

Board Assurance Framework

February 2023



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

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

New/Closed BAF Risks: BAF2833 Maintaining a safe and secure environment has closed and will be removed from the tracker in the next report.

Other updates:

BAF 3261: Industrial Action: RRR 20 (C4xL5): Following Board discussions the description of the risk has been revised to focus is on the impact of strike action on our ability to provide services. There are now mandates for strike action from a number of trade unions which will see further action at the Trust.

BAF1853: Staff turnover: RRR 20 (C5xL4): Resourcing and Retention Programme will provide a structured and systematic approach to working collaboratively on a range of projects to improve retention. The CCL programme continues focusing staff engagement and building a positive and compassionate culture.

BAF 858: Electronic Patient Record System: RRR16 (C4xL4): Following Committee review the EPR risk has been updated, with controls measures reviewed and restated with sub-risks established and linked to the record.

BAF 675: Health Care Acquired Infections: RRR 16 (C4xL4). Monthly ICPPC in place and SSI stakeholder meeting now chaired by DIPC. IPC environment rounds have increased and ANTT (Aseptic Non-Touch Technique) training data is at 95% across the surgical pathway. Report developed to track and report to ICPPC.

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 February 2023.



NHS Foundation Trust

Royal Papworth Hospital

2. Risks Mapped to Strategic Objectives



Vo. of Risk Mapped Maximum **R**RR Average RRR Risks Opened Closed bjective Risks (O Trust Objective 2022/23 1. Deliver clinical excellence 17 14.2 20 6 6 11.2 16 6 2. Grow pathways with partners 6 3. Offer positive staff experience 8 14.9 20 12.0 15 9 4. Share and educate 4 15 6 5. Research and innovate 3 10.0 14 13.4 20 6 6. Achieve sustainability

* Average for risks included in current tracker report



3. Strategic Objectives by Severity of RRR



Avge RRR Dec Avge RRR Jan Minimum RRR RRR Trust Objective 2022/23 1. Deliver clinical excellence 14.2 14.2 20 6 11.2 2. Grow pathways with partners 11.2 16 6 14.9 3. Offer positive staff experience 14.9 20 6 12.0 4. Share and educate 12.0 15 9 5. Research and innovate 10.0 10.0 15 6 6. Achieve sustainability 13.4 13.4 20 6

* Average for risks included in current tracker report







BAF Tracker: Committee Update 16/02/23

9	Exec	Opened	Title	 Nov-22 	 Dec-22 	▲ Jan-23	Status since last month	Long running Trend (full data columns AS onwards)	Target Risk Rating	KRR achieved	🖌 Risk Target achieved	Risk /	 ▲ S01 ■ S01 	 502 503 		 SO5 	SO6	Responsible Committee in addition to the Board	▲ Safe	 Effective Einance 	 People Manag. & Cult. 	 Responsive Transformation
675	MS		Failure to protect patient from harm from hospital aquired infections	16	16	16	\leftrightarrow	·····	6	38%	×	4						Q&R	☆			_
678	AB		Waiting list management		20	20	\leftrightarrow	•••••	8	40%	×	8						Performance				\bigstar
742	MS	30/01/2015	Failure to meet safer staffing (NICE guidance and NQB)	12	12	12	\leftrightarrow	•••••	8	67%	×	6	$\land \downarrow$		\therefore		\bigstar	Q&R	\bigstar			
858	AR	01/02/2016	Electronic Patient Record System	16	16	16	\leftrightarrow		6	38%	×	6	\land	X				SPC				\bigstar
1021	AR	17/02/2016	Potential for cyber breach and data loss	16	16	16	↔	·····	9	56%	×	9	★				$\stackrel{\scriptstyle \star}{}$	Performance	\bigstar			\bigstar
1853	OM	27/04/2018	Staff turnover in excess of our target level	20	20	20	\leftrightarrow	•••••	9	45%	×	6	★				\bigstar	Workforce			\Rightarrow	
1854	OM	27/04/2018	Unable to recruit number of staff with the required skills/experience	16	16	16	\leftrightarrow		9	56%	×	6	\checkmark				☆	Workforce	☆		\bigstar	
1929	ОМ	23/07/2018	Low levels of Staff Engagement	20	20	20	\leftrightarrow	· · · · · · · · · · · · · · · · · · ·	8	40%	×	6	☆					Workforce			\mathbf{x}	
2833	TG	06/02/2021	Maintaining safe and secure environment across the organisation	12	12	12	\leftrightarrow		8	67%	×	6	☆					SPC	☆			
2901		06/05/2021	Delivery of Trust 5 year strategy	9	9	9	\leftrightarrow	•••••	6	67%	×	6	$\land \downarrow$		$\dot{\mathbf{x}}$	\Rightarrow	\bigstar	SPC		\star	$\mathbf{x} \mathbf{x}$	\star
2985	TG		Key Supplier Risk	10	10	10	\leftrightarrow	••••••	6	60%	×	8	\land					Performance		☆		\bigstar
3009	TG		Continuity of supply of consumable or services failure	12	12	12	\leftrightarrow	••••	6	50%	×	6	\mathbf{k}					Performance	☆	\star	<	\bigstar
3040	MS		M.Abscessus	15	15	15	\leftrightarrow	•••••	10	67%	×	10					☆	Q&R	*			
3074	TG	16/11/2021	NHS Reforms & ICS strategic risk	12	12	12	\leftrightarrow		8	67%	×	8	1	7	*		*	Performance		\star	<	\star
3223		22/07/2022	Activity recovery and productivity	16	16	16	\leftrightarrow	••••••	8	50%	×	4					\bigstar	Performance		* *		
3261	OM		Industrial Action	20	20	20	\leftrightarrow		12	60%	×	6	\checkmark				\bigstar	Workforce/PC/Q&R		\bigstar	☆	*



BAF Tracker: Committee Update 16/02/23

9	Exec	Opened	Tite	Nov-22	Dec-22	lan-03	Jan-23	Status since last month	Long running Trend (full data columns AS onwards)	Target Risk Rating	% RRR achieved	Risk Target achieved	Risk Appetite	s01		503		L C C C C C C C C C C C C C C C C C C C	y U V	Responsible Committee in addition to the Board	- yev	Fffective	Finance	People Manag. & Cult. Responsive	Transformation
2532	MS	05/03/2020	COVID Pandemic	6	. 6		6	\leftrightarrow	····	6	100%		1/	0 🔸		-			17	Q&R			-	24	
				0			0	\leftrightarrow	·····						-		_	_			P				<u>k</u>
2829			Achieving financial balance	8	8 8	3	8	\leftrightarrow		8	100%			8	Ι.				2	Performance			X		
2904	TG	11/05/2021	Achieving financial balance at ICS level	12	2 12	2 1	12	\leftrightarrow	***********	12	100%		1:	2		-			1	Performance				1	
3008	TG	27/08/2021	Clinical Research Facility Core Grant Funding	6	6 6	6	6	\leftrightarrow		6	100%	\checkmark		9 🛧		-		1	7	SPC			\bigstar		\bigstar

5. BAF Tracker Risks Below Target