

Strategic Objectives
1. Delivering outstanding care and experience
2. Working together with local health and social care providers
3. Recruiting, developing and retaining our workforce
4. Improving and developing our services and infrastructure
5. Delivering financial sustainability

2021/2022 Board Assurance Framework - Updated 10 January 2022

Trust Priorities 2021/2022	Strategic Risks	Supporting Objectives 2021/2022	Executive Director	Current Progress	Comments	Source of Assurance	Target Date	Status	Projected Year End Position
'Recover safely' 'We will work with partners to fully recover services, provide good quality care and experience while addressing health inequalities	103346 103349 103350 103351 103352	Restore and achieve all cancer standards by Q4	COO	Behind	Limited improvement across cancer metrics. Improvement plan being revisited and additional actions being taken. Projected year end position changed to Amber because whilst not all targets will be achieved it is anticipated that the majority will be.	Performance & Estates Committee, Integrated Performance Report	31/03/2022	↔	A
		Elective activity to exceed pre-pandemic levels	COO	Behind	Deadline of 30/06/2021 missed to meet Trust's target. Considerable UEC and Covid-19 pressures through the year impacting on elective capacity. The Trust met the National Target which was 85% of pre-pandemic level.	Performance & Estates Committee, Integrated Performance Report	30/06/2021	↔	R
		Reduce length of stay for inpatients in our hospitals by Q3	COO	Behind	Length of stay remains above target level but benchmarks reasonably both regionally and nationally. Again Covid-19 impact on LOS and redirection in elective activity which would reduce overall LOS at Trust level.	Performance & Estates Committee, Integrated Performance Report	31/12/2021	↔	A
		Introduce a new NHS 111 pathway for emergency care	COO	Complete	On track	Performance & Estates Committee, Integrated Performance Report	31/08/2021	Complete	Complete
		Enhance patient experience and diversity of our patient voice through engagement of minority / hard to reach patient groups	Chief Nurse	On track	A further three new members have been recruited to join PPVP. The group started with 7 members and there are now a total of 12 therefore we have exceeded the 50% target. In addition, the Trust has welcomed four further volunteers who specifically focus on supporting the Chaplaincy service with regards to minority patient groups, in the form of two male Imam's and two female Muslim Chaplaincy volunteers. Patient representatives recruited to various Trust Committees. Work with Roma community.	Quality Assurance Committee, Integrated Performance Report, PPVP	31/03/2022	↔	G
		Evidence good quality of care through reduction of the measure of mortality (HSMR) to below 100	CMO & Dep CEO	On track	HSMR reduced from 118 to 104 following rebasing of data.	Quality Assurance Committee, Integrated Performance Report	31/03/2022	↔	A

		Maximise safety, quality and patient experience in maternity by implementing Ockenden recommendations.	Chief Nurse	Behind	Vacancies and unit pressures impacting on teams ability to progress. Leadership team appointments made and commencing in post. New risk and governance policy being embedded. National report received re: Compliance against Ockenden recommendations. Q1 plan in place.	Quality Assurance Committee, Integrated Performance Report, Maternity Accountability Cabinet	31/03/2022	↔	A
		Put addressing health inequalities at the centre of all our plans and strategies	CMO & Dep CEO	On track	Developing Health Inequality Strategy. KLOE for accountability meetings. Some divisions have started to report.	Quality Assurance Committee, Integrated Performance Report, Accountability Meetings	31/03/2022	↔	G
<p>'Celebrate and support our staff' 'We will celebrate our staff and successes and ensure we provide support to our staff and develop them for the future'</p>	<p>103345 103348</p>	Celebrate staff successes	CPO	On track	Monthly staff awards. Annual awards. Showcasing of teams and individuals. Corporate Team brief and news letters. Divisional newsletters. EDI staff networks and staff councils.	People & Culture Committee, Integrated Performance Report	31/03/2022	↔	G
		Introduce individual health and wellbeing conversations by Q1	CPO	Complete	approved and implemented August 2021.	People & Culture Committee, Integrated Performance Report	30/06/2021	Complete	Complete
		Talent strategy to recruit, develop and retain staff Q4	CPO	On track	Talent Strategy in development. Co-production approach underway. Recruitment and retention actions underway to reduce vacancy levels.	People & Culture Committee, Integrated Performance Report	31/03/2022	↔	G
		Extend e-Rostering to all staff, including Consultants by Q4	CPO	On track	Programme on track. 84% of clinical (non medical staff) are fully rostered. 28% of medical area's are rostered. Estates and admin teams will be the final groups to be loaded to e-roster.	People & Culture Committee, Integrated Performance Report	31/03/2022	↔	G
		Reduce maternity service vacancies to 5% by Q4	CPO	Behind	Recruitment plan for students and UK and overseas staffing. Conversion courses for nurses to midwives being scoped to improve access and future supply. As at 30 Nov 21 projected vacancies are improving but remain above %5 for March 2022: 17.32% midwives, 4.44% nursing and 6.92% HCAs. (Trust not site %)	People & Culture Committee, Integrated Performance Report	31/03/2022	↔	R
		Work with Health Education Institution providers to increase student numbers	CPO	On track	In progress	People & Culture Committee, Integrated Performance Report	31/03/2022	↔	G
		Widen participation and workforce diversity to recruit staff from local communities	CPO	On track	In progress - working with schools . Work experience and apprenticeship as well as general NHS careers promotion. Gatesby benchmark standards for careers offer in schools - seeking to add NHS in this context. Annual plan of marketing and activities in place. links with ICS plans.	People & Culture Committee, Integrated Performance Report	31/03/2022	↔	G
		Facilitate staff movement between STP healthcare providers	CPO	On track	C&P MOU in place to facilitate flexibility between providers. Junior Doctor inter-authority training passport in place (training and employment history) Regional Digital passport pilot for junior Doctors underway - NWAFT will implement when it is launched.	People & Culture Committee, Integrated Performance Report	31/03/2022	↔	G

		Increase agile and flexible working	CPO	On track	Agile working clause in all adverts and JD's. Agile working policy in place. Agile working strategy and rollout scoped for external contractor support.	People & Culture Committee, Integrated Performance Report	31/03/2022	↔	G
		Achieve Associated University of Leicester status	CMO & Dep CEO	Complete	Approved. Scoping progression to University Status.	Quality Assurance Committee, Integrated Performance Report	31/12/2021	Complete	Complete
		Embed quality improvements and transformation as part of our culture and support staff development	Chief Nurse	On track	Q1 Strategy approved. Comms plan in place for Nov. Transitional plan in place for one year. Coaching commenced in Nov. Board workshop in Jan 22. Governance reporting agreed. Plan for year agreed.	Quality Assurance Committee, Integrated Performance Report	01/12/2021	↑	G
<p>'Sustainability' 'We will work sustainably to further develop our services, finances and protect the environment'</p>	<p>103343 103344 103353</p>	Commence the new build for Hinchingbrooke theatres	CSATO	On track	FBC approval received. Enabling works on track. Theatre build commences in Jan 22 as per schedule.	Strategy & Transformation Committee	01/03/2022	↔	G
		New Urgent Treatment Centre at PCH	COO	Complete	Complete	Performance & Estates Committee, Integrated Performance Report	01/06/2021	Complete	Complete
		Shared pathways with system partners	CSATO	Complete	A number of pathways have been developed and implemented including 3 agreed areas: 1. Cardiology. 2. Diabetes. 3. Respiratory Medicine.	Strategy & Transformation Committee	01/03/2022	Complete	Complete
		Develop Trust strategy for 2022 -2025	CSATO	Behind	Updated draft to STC on 21 Dec 22. Revised Strategy to Private Trust Board Jan 22 (ratification) and Public Trust Board Feb 22.	Strategy & Transformation Committee	01/12/2021	↔	R
		Complete Stamford land sale and commence work on the new car park	CMO & Dep CEO	Behind	Projected year end position remains Red because land sale will not be completed by deadline (31/01/2022). The land sale with the preferred bidder has stopped and the Trust will go out to the market again in 3 separate lots.	Performance & Estates Committee, SRH Redevelopment Programme Board	31/01/2022	↔	R
		Build our plans for maturity as a digital aspirant	CFO	On track	On track	Finance & Digital Committee	31/03/2022	↔	G
		Go live with the new shared care records with system partners	CFO	Behind	Delays with contract procurement award which was initially due to be signed in September 2021. System working to revised timetable with progress in place to implement first phase by year end.	Finance & Digital Committee	30/09/2021	↔	R
		Develop our environmental strategy	CFO	Behind	Draft Green Plan outline presented to PEC in December. Due to come to Trust Board in Jan subject to finalisation which is beyond trajectory due to wider capacity challenges.	Performance and Estates Committee	31/03/2022	↔	G
		Achieve financial targets with a focus on the underlying cost base	CFO	On track	On track	Finance & Digital Committee	31/03/2022	↔	G
		Maximise the use of resources and improve productivity	CFO	On track	On track	Finance & Digital Committee	31/03/2022	↔	G
		Realise the benefits of our strategic investments	CFO	Behind	Evaluations of two projects commenced however operational pressures impacting on ability to conclude	Finance & Digital Committee	31/03/2022	↔	G

Strategic Risk	Current Risk Score	Target Risk Score
103350: Risk of patient harm due to the Trust not sustaining effective patient flow which will negatively impact on waiting times, safety, patient and staff experience*.	20	10
103343: Risk to patient and staff safety at Hinchingsbrooke Hospital due to old and non-compliant building*.	20	10
103348: The Trust does not have adequate plans in place to recruit, retain and maintain good levels of staff engagement and staff experience, and this could impact on the delivery of safe services for our patients and on patient experience*.	20	8
103352: There is a risk of non-compliance with regulatory indicators and national guidelines for maternity impacting on patient safety, quality and experience	16	4
103349: As a result of the ongoing impact of Covid-19, there is a risk that the Trust is not able to safely restore all local and specialist services to previous levels of capacity which results in increased waiting times and poorer outcomes and experience for patients	16	8
103346: There is a risk that failure to recognise and deliver fundamental standards of care impacting on patient safety, experience and regulatory requirements	16	8
103353: This is a risk the Trust is unable to achieve financial balance as a consequence of increased resource requirements to meet service pressures and the national financial architecture	15	10
103438: Risk that if we do not treat our data and information as critical assets we may fail to make good use of them to run the Trust, and fail to ensure adequate cybersecurity resilience	15	9
103344: Risk of major and / or repeated minor outages of technology infrastructure causing business interruption which impacts on the Trust being able to deliver safe and effective patient care at all times	15	5
103351: There is a risk that the recovery of Trust services perpetuates health inequalities	12	8
103345: The Cambridgeshire and Peterborough STP does not evolve into a fit for purpose integrated care system, leading to polarisation that does not address system inequalities and inefficiencies.	9	6