

CCG Governing Body – Part I

Report Details	
Meeting Date	5 September 2017
Report Title	Corporate Objectives and Risks – Governing Body Assurance Framework
Presented By/Title	David Bonson, Chief Operating Officer
Prepared By/Title	Executives and Risk Owners
Report Requirements	Discussion and Receive

Improvement and Assessment Framework Objectives	
• Better Health	Not applicable
• Better Care	Not applicable
• Sustainability	Not applicable
• Well-led	Yes

CCG Corporate Objectives	
• Through better commissioning, improve local health outcomes by addressing poor outcomes and inequalities	Not applicable
• To work collaboratively to deliver safe, high quality health and care services	Not applicable
• To ensure financial balance and improve efficiency and productivity	Not applicable
• To deliver a step change in the NHS preventing ill health and supporting people to live healthier lives	Not applicable
• To maintain and improve performance against core standards and statutory requirements	Yes
• To commission improved and effective out of hospital care	Not applicable
• To support research, innovation and growth	Not applicable

Committee Discussion	
Committee/Governing Body and Date	Executives and Deputies Team – 15.08.2017
	Clinical Leadership Team – Date
	Quality and Engagement Committee – 11.07.2017
	Finance and Performance Committee – 29.08.2017
	Audit Committee – To be submitted 09.10.2017
	Primary Care Commissioning Committee – Date
	CCG Governing Body – 05.09.2017

Internal Assurance Process (indicate if not applicable)	
Clinical Lead	N/A
Senior Lead Manager	David Bonson
Finance Manager	N/A
Quality Impact Assessment completed	N/A
Equality Impact and Risk Assessment completed	N/A
Patient and Public Engagement completed	N/A
Financial Implications	Potential resources implications
Risk Identified	Risk of ineffective management of risk and Governing Body Assurance Framework
Report Authorised by Executive Lead	David Bonson, Chief Operating Officer

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Introduction

The Governing Body Assurance Framework (GBAF) is one of the principal ways by which the Clinical Commissioning Group (CCG) holds itself to account; it helps to clarify and quantify risks that could compromise delivery of our strategic objectives. This paper provides the Governing Body of the CCG with an up to date report on the status of the CCG GBAF. The Framework has been updated to reflect the changes in the managed risks of the Clinical Commissioning Group (CCG) with a risk score of 12 and above.

Risk Register

The full CCG Risk Register has under gone an in-depth review during August 2017 to ensure that risks are describe accurately and risk scores are at appropriate levels. Gaps in assurance sources and mitigating controls have been updated. All closed risks that have been identified are captured for audit purposes on a Closed Risk Register tab including the rational for closing the risk.

The Risk Register is being monitored by the Executives and Deputies Team on a bi-monthly basis.

Board Assurance Framework

The revised GBAF is based on the updated Risk Register. The final GBAF was agreed by the Executives and Deputies Team on 15 August 2017 in order to provide assurance to the CCG Governing Body that the relevant risks are being monitored and the appropriate level of assurance is being provided.

The CCG Corporate Risk Register includes 12 risks with a score of 12+ and these have therefore been included on the GBAF.

The CCG Risk Heat Map (attached) has been updated to reflect the risks which are also aligned to the relevant corporate objectives including a risk summary. The Heat Map provides a graphical interpretation of the risks scoring 12+ on the GBAF.

A Historical Risk Movement schedule for 2017/18 has been produced (attached) which shows the initial risk score, current risk score and a diagram showing the direction of the risk movement.

Latest Position

The CCG Corporate Risk Register has a total of 17 risks.

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Total Risks on Risk Register

0	Low Risk	Unlikely to cause problems
0	Moderate Risk	Needs to be resolved or accepted at Departmental level
13	High Risk	Needs to be resolved or accepted at Departmental level
4	Extreme Risk	To be resolved or accepted at CCG Level

Risk Movement

Three risks have reduced in score.

Total Risk on the Governing Body Assurance Framework

0	Low Risk	Unlikely to cause problems
0	Moderate Risk	Needs to be resolved or accepted at Departmental level
7	High Risk	Needs to be resolved or accepted at Departmental level
4	Extreme Risk	To be resolved or accepted at CCG Level

The risks on the GBAF have been categorised into seven sections, Corporate Objectives 1,2,3,4,5,6,7

A breakdown of the entries on the GBAF is as follows:

Corporate Objective 1

0	Low Risk	Unlikely to cause problems
0	Moderate Risk	Needs to be resolved or accepted at Departmental level
1	High Risk	Needs to be resolved or accepted at Departmental level
0	Extreme Risk	To be resolved or accepted at CCG Level

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Risk CO1.1 - Ineffective commissioning decisions.

The CCG continues monitoring of all contracts and early action when indicators begin to deteriorate

- Ensure ownership of the indicators at a commissioning lead level and that leads understand the issues that may impact on the delivery of the specific indicators and are able to take corrective action
- Ensure implementation of and adherence to action plans for indicators not achieving or under-performing
- Identify and work with other organisations achieving the 'problem' indicators to seek support and gather evidence of best practice

Risk score 12

Corporate Objective 2

0	Low Risk	Unlikely to cause problems
0	Moderate Risk	Needs to be resolved or accepted at Departmental level
0	High Risk	Needs to be resolved or accepted at Departmental level
0	Extreme Risk	To be resolved or accepted at CCG Level

Corporate Objective 3

0	Low Risk	Unlikely to cause problems
0	Moderate Risk	Needs to be resolved or accepted at Departmental level
3	High Risk	Needs to be resolved or accepted at Departmental level
1	Extreme Risk	To be resolved or accepted at CCG Level

CO3.1 – Financial sustainability.

- Deliver identified 17/18 schemes and develop further QIPP schemes to deliver the combined 17/18 and 18/19 requirement.
- Activity based QIPP initiatives are under way. Reaching agreement on a non PbR/assured contract would enable the collective focus to shift towards closing the financial gap.

Risk score 16

CO3.3 - Activity over-performance.

- Agree an assured contract with the main providers.
- Implement next wave of QIPP schemes.
- Active monitoring and follow up of causes of over performance.
- The plan is being re profiled to ensure that the assured value is predicted on a realistic value.

Risk score 12

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CO3.4 Planned Savings / QIPP

- Continuing review of QIPP schemes, and identification of new schemes for 2017-2018
- Implement appropriate Fylde Coast/ Lancashire-wide schemes.
- Agree assured value contract with main providers.

Risk score 12

CO3.5 – GP Retention

- Baseline funding in place
- Reassess risks each month based on uptake of scheme
- Financial risks are assessed each month. These are discussed at F&PC and reported to NHSE.

Risk score 12

Corporate Objective 4

0	Low Risk	Unlikely to cause problems
0	Moderate Risk	Needs to be resolved or accepted at Departmental level
0	High Risk	Needs to be resolved or accepted at Departmental level
1	Extreme Risk	To be resolved or accepted at CCG Level

CO4.1 - Programme of change (STP)

- Continued monitoring of all contracts and early action when indicators begin to deteriorate
- Ensure ownership of the indicators at a commissioning lead level and that leads understand the issues that may impact on the delivery of the specific indicators and are able to take corrective action
- Ensure implementation of and adherence to action plans for indicators not achieving or under-performing
- Identify and work with other organisations achieving the 'problem' indicators to seek support and gather evidence of best practice

Risk score 16

Corporate Objective 5

0	Low Risk	Unlikely to cause problems
0	Moderate Risk	Needs to be resolved or accepted at Departmental level
2	High Risk	Needs to be resolved or accepted at Departmental level
2	Extreme Risk	To be resolved or accepted at CCG Level

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CO5.4 - Ambulance red response performance

- Weekly performance mg in place to monitor against planned improvement trajectories and challenge where performance not meeting trajectories.
- Routine discussion at contracting group of monthly and cumulative performance.
- Performance notice served - 23/11/16
- Agreed remedial action plan
- Recovery trajectories and dashboard in development

Risk score 12

CO5.6 - Capacity and capability.

- Clarity regarding Fylde Coast/ STP wide led initiatives and resources required/ available and CCG impact.
- Establish Fylde Coast PMO and integrated working arrangements
- Ensure CSU services are engaged effectively.

Risk score 16

CO5.7 - Cyber Attack

- Debrief following the May 2017 cyber-attack.
- Ensure and comply with robust implementation of IT technical controls/security developments
- Maintain established co-working and support across the Fylde Coast on IT issues
- Ensure recovery of IT operating capacity in the CCG and practices

Risk score 16

CO5.8 - Safeguarding

- Staff recruitment audit to be undertaken to ensure DBS and relevant checks undertaken
- Supervision policy to be implemented and then audit of the compliance with supervision
- Internal Audit Review of Safeguarding in 2017/18
- Review of commissioned safeguarding capacity across the Fylde coast in progress
- Review of commissioned safeguarding capacity and a focus on an outcome framework; review of internal safeguarding procedure bundle – adding some additional documents; Internal safeguarding quality and assurance meeting to be established; review of CCG safeguarding resource and role of Named Doctor; Review and strengthening of safeguarding leadership in Primary Care; Commence development sessions for GP Practice Safeguarding Leads – planned for the autumn term.

Risk score 12

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Corporate Objective 6

0	Low Risk	Unlikely to cause problems
0	Moderate Risk	Needs to be resolved or accepted at Departmental level
1	High Risk	Needs to be resolved or accepted at Departmental level
0	Extreme Risk	To be resolved or accepted at CCG Level

CO6.1 - New Models of Care.

- Continued monitoring of all indicators and early action when indicators begin to deteriorate
- Ensure ownership of the indicators at a commissioning lead level and that leads understand the issues that may impact on the delivery of the specific indicators and are able to take corrective action
- Ensure implementation of and adherence to action plans for indicators not achieving or under-performing
- Identify and work with other organisations achieving the 'problem' indicators to seek support and gather evidence of best practice

Risk score 16

Corporate Objective 7

0	Low Risk	Unlikely to cause problems
0	Moderate Risk	Needs to be resolved or accepted at Departmental level
0	High Risk	Needs to be resolved or accepted at Departmental level
0	Extreme Risk	To be resolved or accepted at CCG Level

Heat Map

The Heat Map has been updated to reflect the August 2017 updates to the GBAF. The Heat Map provides a graphical interpretation of the risks scoring 12+ on the GBAF.

Recommendation

The Governing Body is asked to note the revised GBAF and Corporate Risk Register and continue to support the risk management arrangements for the CCG.

David Bonson
 Chief Operating Officer