

NHS Hull Clinical Commissioning Group

Item:8.3

Report to:	Primary Care Joint Cor	nmissioning Committee		
Date of Meeting:	24 February 2017			
Subject:	Risk Report			
Presented by:	Nikki Dunlop, Commissioning Lead – Primary Care New Models of Care Team			
Author:	Michelle Longden Corp	oorate Affairs Officer		
STATUS OF THE REPORT:				
To appro	ve	To endorse		
To ratify		To discuss √		
To consid	der ====	For information		
To note				
NHS England	d NHS Hull CCG	Not Applicable √		
PURPOSE OF REPORT: The purpose of this report is to brief the Primary Care Joint Commissioning Committee on the primary care risks on the corporate risk register.				
RECOMMENDATIO	ONS:			
It is recommended that the Primary Care Joint Commissioning Committee note or comment, where appropriate, on the relevant risks, controls and assurances within the risk register.				
REPORT EXEMPT FROM PUBLIC DISCLOSURE No Ves				
If yes, grounds for exemption (FOIA or DPA section reference)				
CCG STRATEGIC OBJECTIVE		ASSURANCE FRAMEWORK SPECIFIC OBJECTIVE		

The risks identified in the risk register need to be managed in order for the CCG to meet its strategic objectives The risk register and assurance framework are interlinked to assure that the CCG delivers against its strategic objectives

IMPLICATIONS:			
Finance	The risk register contains key financial risks to the organisation		
HR	Any HR risks identified would be placed directly onto the risk register		
Quality	Some of the risks on the risk register link directly to quality areas		
Safety	Some of the risks on the risk register link directly to areas of patient safety		

ENGAGEMENT:

The risk register has been reviewed and updated by senior members of NHS Hull CCG.

LEGAL ISSUES:

All legal issues have been considered and if appropriate are addressed in the report.

EQUALITY AND DIVERSITY ISSUES:

	Tick relevant box
An Equality Impact Analysis/Assessment is not required for this report.	V
An Equality Impact Analysis/Assessment has been completed and approved by the lead Director for Equality and Diversity. As a result of performing the analysis/assessment there are no actions arising from the analysis/assessment.	
An Equality Impact Analysis/Assessment has been completed and there are actions arising from the analysis/assessment and these are included in section xx in the enclosed report.	

THE NHS CONSTITUTION:

This report supports the NHS pledge to staff and all aspects of the patients' rights.

RISK REGISTER

1. INTRODUCTION

The purpose of this report is to update the Primary Care Joint Commissioning Committee on the primary care related risks on the risk register.

2. BACKGROUND

Individual risk owners are responsible for updating, reviewing and managing their risks. The risk register is a standing agenda item at team meetings and the Health and Safety Committee for discussion. It is also considered on a bi-monthly basis at the Integrated Audit and Governance Committee, Quarterly to the Planning and Commissioning Committee and Quality and Performance Committee and biannually to the CCG Board to provide assurance on behalf of the organisation.

Risk owners are notified through datix that their risk is due for review and requested to log on to datix to review and update the risk ensuring that all controls and assurances are still valid or updating these as required. The Risk Team regularly check datix and send reminders to risk owners for any overdue updates.

3. CURRENT RISKS ON THE CCG RISK REGISTER

There are currently 25 risks on the CCG risk register. Of these, 6 relate to primary care and are attached at Appendix 1.

Changes to the risk register

The current risk profile on the register has one risk rated as extreme and five rated as high.

All risks have been reviewed and updates to the risk register are highlighted in red.

The Primary Care Joint Commissioning Committee are also asked to consider whether there are further risks they would recommend adding to the risk register in light of their committees work. A new risk can be added to datix by the relevant risk owner. Please contact Mike Napier, Associate Director of Corporate Affairs or Michelle Longden, Corporate Affairs officer for support and advice, if required.

4. RECOMMENDATIONS

It is recommended that the Primary Care Joint Commissioning Committee note or comment, where appropriate, on the relevant risks, controls and assurances within the risk register.