Primary Care Risk Report - June 2020

Strategic Objective	ID Risk Description	Current risk		Initial risk ratin	Key controls	Internal assurances	External assurances Details of gaps in contro	ols Details of gaps in	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.	redus, High Risk 9	rating High Risk 9	High Risk 10	System in place for reporting incidents 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 (CG and If Supplier have signed up for NHSO Alerting mechanism Humber wide IT managers group set up (managed by CCG) to ensure minimum standards are set.	NHSD inform via reporting mechanism of security standard breaches.	assignaces	28.04.20 · CC - N3I transition period still in place 03.04.20 · CC - corporate IT six month transition period with N3I Limited began on 01/04/20 26.02.20 CC - transition plan for corporate IT is still in progress but the level of confidence in the current procedures remains the same. 18.12.19 · John Mitchell, no updates at present until transition complete, level of overall confidence in procedures is acceptable. 11.11.19 C- training has now taken place for on call directors, the new GP IT spec details around better on call provision, new supplier to be in place as from April 2020. 11.10.19 · John Mitchell, On Call Workshop took place with On Call Directors across Patch on 16 September 2019 to discuss Cyber and perform desktop exercise. Now on third round of Cyber Training and Desktop Exercises, training date for Hull to be agreed. The specification for new IT contract has provision for major incident and out of hours serious support.	14/02/2020 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 mest its statutory day 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 resulting in services not being sustainable.	High Risk 12	High Risk 12	High Risk 12	Development of a Communications and Engagement plan with patients and the public for the CCG Primary Care Blueprint.	Reports to the Communications and Engagement sub-group and the Primary Care Commissioning Committee.	Regular reports and consultation Adequate controls in with the Hull City Council Health place. and Wellbeing Overview and Scrutiny Commission.	Adequate assurances in place.	Phil Davis - 17/06/20 - HCV wide piece of engagement work planned to obtain patient/public views on changes to service to support on-going service delivery plans. Phil Davis - 16/04/20 - Inlight of COVID-19 all practices following national guidance to implement telephone triage, telephone and video consultation, electronic prescribing etc. to minimise faceface activity. National and local communications supporting this approach. Phil Davis - 13/02/20 - CCG Engagement and Consultation Assurance Framework developed which will be applicable to and used to support primary medical care services. Phil Davis - 19/12/19 - Following advice received from IAGC the risk rating has been increased back to High Risk 12 to allow further progress in relation to the actions to be made.	14/08/2020 Davis, Phill	Primary Care Commissioning Committee
Integrated Delivery	942 Lack of capacity/capability within Primary Care Networks and the CCG to support Primary Care Networks to deliver the Long Term Plan.	High Risk 8	High Risk 8	High Risk 8	Core Primary Care Team in place within CCG - Strategic Lead, Head of Commissioning - Integrated Delivery, Commissioning - Integrated Delivery, Commissioning Manager, Commissioning Lead - Qualify Lead and NHS E/I Assistant Contracts Manager. 5 PCNs approved in Hull with Clinical Directors appointed. Support roles approved by CCG for each PCN - Lead Nurse, Clinical Pharmacist and Bir Jole. Wider support for PCNs From CCG teams - eg. Bir, Comms & Engagement PCN self-completion of Maturity Matrix and OD Plans. Resource available through HCV STP for PCN and Clinical Director development. Humberside LMCs Clinical Director development of fer.	Reports to Primary Care Commissioning Committee regarding PCN establishment and development Regular communication with PCNs and escalating of any issues to SLT if required.		Adequate assurances in place.	17/05/20 Phil Davis - PCN Link Managers continue to support PCNs. Work to be undertaken to review PCN workforce and 00 plans. Hull & RE Clinical Directors continue to meet fortrightly with CCG and LW. 16/04/20 Phil Davis - Each PCN has an allocated CCG support manager to support them. Due to COVID-19 focus has been on developing operational response including Hot/Cold sites. Work undertaken with ICC Fraility Team and PCNs to allocate care homes in Hull to PCNs to support COVID-19 response and the delivery of the requirements of the Enhanced Care in Care Homes service specification in 200/21. 13/02/20 Phil Davis - CCG to work through implications of revised National Service Specifications and develop required support to PCNs for delivery in 2020/21. 3/12/19 Phil Davis - PCN D0 Plans developed and resource allocated to each PCN for implementation. Cod & HCV STP providing support to PCNs across a range of issues including population health management (accelerator programme). Work on-going within CCG to develop support of fort to PCNs bulling on the 3 rices approved in August (Leads for Nursing, Clinical Pharmacy and Business Intelligence) eg. support to PCN strategic leads as a group. 23/01/29 Phil Davis - This a new risk added to the register following consideration at the Primary Care Commissioning Committee. It reflects a development of the previous risk 901 which it is recommended is closed. (IAGC to consider closure of 901 at the November 2019 meeting.)	14/08/2020 Davis, Phil	Primary Care Commissioning Committee
integrated Delivery	930 Practices may not remain part of a Primary Care Network (PCN) and therefore do not support delivery of the CCG Strategic Commissioning Plan for Primary Care and are unable to access resources associated with PCNs thereby making themselves vulnerable/unsustainable.	High Risk S	High Risk 8	High Risk 8	Integrated Delivery Framework - developed October 2017 Local Quality Premium Scheme - 2018/19 scheme developed Ob 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 assurances in place.	Phil Davis - 17/06/20 - All practices have signed up to the Network DES - the 5 PCNs in Hull will continue from July in their current form. Practices within PCNs and the 5 PCNs have worked collaboratively to respond to CCVD-19 and the additional asks of primary medical care service (e.g., care homes enhanced service). Phil Davis - 16/Q4/20 - CCVDI-19 and the additional asks of primary medical care service (e.g., care homes enhanced service). Phil Davis - 16/Q4/20 - CCVDI-19 and the additional positions to he challenges of CCVDI-19 eg. th/Q20 - CCVDI-19 was visiting services serv. No practices have advised the CCG that they do not wish to remain part of a PCN or participate in the Network DES. Phil Davis - 13/Q2/20 - CCG to support PCNs in progressing and implementing OD plans. National service specifications published in December refreshed, two being deferred, along with changes to Additional Roles Reimbursement Scheme to provide 100% reimbursement for a wider range of roles. Phil Davis - 13/Q1/19 - PCN OD plans include proposals for PCN development including development of vision and priorities. CCG Extended Primary Care Medical Services to examinationed from PCNs from April 2020. Phil Davis - 15/Q1/19 - All PCNs have submitted their maturity matrix and OD plans by 30th September deadline. Responses and support for PCNs being developed with NHSE/ft to respond to needs identified PCNs continue to develop their ways of working and significant resource available to support PCN plans and to develop PCN Clinical Directors. Risk rating reduce from 12 to 8.	14/08/2020 Davis, Phil	Primary Care Commissioning Committee

Interested Delivery	902 CCG practices unable to maintain a	Cutanana Diale	Extreme Risk Extreme Risk 16	Development and implementation of	December in involution animate.	External support for practice	Need for NHS Pensions	Adequate assurances in	Phil Davis - 17/06/20 - Daily sitrep reports show reductions in staff absences and staff unable to 14/08/20	020 Davis, Phil	Primary Care
Integrated Delivery	resilient primary care workforce	extreme KISK	Extreme RISK 16	CCG primary care workforce strategy			issue to be addressed at a			Davis, Phil	Commissioning
		20	20			groupings to cover support for		a piace.	work remotely. Practices and PCNs developing models of service delivery to minimise risk of		
	resulting in reduced access to services			and associated initiatives eg.	reported to Primary Care Joint	addressing workforce challenges			staff needing to self-isolate as a result of test and trace. CCG to support PCNs develop		Committee
	and patient needs not being met.			International GP Recruitment, PCN	Commissioning Committee. STP		the increasing the		workforce plans by August and progress recruitment to additional roles. PC based CMHT		
				Ready, Physician Associate Schemes.	Strategic Partnership Board to		number of GPs retiring.		workers model being developed and roles to recruited to.		
				Use of National Workforce Reporting	oversee out of hospital care work-				Phil Davis - 16/04/20 - COVID-19 presents a considerable challenge to all practices regarding		
				System to monitor trends in primary	stream.				workforce through risks of illness and/or self-isolation reducing staff availability and hence		
				care workforce.					service provision. Practices have taken steps to address challenges and reduce risk by moving to		
				Primary Care Networks to be					triage based systems and utilisation of telephone/video and online consultation. Where		
				supported to develop new roles as					face:face consultations need to take place either separate Hot/Cold sites have been established		
				outlined in NHS Long Term Plan and					or arrangements to triage externally to buildings and utilisation of dedicated rooms has been		
				for which reimbursement available					put in place. Practices and PCNs have consolidated sites from where services are delivered and		
				through Network DES.					are working collaboratively to minimise risk. As plans are further developed for the availability		
				Development of HC&V primary care					of testing for staff the number absent from work may reduce. A daily SITREP process is in place		
				workforce modelling as part of out of					to understand current status of practices in terms of staff absences and impacts upon services.		
				hospital care work-stream.					and any other challenges practices face. A RAG rating is provided by each practice and to date		
				nospital care work-stream.					the vast majority have been Green ie. "No concerns, expecting challenges but confident		
									contingency plans can be effective."		
									The PCCC may wish to consider whether a separate COVID-19 primary care risk should be		
									added to the risk register.		
									in post. Reception and clerical staff training needs assessment to be undertaken at HC&V level.		
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