

CCG Strategic Risk Report Primary Care Commissioning Committee - April 2019

Strategic Objective	ID	Risk Description	Current risk rating	Previous risk rating	Initial risk rating	Key controls	Internal assurances	External assurances	Details of gaps in controls	Details of gaps in assurances	Progress	Review date	Risk Owner	CCG Committee
Delivery of Statutory Duties	931	CCG would not have an effective plan in place to support the community in the event of a cyber incident.	High Risk 9	High Risk 9	High Risk 10	System in place for reporting incidents awareness for staff. Assurance process around support service/ GPs BCP to be further developed Additional workshop to be organised for CCG SMT Response process map has been shared with CCG Upgrade to windows 10 planned	Virus and security software regularly checked for appropriateness CCG and IT supplier have signed up for NHS Alerting mechanism Humber wide IT managers group set up (managed by CCG) to ensure minimum standards are set.	NHS Inform via reporting mechanism of security standard breaches.	Adequate controls in place.	Further education required	04.04.19 - John Mitchell - Workshop cancelled (due to clash with other important meeting) to be rearranged with on call team. 26.02.19 Carrie Cranston - Now have a date identified for CCG SMT Workshop (03.04.19) each organisation must have their own BCP in place and recent workshops have highlighted the need for this. 31.10.18 - Risk added.	31/05/2019	Mitchell, John	Integrated Audit and Governance Committee, Primary Care Commissioning Committee
To embed Patient and Public Involvement across the organisation and ensure that the CCG meets its statutory duty under 1422 of the Health and Social Care Act	915	There is significant patient and public opposition to plans for the development of new models of care including primary care at scale.	High Risk 12	High Risk 8	High Risk 12	Development of a Communications and Engagement plan for the CCG Primary Care Blueprint.	Reports to the Communications and Engagement sub-group and the Primary Care Joint Commissioning Committee.	Regular reports and consultation with the Hull City Council Health and Wellbeing Overview and Scrutiny Commission.	Adequate controls in place.	Adequate assurances in place.	Phil Davis - 17/04/19 - Awaiting submission of Modality Hull engagement report - once received will be reviewed against assurance framework. Modality Hull have been advised on governance/decision-making process for any proposed changes to services. 08/02/19 - initial engagement plan undertaken by Modality for proposed changes to services - results being analysed. CCG engagement assurance process developed to support future engagement activity in relation to primary care services. 04/12/18 - Winter 2018 My City My Health My Care prepared. Engagement plan for Modality developed for proposed changes to services at New Hall, Faith House & Newland Group practices. Paper taken to November Overview & Scrutiny Committee and North Area Committee (Modality attended both with CCG support). Informal session held with OSC members 30/11/18 - commitment to utilise Area Committees as required for future proposed service changes etc.	17/06/2019	Davis, Phil	Primary Care Commissioning Committee
Improvement in Clinical Outcomes	933	There is a risk that practice nurses will not receive adequate training to undertake cervical screening. This is due to a lack of funding from NHS England / Public Health England. This could mean increased risk of undetected cervical cancers due to lack of trained staff.	High Risk 9	High Risk 9	Extreme Risk 16	There has been some short term funding made available from NHS England / Health Education England. There is also a programme of training that has been established through the Advanced Training Practice in partnership with Hull CCG and Hull University. There has also been courses available at Huddersfield, Newcastle, Sheffield and Leeds Universities.	The training is reviewed at the Humber Coast and Vale Primary Care Workforce Group and through the screening and immunisation oversight group. This provides feedback to the CCG in order to identify gaps in delivery of the training and therefore allows the CCG to identify mitigating actions.	This has been raised to the NHS England Quality Surveillance Group by the bi-monthly returns and also through NHS England Quality Leads.	There are minimal places available, therefore demand is exceeding availability as this covers the whole of Yorkshire and the Humber area. Staff are also required to travel to the locations offering the courses which is proving problematic.	Adequate assurances in place.	06/03/19 - KMa Health Education England and NHS are reviewing the education requirements for cervical screening and this will be discussed at the screening and immunisation board in April 2019. 19/12/18 - KMa non recurrent funding has been identified and local courses have been established. However recurrent funding still requires to be agreed by NHSE / Health Education England. 06/11/2018 - KMa Discussions have taken place at the Humber Coast and Vale Workforce Group and the Education Director has raised this formally with Health Education England. Further courses have been provided at the various Universities in the Yorkshire and Humber area and non recurrent funding has been identified.	31/05/2019	Smyth, Mrs Sarah	Primary Care Commissioning Committee
Integrated Delivery	901	Lack of capacity/capability within CCG to deliver Strategic Commissioning Plan for Primary Care	High Risk 8	High Risk 8	High Risk 12	Additional CCG workforce to support primary care programme - Head of Commissioning - Integrated Delivery, Commissioning Manager with focus on primary care to be recruited. Establishment of delegated commissioning arrangements with NHS E with associated support of Assistant Primary Care Contracts Manager from NHS E. Support packages available to practice groupings. Establishment of Integrated Delivery Framework and support team.	Working relationships between Commissioning & Partnerships, Resources and Quality Teams in the CCG. Establishment of Primary Care Commissioning Committee. Development of Integrated Delivery Framework and Team.	NHS E working relationships and Primary Care Commissioning Committee.	Adequate controls in place.	Adequate assurances in place	Phil Davis - 17/04/19 - New Commissioning Manager in post and supporting team in primary care work programme. Working relationships with and capacity requirements to support Primary Care Networks to be developed as Primary Care Networks become established. PD - 08/02/19 - New Commissioning Manager starting with CCG 25/02/2019 - will provide additional capacity to Strategic Lead - Primary Care, Head of Commissioning - Integrated Care and wider Integrated Delivery Team to support delivery of primary care programme.	17/06/2019	Davis, Phil	Primary Care Commissioning Committee
Integrated Delivery	902	CCG practices unable to maintain a resilient primary care workforce	Extreme Risk 16	Extreme Risk 16	Extreme Risk 16	Development of CCG primary care workforce strategy. Development of Strategic Commissioning Plan for Primary Care support to practice groupings for collaborative working to address workforce issues. Development of New Models of Care involving range of other job roles. Development of STP primary care workforce modelling as part of out of hospital care work-stream	Progress in implementing primary care workforce strategy will be reported to Primary Care Joint Commissioning Committee. STP Strategic Partnership Board to oversee out of hospital care work-stream.	External support for practice groupings to cover support for addressing workforce challenges	Adequate controls in place.	Adequate assurances in place.	Phil Davis - 17/04/19 - Draft PC Workforce Strategy developed, work being undertaken at HC&V H&CP level to support primary care workforce. HC&V ACP and PA Ready schemes developed and offered to practices. Next Generation GP and GP retention schemes also being developed. PD - 08/02/19 - NHS Long Term Plan and new GP contract include a number of elements and initiatives to support the development of the primary care workforce. Implications to be worked through and plans developed as required as part of CCG primary care workforce strategy.	17/06/2019	Davis, Phil	Primary Care Commissioning Committee

Integrated Delivery	930	Practices may not remain part of a grouping and thereby become vulnerable/unsustainable and as a result do not support delivery of the CCG Strategic Commissioning Plan for Primary Care and are unable to access General Practice Forward View and other funding streams which require working at scale.	High Risk 12	Moderate Risk 6	High Risk 8	Integrated Delivery Framework - developed October 2017 Local Quality Premium Scheme - 2018/19 scheme developed OD and other support to practice grouping - on-going	Reports to Primary Care Commissioning Committee	Reports to NHS England as part of regular CCG performance reviews	Adequate controls in place.	Adequate assurances in place.	Phil Davis - 17/04/19 - information available indicates that some groupings do not currently have the minimum 30,000 patients required to become a Primary Care Network. CCG and LMC liaising and advising practices/emerging PCNs on requirements. Joint LMC/CCG event to be held on April 23rd.	17/06/2019	Davis, Phil	Primary Care Commissioning
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