## Primary Care Commissioning Committee Risk Report - December 2021 (extracted 07.12.21)

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
6 - Development of an agreed out of hospital strategy for Hull supporting local Primary Care Networks to determine models for transition to integrated provision as well as a new clinical leadership model which increases the emphasis of primary care at all	902 CCG practices unable to maintain a resilient primary care workforce resulting in reduced access to services and patient needs not being met. This risk is further exacerbated by the requirements of primary care with respect to the COVID-19 response, and in particular support to the vaccine programme, as well as the implications from the White Paper relating to next steps for integrated care systems.	Extreme Risk 16	High Risk 12	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.	care workforce strategy will be reported to Primary Care Joint Commissioning Committee. STP Strategic Partnership Board to oversee out of hospital care work-	External support for practice groupings to cover support for addressing workforce challenges	Need for NHS Pensions issue to be addressed at a national level to address the increasing the number of GPs retiring.	Adequate assurances in	Phil Davis - 07/12/21 - Risk rating increased from High to Extreme Risk to reflect current workforce challenge and in particular in recognition of challenge regarding Admin & Clerical / Reception workforce recruitment and retention in light of current access challenges. The Winter Access Fund is being used to support workforce including supporting primary care with recruitment. The Vaccination as a condition of deployment guidance has been received and its implications are being considered by practices - may create further pressure on the workforce.  Phil Davis - 13/10/21 - Recruitment to a number of practice roles remains challenging. PCN refreshed plans submitted at end of August. Further work underway with PCNs where there is a projected shortfall in the utilisation of ARRS resource available. Work on-going to develop potential hub and spoke model to increase GP training opportunities in practices.  NHS E International GP recruitment programme still underway.  Phil Davis - 12/08/21 - PCN plans for Phase 3 COVID Vaccination programme include a range of staffing models including the Trust bank; all plans reviewed by CCG to assess risk for primary care. ARRS recruitment on-going with PCNs refreshing plans for 2021/22 by end August and for 2021/22 - 2023/24 by end October. PCNs working with NHS E regarding accessing resources for initiatives to support recruitment of primary care workforce. Hub and spoke GP Training model being explored to support placement of GP training practices. Phil Davis - 15/06/21 - Pilot agreed to progress Mental Health Practitioner role. HCV ICS developing range of support to PCNs to assist in recruitment initiatives. At end May 21 3 of 5 PCNs have been successful in further ARRS recruitment. Recruitment challenges remain given scale of recruitment planned across HCV area.  Phil Davis - 12/04/21 - PCNs continuing to develop ARRS plans including for new roles included from 2021/22. In order to deliver Covid-19 vaccine programme to Cohorts 10-12 PCNs have submitted assurance regarding wor	5	Davis, Phil	Primary Care Commissioning Committee
6 - Development of an agreed out of hospital strategy for Hull supporting local Primary Care Networks to determine models for transition to integrated provision as well as a new clinical leadership model which increases the emphasis of primary care at all	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 with the Hull City Council Health and Wellbeing Overview and Scrutiny Commission.	Adequate controls in place.	Adequate assurances in place.	Phil Davis - 07/12/2021 - Engagement pilot continuing. CCG offering support to practices where required regarding patient engagement. HCV Winter Access Fund plans include public facing communications regarding primary care. LMC also running a public campaign regarding primary care.  Phil Davis - 12/10/2021 - Engagement pilot commenced with 5 pilot practices in Hull (1 per PCN) to develop the toolkit for use throughout primary care. Media coverage of access to primary care causing challenges for staff with reports of abuse particularly aimed at reception and telephony staff.  Phil Davis - 12/08/2021 - Work continuing on engagement pilot.  Phil Davis - 15/06/2021 - Hull CCG selected as pilot CCG for 'General Practice and Healthcare Partners Engagement Pilot' - aim is to support practices to provide inclusive access routes to their services and to engage with patients about these, promoting greater patient understanding and confidence in each route and greater use, where appropriate, of digital access channels. Target outcomes of the pilot include: improved patient understanding and experience of accessing GP care services; increased patient use of online consultation (OC) requests by patients; improved patient satisfaction with practice communications and improved satisfaction of practice staff with partner engagement as a result of the pilot.  Phil Davis - 12/04/2021 - Further engagement work in Hull undertaken - preliminary findings to be presented to June 2021 PCCC.		Davis, Phil	Primary Care Commissioning Committee
6 - Development of an agreed out of hospital strategy for Hull supporting local Primary Care Networks to determine models for transition to integrated provision as well as a new clinical leadership model which increases the emphasis of primary care at all	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 12	Commissioning - Integrated Delivery, Commissioning Manager,	Reports to Primary Care Commissioning Committee regarding PCN establishment and development. Regular communication with PCNs and escalating of any issues to SLT if required.	Committee and NHS E/I to support	Adequate controls in place.	Adequate assurances in place.	07/12/2021 - Work continues with PCNs - Clinical Directors and Lead Managers to support development including development of tuture place arrangements and PCNs role within them.  13/10/2021 - HCV ICS and Place plans, alongside Humber Primary Care Collaborative development incorporating support required for PCNs. 12/08/2021 - CCG continues to work with Humber CCGs and NHS E collaborative development incorporating support required for PCNs. 12/08/2021 - CCG continues to work with Humber CCGs and NHS E colleagues to support PCNs. PCNs developing plans for utilisation of 2021/22 PCN OD monies. Model of support for PCNs being developed as part of transition to ICS. 24/06/21 - Phil Davis - Risk rating to be discussed with PCCC in June 2021 and will be updated accordingly. 15/06/21 Phil Davis - Closer working developing across 4 Humber CCGs and with NHS E colleagues in relation to primary care and delivery of 2021/22 plans. Risk however remains during period of transition. 12/04/21 Phil Davis - Risk rating increased due to a number of CCG staff leaving roles and reduced capacity in CCG in short-term. Plans in development to cover gaps and review staff working across Hull & NL CCGs. 15/02/21 Phil Davis - Meetings between CCG PC Team and PCN Clinical Directors continuing. Additional support for Clinical Directors provided for Q4 2020/21 by NHSE. Link managers continue to support PCNs. Bevan Ltd PCN recruiting a secondee to a manager role to support PCN development. Practices being supported through CCG and LMC regarding business continuity plans. 07/10/20 Phil Davis - Regular meetings held between PCN Clinical Directors and CCG Primary Care Team and PCN Link Managers. Options for further CCG support for PCN managers being explored. Collaborative Hull and East Riding work continues. 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 support PCNs. Work to be undertaken to review PC	11/02/2022	Davis, Phil	Primary Care Commissioning Committee
9 - Maintain support for the effective local planning and response to the Coronavirus Pandemic, ensuring that positive innovations are retained, improved and generalised.	957 Risk assessment of staff within general practice, in line with the NHS England and NHS Improvement "Risk assessment for at-risk staff groups" letter of 25th June 2020, and the necessary mitigating actions may result in some practices having reduced capacity to deliver some services or being unable to deliver some services (eg. Face:Face consultations).	High Risk 8	High Risk 8	High Risk 12	Risk assessment tools and guidance available from NHS England and NHS Improvement	Situation reports provided by practices which include outcomes of staff risk assessments	Sitrep returns to NHS England and NHS Improvement	Adequate controls in place.	Adequate assurances in place.	Phil Davis - 08/12/2021 - Implementation of daily OPEL reporting by practices underway - includes development of system plans for support and mutual aid when required.  Phil Davis - 13/10/2021 - CCG receiving sitreps from practices by exception. Planning to extend use of the local system App for OPEL reporting to general practices. CCG continues to support practices where absences create capacity problems.  Phil Davis - 12/08/2021 - National General Practice SOP withdrawn in July. CCG continues to receive sitrep information from practices through PCNs - levels of COVID related absences remain low.  Phil Davis - 15/06/2021 - New National SOP received May 2021. Weekly sitrep process remains with practices / PCNs reporting by exception.  All Hull practices reporting Green for a number of months - risk rating reduced  Phil Davis - 12/04/2021 - Practices continue to deliver services in line with national general practice SOP during recovery phase. Nationally government has confirmed advice that shielding to be paused from 1/04/21. A letter was sent to all GP practices confirming change to shielding advice, requiring employers to refresh risk assessments of clinically extremely vulnerable staff, and setting out principles for the support of staff.  Phil Davis - 15/02/2021 - Practices continue to deliver services in line with national general practice SOP. CCG supporting practices with accommodation to support social distancing where necessary. Offer of Covid-19 vaccination to primary care staff in line with ICVI priority groups undertaken.  Phil Davis - 07/10/2020 - Work on-going with practices to understand their Risk Assessments and ensure all staff have been reviewed.  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		Davis, Phil	Primary Care Commissioning Committee

## Risk scoring = consequence x likelihood (C x L)

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

	Consequences/Severity										
Likelihood of occurrence	Insigni ficant -1	Minor -2	Moderate	Major -4	Extreme -5						
Rare -1	1	2	3	4	5						
Unlikely -2	2	4	6	8	10						
Possible -3	3	6	9	12	15						
Likely -4	4	8	12	16	20						
Almost Certain -5	5	10	15	20	25						