Risk Report Primary Care Commissioning Committee August 2020 (extracted 14.08.20)

Strategic Objective	ID	Risk Description	Current risk rating
2 - Advance at system-level the delivery of the commissioning priorities set out in the NHS Long Term Plan.		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

6 - Develop an agreed out	942	Lack of capacity/capability within	High Risk 8
of hospital strategy for Hull,		Primary Care Networks and the CCG	
supporting local Primary		to support Primary Care Networks to	
Care Networks to		deliver the Long Term Plan.	
determine models for		S	
transition to integrated			
provision			
provision			
6 - Develop an agreed out	930	Practices may not remain part of a	High Risk 8
of hospital strategy for Hull,		Primary Care Network (PCN) and	
supporting local Primary		therefore do not support delivery of	
Care Networks to		the CCG Strategic Commissioning Plan	
determine models for		for Primary Care and are unable to	
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transition to integrated		access resources associated with	
		access resources associated with PCNs thereby making themselves	
transition to integrated		access resources associated with	
transition to integrated		access resources associated with PCNs thereby making themselves	
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6 - Develop an agreed out	002	CCG practices unable to maintain a	Extreme Risk 15
of hospital strategy for Hull,	902	resilient primary care workforce	Extreme Risk 15
supporting local Primary		resulting in reduced access to services	
Care Networks to		and patient needs not being met.	
determine models for			
transition to integrated			
provision			
9 - Maintain support for the	957	Risk assessment of staff within	High Risk 12
effective local planning and		general practice, in line with the NHS	
response to the Coronavirus		England and NHS Improvement "Risk	
Pandemic, ensuring that		assessments for at-risk staff groups"	
positive innovations are		letter of 25th June 2020, and the	
retained, improved and		necessary mitigating actions may	
generalised.		result in some practices having	
55		reduced capacity to deliver some	
		services or being unable to deliver	
		some services (eg. face:face	
		consultations).	
		consultations).	

Risk scoring = consequence x likelihood (C x L)

The risk score is calculated by multiplying the consequence score by the

Likelihood of occurrence	Consequence	Consequences/Severity		
	Insignificant	Minor	Moderate	
	-1	-2	-3	
Rare				

-1	_	2	,
Unlikely	2	4	6
-2 Possible -3	3	6	9
Likely -4	4	8	12
Almost Certain -5	5	10	15

Previous risk rating	Initial risk rating	Key controls
High Risk 12	High Risk 12	Development of a Communications and Engagement plan with patients and the public for the CCG Primary Care Blueprint.

High Risk 8	High Risk 8	Core Primary Care Team in place within CCG - Strategic Lead, Head of Commissioning - Integrated Delivery, Commissioning Manager, Commissioning Lead - Quality 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 BI role. Wider support for PCNs from CCG teams - eg. BI, 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 offer.
High Risk 8	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

Extreme Risk 15	Extreme Risk 16	Development and implementation of CCG primary care workforce strategy and associated initiatives eg. International GP Recruitment, PCN Ready, Physician Associate Schemes. Use of National Workforce Reporting System to monitor trends in primary care workforce. Primary Care Networks to be supported to develop new roles as outlined in NHS Long Term Plan and for which reimbursement available through Network DES. Development of HC&V primary care workforce modelling as part of out of hospital care work-stream.
New Risk	High Risk 12	Risk assessment tools and guidance available from NHS England and NHS Improvement

Major	Extreme
-4	-5
1	5

4	,
8	10
12	15
16	20
20	25

Internal assurances Ext	xternal assurances	Details of gaps in controls
Engagement sub-group and the Primary Care Commissioning We	egular reports and consultation with the Hull City Council Health and Vellbeing Overview and Scrutiny commission.	Adequate controls in place.

Reports to Primary Care Commissioning Committee regarding PCN establishment and development. Regular communication with PCNs and escalating of any issues to SLT if required.	Joint work with both Local Medical Committee and NHS E/I to support development of PCNs.	Adequate controls in place.
Reports to Primary Care	Reports to NHS England as part of	Adequate controls in
Commissioning Committee	regular CCG performance reviews	place.

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Progress in implementing primary	External support for practice	Need for NHS Pensions
care workforce strategy will be	groupings to cover support for	issue to be addressed at a
reported to Primary Care Joint	addressing workforce challenges	national level to address
Commissioning Committee. STP		the increasing the number
Strategic Partnership Board to		of GPs retiring.
oversee out of hospital care work-		
stream.		
Situation reports provided by	Sitrep returns to NHS England and	Adequate controls in
practices which include outcomes of	NHS Improvement	place.
staff risk assessments		
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Details of gaps in assurances Adequate assurances in place.

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place.	
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Adequate assurances in place.	

Adequate assurances in
place.
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Adequate assurances in
place.

Progress

Phil Davis - 13/08/2020 - HCV engagement currently live and participation being encouraged. Feedback also being received through CCG social media sites. Primary Communications and Engagement Group meeting to be held to consider next steps required regarding engagement including potential national and more local plans.

Phil Davis - 17/06/20 - HCV wide piece of engagement work planned to obtain patient/public views on changes to services to support on-going service delivery plans.

Phil Davis - 16/04/20 - In light of COVID-19 all practices following national guidance to implement telephone triage, telephone and video consultation, electronic prescribing etc.to minimise face:face 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.

Phil Davis - 03/12/19 - Draft edition of My City My Health My Care produced. PCN OD plans include developing working with patients and communities.

Phil Davis - 15/10/19 - Further discussion to be had with Health & Wellbeing Overview & Scrutiny Commission Chair regarding the Consultation protocol - hence not taken to October meeting. Next My City My Health My Care edition being drafted and to include focus on Primary Care Networks. Primary Care Network OD Plans submitted at end of September include actions in relation to the Working with People and Communities domain of the maturity matrix eg. working with Healthwatch, communities, community groups and developing PPGs. Risk rating adjusted from 12 to 8.

Phil Davis - 21/08/19 - Draft Consultation protocol produced by Associate Director of Communications and Engagement and Hull City Council Scrutiny Officer. To be submitted to October 2019 Scrutiny Commission.

13/08/20 Phil Davis - PCN Link Managers continuing to support PCNs regarding both COVID and other work. Collaborative working between Hull and ER CCGs has resulted in some economies of scale in supporting PCNs.

17/06/20 Phil Davis - PCN Link Managers continue to support PCNs. Work to be undertaken to review PCN workforce and OD plans. Hull & ER Clinical Directors continue to meet fortnightly with CCG and IMC

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 Frailty 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 2020/21. 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.

03/12/19 Phil Davis - PCN OD Plans developed and resource allocated to each PCN for implementation. CCG & 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 offer to PCNs building on the 3 roles approved in August (Leads for Nursing, Clinical Pharmacy and Business Intelligence) eg. support to PCN strategic leads as a group.

29/10/19 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.)

Phil Davis - 13/08/20 - All practices across the CCG continue to be a member of a PCN.

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 COVID-19 and the additional asks of primary medical care services (eg. care homes enhanced service).

Phil Davis - 16/04/20 - COVID-19 has resulted in limited further progression of PCN OD Plans. However practices in PCNs are working collaboratively to develop solutions to he challenges of COVID-19 eg. Hot/Cold sites and home visiting services etc. 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 - 13/02/20 - 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 - 03/12/19 - PCN OD plans include proposals for PCN development including development of vision and priorities. CCG Extended Primary Care Medical Services to be commissioned from PCNs from April 2020.

Phil Davis - 15/10/19 - All PCNs have submitted their maturity matrix and OD plans by 30th September deadline. Responses and support for PCNs being developed with NHSE/I 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.

Phil Davis - 13/08/20 - Sitrep reports continuing with PCNs, numbers of staff absent has reduced further over July and into August. Impact of contact tracing and risk assessment (see risk 957) being monitored through sitrep and Outbreak Management Plan. PCNs being supported to develop workforce plans which are required by end August. Risk rating reduced to reflect reduced numbers of staff absent.

Phil Davis - 17/06/20 - Daily sitrep reports show reductions in staff absences and staff unable to work remotely. Practices and PCNs developing models of service delivery to minimise risk of staff needing to self-isolate as a result of test and trace. CCG to support PCNs develop workforce plans by August and progress recruitment to additional roles. PC based CMHT workers model being developed and roles to recruited to.

Phil Davis - 16/04/20 - COVID-19 presents a considerable challenge to all practices regarding workforce through risks of illness and/or self-isolation reducing staff availability and hence service provision. Practices have taken steps to address challenges and reduce risk by moving to triage based systems and utilisation of telephone/video and online consultation. Where face:face consultations need to take place either separate Hot/Cold sites have been established or arrangements to triage externally to buildings and utilisation of dedicated rooms has been put in place. Practices and PCNs have consolidated sites from where services are delivered and are working collaboratively to minimise risk. As plans are further developed for the availability of testing for staff the number absent from work may reduce. A daily SITREP process is in place to understand current status of practices in terms of staff absences and impacts upon services, and any other challenges practices face. A RAG rating is provided by each practice and to date 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.

Phil Davis - 13/08/2020 - Practices have completed Risk Assessments on majority of staff and identified where action needs taking. CCG to review returns and identify any areas requiring for practices. Phil Davis - 29/07/2020 - Risk identified at Primary Care Commissioning Committee on 26/07/2020 as needing to be a separate risk. Previously had been incorporated in the broader primary care workforce risk. New risk will be reviewed by IAGC on 08/09/2020.

Review date	Risk Owner	CCG Committee
14/10/2020	Davis, Phil	Primary Care Commissioning Committee

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14/10/2020	Davis, Phil	Primary Care Commissioning Committee

14/10/2020	Davis, Phil	Primary Care Commissioning Committee
14/09/2020	Davis, Phil	Primary Care Commissioning Committee