



Royal Papworth Hospital
NHS Foundation Trust

Board Assurance Framework

September 2020

Produced by
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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. 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.

Action plans for BAF risks are reviewed on a monthly basis are captured within the Trusts' Datix reporting system. Executive Directors review open BAF risks on a monthly basis and the BAF risks are brought to Trust Committees at each meeting. The BAF tracker for September 2020 includes the Residual Risk Rating (RRR) and long term trend for each BAF risk and is attached at Appendix A (above Appetite) and B (within Appetite).

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

New BAF Risks: The system risk associated with changes in commissioning mechanisms has been established as BAF risk 2697 with a RRR of 9 (C3xL3). This will appear on future tracker reports.

Closed risks: BAF 873/874: Land sale value/land sale date. Risks now closed reflecting the refinancing agreed with the DHSC/ITFF.

Other updates:

BAF 1021: Potential for cyber breach and data loss: RRR reduced to 16 (C4xL4). Rating reduced following implementation of new backup system and new anti virus solution.

BAF 858: Electronic Patient Record System benefits: RRR reduced to 12 (C4xL3) but remains an extreme risk due to the £1m gap in funding in the 5 year Digital plan.

BAF 1854: Recruitment: RRR reduced to 12 (C4xL3)/**BAF 1853:** Turnover: RRR reduced to 12 (C4xL3). These changes in ratings were reported last month and now appear in the tracker report.

Reporting against the following BAF risks has been suspended as a part of the operational response to COVID 19: 730, 841, 843, 858, 865, 1787. These have been shaded on the tracker report.

System Risks

The STP has requested that all organisations review their organisational risk registers and identify the high risk actions that could be supported and perhaps overcome if addressed on a system basis. This is an approach that has been followed in other areas. Establishing a system risk register is an important element of the transition to an Integrated Care System, and allows focus on delivery of system solutions at pace. The next step in this work will be through a system risks review on the 5 Oct, where partners will collectively agree how we work together to help resolve the risks identified.

The Trust has identified the key system issues from its principal risks and submitted these to the system review. These are risks relating to people (PR2); performance and access to services (PR3); and sustainable finances (PR4). We expect that partners would recognise those as key system risks.

Principal Risks (PR)

The September BAF tracker report reflects the earlier discussion at Board with principal risks relating to:

1. COVID-19 pandemic and the need to sustain operational effort and resources to the COVID 19 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 Committee is requested to note the BAF report for September 2020.

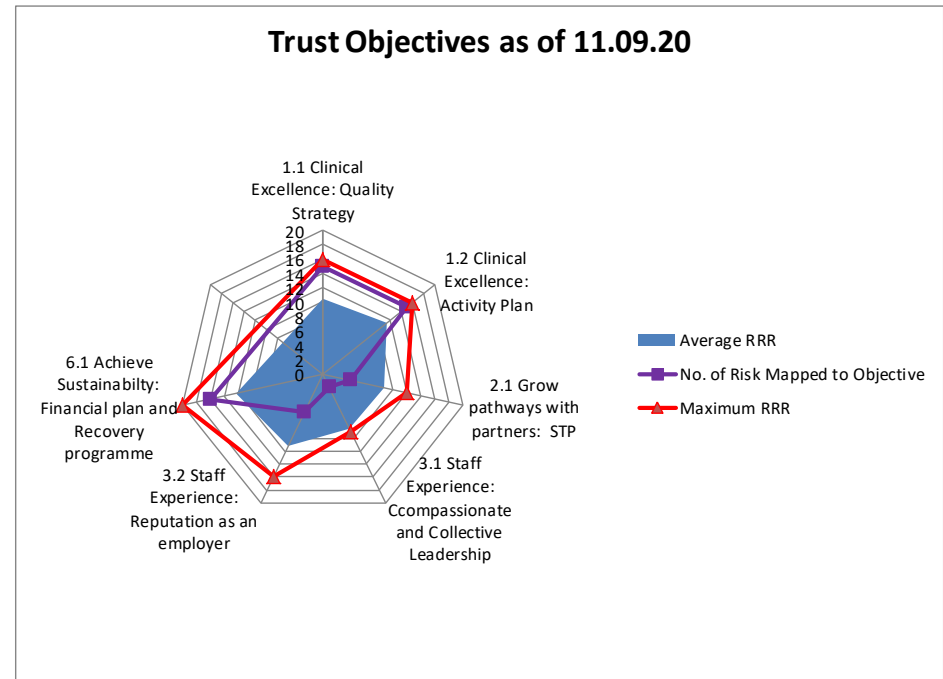
2 Risks Mapped to Strategic Objectives Analysis



Trust Objective	No. of Risk Mapped to Objective	Average RRR	Maximum RRR	Minimum RRR	Risks Opened	Risks Closed
1.1 Clinical Excellence: Quality Strategy	15	10.47	16	4		
1.2 Clinical Excellence: Activity Plan	15	11.4	16	6		
2.1 Grow pathways with partners: STP	4	8.75	12	6		
3.1 Staff Experience: Ccompassionate and Collective Leadership	2	8.5	9	8		
3.2 Staff Experience: Reputation as an employer	6	11.17	16	6		
6.1 Achieve Sustainability: Financial plan and Recovery programme	16	12.38	20	8		2

Trust Objectives 2019/20 Key

- 1.1 Clinical Excellence: Implement our Quality Strategy
- 1.2 Clinical Excellence: Deliver Our Activity Plan
- 1.3 Clinical Excellence: Use Digital as a key enabler
- 2.1 Grow pathways with partners: Continue to work in partnership with the STP
- 3.1 Staff Experience: Invest in our compassionate and collective leadership
- 3.2 Staff Experience: Enhance our reputation as an employer
- 4.1 Share and Educate: Establish a Royal Papworth School
- 5.1 Research and Innovate: Ensure progression of HLRI
- 5.2 Research and Innovate: Development of plans for utilisation of HLRI
- 6.1 Achieve Sustainability: Deliver our Financial plan and Recovery programme



3 Strategic Objectives by severity of Residual Risk Rating

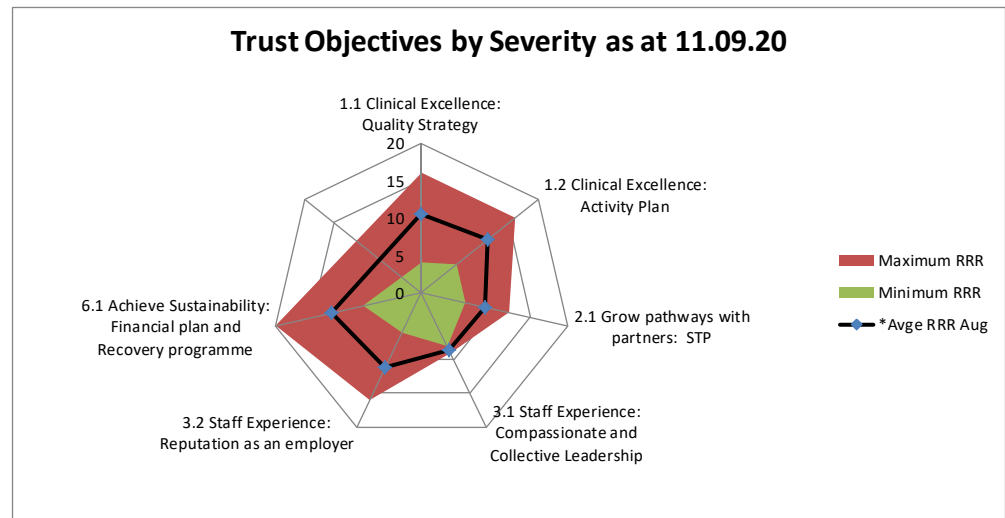


Trust Objective 2020/21	Severity - Residual Risk Rating				
	* Avge RRR July	* Avge RRR Aug	Maximum RRR	Minimum RRR	change in Avge RRR
1.1 Clinical Excellence: Quality Strategy	11.8	10.5	16	4	●
1.2 Clinical Excellence: Activity Plan	12.8	11.4	16	6	●
2.1 Grow pathways with partners: STP	9.8	8.8	12	6	●
3.1 Staff Experience: Compassionate and Collective Leadership	8.5	8.5	9	8	●
3.2 Staff Experience: Reputation as an employer	13.8	11.2	16	6	●
6.1 Achieve Sustainability: Financial plan and Recovery programme	13.4	12.4	20	8	●

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- 3.1 Staff Experience: Invest in our compassionate and collective leadership
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- 4.1 Share and Educate: Establish a Royal Papworth School
- 5.1 Research and Innovate: Ensure progression of HLRI
- 5.2 Research and Innovate: Development of plans for utilisation of HLRI
- 6.1 Achieve Sustainability: Deliver our Financial plan and Recovery programme

* Average for risks included in current tracker report



Appendix A: BAF Tracker Risks Above Risk Appetite



BAF Tracker 11/09/2020
Produced by Anna Pearman, Risk Manager

Note: Data taken from Datix will reflect the score given to the risk as close as possible to 12th of the month to enable new Exec information to be updated on Datix post meeting.

ID	Exec	Opened	Title	Jun-20	Jul-20	Aug-20	Status since last month	Long running Trend	Risk Appetite	Risk Appetite achieved	% Risk Assurance against risk appetite	BAF with Datix action plan	COC/PIPR	Responsible Committee in addition to the Board
678	EM	11/06/2014	Failure to meet cardiac and cancer waiting targets	16	16	16	↔	.....	12	☑	75%	Y	Finance	Performance
684	JR	11/06/2014	Failure to release staff to undertake educational activity due to workload	9	9	9	↔	.....	8	☑	89%	Y	People Manag. & Cult.	Q&R
742	JR	30/01/2015	Safer staffing and Monitor's Agency Price cap	12	12	12	↔	.....	6	☑	50%	Y	Safe	Q&R
841	EM	01/02/2016	Delivery of Efficiency Challenges - CIP Board approved	20	20	20	↔	.....	12	☑	60%	Y	Effective	Performance
843	EM	01/02/2016	Delivery of Efficiency Challenges - CIP targets	20	20	20	↔	.....	12	☑	60%	Y(F)	Effective	Performance
865	EM	01/02/2016	Income Growth - activity transfers	16	16	16	↔	.....	12	☑	75%	Y(F)	Finance	Performance
1021	AR	17/02/2016	Potential for cyber breach and data loss	20	20	16	↓	.....	3	☑	19%	Y	Safe	SPC/Performance
1162	EM	07/07/2016	We will not utilise our expertise to influence local strategy for cardiology	9	9	9	↔	.....	8	☑	89%	Y	Transformation	SPC
1787	JR	22/12/2017	Optimisation of the EPR systems	8	8	8	↔	.....	6	☑	75%	Y	Safe	Q&R
1853	OM	27/04/2018	Turnover in excess of target and will increase as a result of the move	16	16	12	↓	.....	8	☑	67%	Y	Safe	Performance
1854	OM	27/04/2018	Unable to recruit number of staff with the required skills/experience	20	20	12	↓	.....	8	☑	67%	Y	Safe	Performance
1929	OM	23/07/2018	Low levels of Staff Engagement	16	8	8	↔	.....	6	☑	75%	Y(HR)	People Manag. & Cult.	Q&R
2146	TG	29/03/2019	Current Trading Impacts - Consultant Job Plans	15	15	15	↔	.....	10	☑	67%	Y(F)	Finance	Performance
2148	TG	29/03/2019	Current Growth	15	15	15	↔	.....	12	☑	80%	Y(F)	Finance	Performance
2541	TG	24/03/2020	Cash risk from increase COVID expenditure	20	12	12	↔	.....	6	☑	50%	Y(F)	Finance	Performance
2572	JR	16/04/2020	Super Surge COVID19	8	8	8	↔	.....	6	☑	75%	Y(EDs)	Effective	Board

Parked due to COVID

Appendix B: BAF Tracker Risks Below Risk Appetite



BAF Tracker 11/09/2020

Produced by Anna Pearman, Risk Manager

Note: Data taken from Datix will reflect the score given to the risk as close as possible to 12th of the month to enable new Exec information to be updated on Datix post meeting.

ID	Exec	Opened	Title	Jun-20	Jul-20	Aug-20	Status since last month	Long running Trend	Risk Appetite	Risk Appetite achieved	% Risk Assurance against risk appetite	BAF with Datix action plan	COC/PIPR	Responsible Committee in addition to the Board
675	JR	11/06/2014	Failure to stay within ceiling trajectories for all HCAI's	4	4	4	↔	.....	6	<input checked="" type="checkbox"/>	150%	Y	Safe	Q&R
730	RH	01/04/2015	R&D strategic recognition	6	6	6	↔	.....	8	<input checked="" type="checkbox"/>	133%	Y	Responsive	Q&R
858	JR	01/02/2016	Electronic Patient Record System - benefits (Linked to ID1787)	16	16	12	↓	.....	12	<input checked="" type="checkbox"/>	100%	Y	Transformation	SPC
875	TG	01/02/2016	Master Development and control plans - local planning regulations	10	10	10	↔	.....	10	<input checked="" type="checkbox"/>	100%	Y	Transformation	Performance
2145	TG	29/03/2019	Current Trading Impacts - Planned Activity	10	10	8	↓	.....	12	<input checked="" type="checkbox"/>	150%	Y(F)	Effective	Performance
2149	TG	29/03/2019	Capacity Assumptions	9	9	9	↔	.....	10	<input checked="" type="checkbox"/>	111%	Y(F)	Finance	Performance
2163	TG	29/03/2019	Efficiency assumptions	15	15	12	↓	.....	12	<input checked="" type="checkbox"/>	100%	Y(F)	Finance	Performance
2338	AR	29/08/2019	EU exit	6	6	6	↔	.....	16	<input checked="" type="checkbox"/>	267%	Y(EDs)	Finance	Board
2526	JR	18/03/2020	International PPE supplies	10	10	10	↔	.....	10	<input checked="" type="checkbox"/>	100%	Y(IPC)	Safe	Board
2532	JR	05/03/2020	Pandemic	15	15	15	↔	.....	25	<input checked="" type="checkbox"/>	167%	Y(EDs)	Effective	Board

Parked due to COVID