic: RRR reduced to 6 (C3xL2). Staff absences and cases numbers in Region have reduced. Mitigating actions closely monitored by the IPC team. Risk appetite also reduced from Extreme to High (10) due to safety mitigations in place, including vaccine uptake and how COVID is managed.

BAF 675: Health Care Acquired Infections: RRR 16 (C4xL4). Following a patient testing positive for legionella an incident management team has been set up and an action plan put in place with communications to staff and patients.

Closed Risks: None.

Principal Risks (PR) The Board has agreed the following 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.

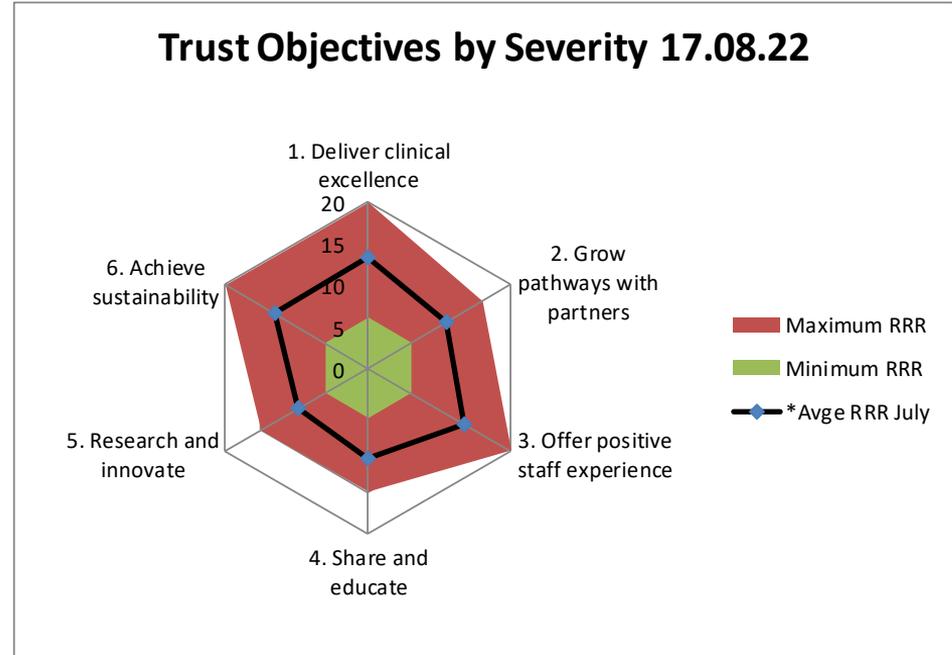
Recommendation

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

2. Risks Mapped to Strategic Objectives

Trust Objective 2022/23	* Avge RRR June	* Avge RRR July	Maximum RRR	Minimum RRR	change in Avge RRR
1. Deliver clinical excellence	13.4	13.4	20	6	●
2. Grow pathways with partners	11.0	11.0	16	6	●
3. Offer positive staff experience	14.0	13.4	20	6	●
4. Share and educate	10.8	10.8	15	6	●
5. Research and innovate	9.8	9.8	15	6	●
6. Achieve sustainability	13.3	13.2	20	6	●

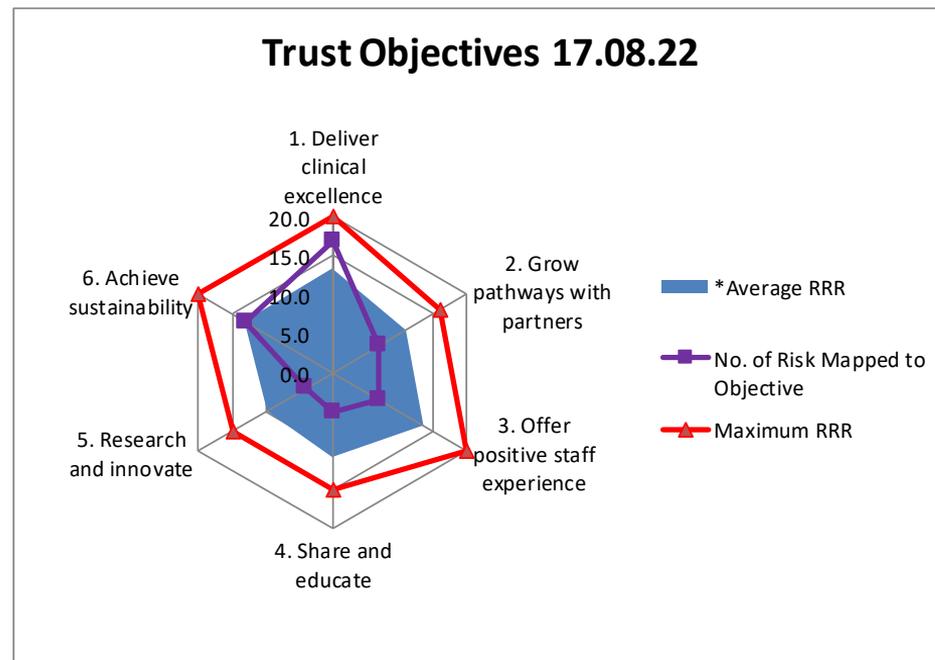
* Average for risks included in current tracker report



3. Strategic Objectives by Severity of RRR

Trust Objective 2022/23	No. of Risk Mapped to Objective	* Average RRR	Maximum RRR	Minimum RRR	Risks Opened	Risks Closed
1. Deliver clinical excellence	17	13.4	20	6	1	
2. Grow pathways with partners	7	11.0	16	6		
3. Offer positive staff experience	7	13.4	20	6		
4. Share and educate	5	10.8	15	6		
5. Research and innovate	4	9.8	15	6		
6. Achieve sustainability	13	13.2	20	6	1	

* Average for risks included in current tracker report



4. BAF Tracker Risks Above Target



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BAF Tracker 17/08/2022 Committee Update

ID	Exec	Opened	Title	May-22	Jun-22	Jul-22	Status since last month	Long running Trend (full data columns AS onwards)	Target Risk Rating	% RRR achieved	Risk Target achieved	Risk Appetite	SO1	SO2	SO3	SO4	SO5	SO6	Responsible Committee in addition to the Board	Safe	Effective	Finance	People Manag. & Cult.	Responsive	Transformation
675	MS	11/06/2014	Failure to protect patient from harm from hospital acquired infections	16	16	16	↔		6	38%	☒	4	★						Q&R	★					
678	EM	11/06/2014	Waiting list management	16	20	20	↔		8	40%	☒	8	★						Performance						★
730	RH	01/04/2015	R&D strategic direction and recognition	9	9	9	↔		6	67%	☒	8					★		Q&R						★
742	MS	30/01/2015	Failure to meet safer staffing (NICE guidance and NQB)	12	12	12	↔		8	67%	☒	6	★					★	Q&R	★					
858	AR	01/02/2016	Electronic Patient Record System - benefits	16	16	16	↔		6	38%	☒	6	★	★	★				SPC						★
1021	AR	17/02/2016	Potential for cyber breach and data loss	16	16	16	↔		9	56%	☒	9	★					★	Performance	★					★
1853	OM	27/04/2018	Staff turnover in excess of our target level	15	15	15	↔		9	60%	☒	6	★		★			★	Performance					★	
1854	OM	27/04/2018	Unable to recruit number of staff with the required skills/experience	16	16	16	↔		9	56%	☒	6	★		★			★	Performance	★			★		
1929	OM	23/07/2018	Low levels of Staff Engagement	16	20	20	↔		8	40%	☒	6	★		★			★	Q&R						
2829	TG	23/02/2021	Achieving financial balance	20	12	12	↔		8	67%	☒	8						★	Performance			★			
2833	TG	06/02/2021	Maintaining safe and secure environment across the organisation	16	16	16	↔		8	50%	☒	6	★						SPC	★					
2901	EM	06/05/2021	Delivery of Trust 5 year strategy	9	9	9	↔		6	67%	☒	6	★	★	★	★	★	★	SPC		★	★	★	★	★
2904	TG	11/05/2021	Achieving financial balance at ICS level	20	16	16	↔		12	75%	☒	12	★					★	Performance			★			
2985	TG	18/08/2021	Key Supplier Risk	10	10	10	↔		6	60%	☒	8	★						Performance		★				★
3009	TG	27/08/2021	Continuity of supply of consumable or services failure	12	12	12	↔		6	50%	☒	6	★						Performance	★	★	★			★
3040	MS	29/09/2021	M.Abscessus	15	15	15	↔		10	67%	☒	10	★			★	★	★	Q&R	★					
3074	TG	16/11/2021	NHS Reforms & ICS strategic risk	12	12	12	↔		8	67%	☒	8	★			★		★	Performance		★	★		★	★
3223	EM	22/07/2022	Activity recovery and productivity			16	↑		8	50%	☒	4	★					★	Performance	★	★	★			★

5. BAF Tracker Risks Below Target



BAF Tracker 17/08/2022 Committee Update

ID	Exec	Opened	Title	May-22	Jun-22	Jul-22	Status since last month	Long running Trend (full data columns AS onwards)	Target Risk Rating	% RRR achieved	Risk Target achieved	Risk Appetite	SO1	SO2	SO3	SO4	SO5	SO6	Responsible Committee in addition to the Board	Safe	Effective	Finance	People Manag. & Cult.	Responsive	Transformation
2532	MS	05/03/2020	COVID Pandemic	10	10	6	↓		10	167%	☑	10	★		★			★	Q&R	★	★		★	★	
2854	EM	15/03/2021	ICS engagement	6	6	6	↔		6	100%	☑	6	★	★		★			SPC						★
3008	TG	27/08/2021	Clinical Research Facility Core Grant Funding	9	6	6	↔		6	100%	☑	9	★	★				★	★	SPC			★		★