

# Primary Care Commissioning Committee

27 September 2017

<b>Details</b>	Part 1	✓	Part 2		Agenda Item No.	11
Title of Paper:	Risk Report					
Board Member:	Margaret O'Dwyer, Director of Commissioning and Business Delivery					
Author:	Lynne Byers, Risk Manager					
Presenter:	Amy Lepiorz, Deputy Director of Primary Care					
Please indicate:	For Decision	X	For Information		For Discussion	X

## Executive Summary

<b>Summary</b>	<p>Risk management provides a systematic and consistent integrated framework through which the CCG's strategic objectives are pursued. This involves the identification of risks, threats and opportunities to achieving those objectives and taking steps to mitigate manage and control the associated risks to delivery.</p> <p>This paper includes those risks assigned to the Primary Care Commissioning Committee in line with the Risk Management Strategy.</p>					
<b>Risk</b>	<b>High</b>		<b>Medium</b>	X	<b>Low</b>	
	As the processes for embedding risk reporting and recording are being refreshed, there is the potential that not all risks are captured through the risk register.					
<b>Recommendations</b>	<p>The Primary Care Commissioning Committee is asked to:</p> <ul style="list-style-type: none"> <li>• receive the risk report;</li> <li>• note the updates on the risk register as reflected in Appendix A and B;</li> <li>• note the update provided;</li> <li>• support the risk recommended for closure;</li> <li>• note the summary position including that <b>0</b> risks are due for a review between 16 to 30 September 2017</li> </ul>					

## Strategic Themes

To empower patients so that they want to, and do, take responsibility for their own healthcare. This includes prevention, self care and navigation of the system	
To deliver system wide transformation in priority areas through innovation	
To develop Primary Care to become excellent and high performing commissioners	
To work with the Local Authority to establish a single commissioning organisation	
To maintain and further develop robust and effective working relationships with all stakeholders and partners to drive integrated commissioning	
To deliver long term financial sustainability in partnership with all stakeholders through innovative investment which will benefit the whole Bury economy	
To develop the Locality Care Organisation to a level of maturity such that it can consistently deliver high quality services in line with Commissioner's intentions.	
Equality Analysis Assessed?	N/A Supports NHS Bury CCG Governance arrangements ✓

## Primary Care Commissioning Committee Risk Register

### 1.0 Introduction

- 1.1 This report provides an updated position in respect to those risks that have been identified, assessed and categorised as having a potential impact on the CCG in relation to Primary Care.
- 1.2 The report presents the risk position and status as at **15 September 2017**.

### 2.0 Background

- 2.1 The Risk Register (**see Appendix A**) captures all risks, irrespective of risk level, that have been categorised by the risk owner with the potential to impact on the areas of responsibility of the Committee.
- 2.2 **Appendix B** provides an increased level of detail on all those risks that have been reviewed in this period, including controls, assurances and gaps as well as mitigating actions to reduce the risk, *and also includes information in respect of risks which have been recommended for closure or any risks currently scored 15+ by the Primary Care Workstream*. The risk matrix is also provided at **Appendix C** for ease of reference.
- 2.3 There are currently a total of **29** risks being monitored across the organisation (excluding the Governing Body Assurance Framework) of which **2** are included on the Primary Care Commissioning Committee Risk Register.
- 2.4 An assessment of each risk is undertaken between the risk owner and risk manager, on a schedule specific and appropriate to each risk, with any changes or progress being recorded and outlined within the report.
- 2.5 This report includes all open risks, irrespective of risk score for risks assigned to this committee and any risks that are the responsibility of the Primary Care Workstream, which, have a current risk level of 15+ and any risks which have been recommended for closure. It is the Committee's responsibility to oversee these risks, seek assurance that appropriate controls are in place to manage the risks and that actions are being implemented to further reduce the risk and achieve target risk score.
- 2.6 The Committee is able to request that further risks are added to the register through the course of its work.

### 3.0 Risk Review

- 3.1 This section of the report provides a commentary on those risks which have been reviewed in the reporting period.
- 3.2 The Committee were advised in the last risk report presented to the August meeting that **0** risks were scheduled for a risk review between 11 to 31 August 2017, however operational discussion in relation to the Whitefield development have prompted an interim review of the associated risks with the project.
- 3.3 The interim review was undertaken on 12 September 2017, and changes have been made to

the risk as follows:

### **Risks with no reported change**

- 3.4 There is **1** risk falling within this category on this report.
- **RR\_SB\_F\_05 Uplands Health Centre - Existing Infrastructure**
- 3.5 This risk is currently assessed at level 4, and following review no change has been made to the score as the CCG remains assured that the NHSPS planned rolling programme is deemed fit for purpose.
- 3.6 The impact of further delays to the new Whitefield development has been considered. The existing structure will need to remain suitable for service delivery for a longer time period than initially anticipated; however there are no significant concerns that this cannot be managed. A watching brief of the NHSPS maintenance programme is undertaken and currently it has been reported that there is no imminent likelihood of increase to the level of risk at this time.
- 3.7 The risk however will now be re-assessed on a bi-monthly basis to ensure there are no critical works to be undertaken. Additionally a new action has been identified to reflect the requirement for the Whitefield development project plan and associated timescales for delivery to be agreed.
- 3.8 This risk remains at target level, however as a number of actions remain open, the risk is not proposed for closure and will therefore remain on the risk register to enable continuous oversight.

### **Risks that have reduced in score**

- 3.9 There are **0** risks falling within this category on this report.

### **Risks that have increased in score**

- 3.10 There are **0** risks falling within this category on this report.

### **Risks that have reached the target score**

- 3.11 There is **1** risk falling within this category on this report.
- **RR\_SB\_F\_05 Uplands Health Centre - Existing Infrastructure**
- 3.12 This risk although at target level will remain on the risk register for continuous oversight whilst the new build has been established.

### **Risks recommended for closure**

- 3.13 There is **1** risk falling within this category on this report.
- **New Build re: Uplands Health Centre – Structure**
- 3.14 Operational discussions continue in respect to the overall programme, however due to the extent of NHSPS slippage and concerns around robustness of data, the CCG is now taking stock of other potential build, financing and partnering options. This will inevitably lead to a significant further slippage in timescales.
- 3.15 The Primary Care Committee have supported the recommendation that a fundamental review of this project and the available options should be undertaken in light of:

- Extent of slippage of NHSPS work
- Economic viability of the original preferred options

- 3.16 Given the significant changes, a new options appraisal paper with a recommended preferred course of action and timelines has been prepared and is scheduled to go through the CCG Governance arrangements during October 2017.
- 3.17 In this context, this risk is considered no longer valid, and therefore the proposal is to close the risk and re-establish the appropriate risk once the project timescales have been re-agreed.

### New Risks

- 3.18 During this reporting period **0** new risks have been added to the risk register.
- 3.19 At the last Committee Meeting it was agreed that a generic NHSPS maintenance risk would be captured to identify any concerns. This is currently under review with the Acting Chief Finance Officer and an update will be reported to the appropriate committee.

### Risks that will be reported through the Corporate Risk Register

- 3.20 The Corporate Risk register details risks which are scored 15 or above. The Primary Care Risk Register contains **0** risks at this level.

### Risk Summary

- 3.21 The following summary is provided of the risk of the Primary Care Commissioning Committee Risk Register:



	11/8/2017-15/9/2017	Aug/Sept %
Total Risks on Report	2	
New Risks	0	0.0%
Risks reduced since last report	0	0.0%
Risks increased since last report	0	0.0%
Risk that have reached target level	1	50.0%
Low Risks (1-3)	0	0.0%
Medium Risks (4-6)	1	50.0%
High Risks (8-12)	1	50.0%
Significant Risks (15-25)	0	0.0%
Risks reviewed in this period (11/8- 15/9/2017)	2	100.0%
Risks yet to be reviewed in (11/8- 15/9/2017 risk review due date)	0	0.0%
Risks to be reviewed for next report (16/9/2017-30/9/2017)	0	0.0%

## 4.0 Recommendations

- 4.1 The Primary Care Commissioning Committee is asked to:
- receive the risk report;
  - note the updates on the risk register as reflected in Appendix A and B;
  - note the update provided;
  - support the risk recommended for closure; and
  - note the summary position including that **0** risks are due for review between 16 to 30 September 2017

**Lynne Byers  
Risk Manager  
September 2017**

**Appendix A: Primary Care Commissioning Committee Risk Register: Summary**

Risk Id	Risk Description	Date Risk Identified	Original Risk Score	Risk Last Reviewed	Current Risk Score	Target Risk Score	Direction of Travel	Next Review Date
RR_Q_F_06	New Build re: Uplands Health Centre - Structure	09-Feb-2017	12	12-Sep-2017	9	1		Recommended for closure
RR_SB_F_05	Uplands Health Centre - Existing Infrastructure	23-Aug-2012	20	12-Sep-2017	4	4		13-Nov-2017




## Appendix B: Primary Care Commissioning Committee: Detailed Risk

<b>Risk Code &amp; Title</b>	RR_Q_F_06 New Build re: Uplands Health Centre - Structure				
<b>Risk Statement</b>	Following agreement to support and deliver a new health and care centre in Whitefield there is a risk that the delivery programme may slip further if resource is not maintained and the tight project framework put in place to deliver the required outputs is not delivered to plan. <b>Because of potential delays this may impact further on maintaining the maintenance of the existing Uplands infrastructure, and the knock on effect on quality of patient care.</b>	<b>Risk Owner</b>	<b>Current Risk Status</b>	<b>Direction of Travel</b>	<b>Annual profile</b>
		Mike Woodhead			
<b>Current Issues</b>	<p><b>Although NHS Bury CCG is not the sole owner of the risk, the implications of the risk not being managed effects how healthcare is provided to residents of Bury.</b></p> <ul style="list-style-type: none"> <li>. Inadequate building, disruption to patient care</li> <li>. Requirement to access capital funding</li> <li>. Bound by capital funding constraints and regulations</li> <li>. Potential for the planning permission not to be granted (no control)</li> <li>. <b>NHSPS milestone plan has been subject to slippage which may impact on the existing health centre</b></li> </ul>				

Original Risk				Current Risk				Next Risk Review Date	Target Risk			
Date Risk Identified	Impact	Likelihood	Rating	Current Risk Review Date	Impact	Likelihood	Rating		Impact	Likelihood	Rating	Target Date
09-Feb-2017	3	4	12	12-Sep-2017	3	3	9		1	1	1	31-Mar-2019


Existing Assurance	Existing Controls	Gaps in Assurance / Gaps in Controls
<ul style="list-style-type: none"> <li>. SMT receive key stage reports on an adhoc basis</li> <li>. Monthly updates given to the Bury Strategic Estates Group</li> <li>. CCG Risk lead attends regular meetings with stakeholders (including Bury MBC, NHSE, NHS Property Services and Community Solutions)</li> <li>. Regular meetings are taking place with the practice and other potential stakeholders</li> <li>. Regular reporting to Primary Care Commissioning Committee (for information)</li> <li>. Monthly Whitefield development steering group - with detailed highlight reports from NHSPS and LiftCo</li> </ul>	<ul style="list-style-type: none"> <li>. CCG has actively worked with NHSE, the practice, Pennine Care and other stakeholders to determine the preferred site for the long term development.</li> <li>. Scoping options developed and supported by the local LIFT (Local Improvement Finance Trust) Company (Bury and Tameside Community Solutions) with involvement from NHSPS</li> <li>. Standing agenda item on the Bury Strategic Estates group</li> <li>. PID has been approved. The NHSPS, CCG and NHSE are working jointly on a full business case for submission for final approval by the relevant committees of the CCG, NHSPS and NHS England</li> <li>. <b>Review of options appraisal being undertaken in light of the economic viability of the original preferred solution</b></li> </ul>	<ul style="list-style-type: none"> <li>. Action plan is long term and is slow moving, programme milestones are subject to change ( outside of CCG control)</li> <li>. There are further stages in the business case and procurement which are all subject to further approval (internal and external) - monitored via changes to the workplan (<b>5c-5f</b>)</li> </ul>

Action	Due Date	Assigned To	'Action' progress update (latest)	% Progress	Status	
05a Review options appraisal and recommend preferred course of action	31-Oct-2017		<p><b><u>Progress update:</u></b>  <b><u>Q1. What has happened since this action was last reviewed, what decisions have been made?</u></b></p> <p>A1. Financial and non-financial appraisal reviewed with NHSPS in light of new evidence. Paper to be finalised to go through CCG Governance framework for decisions October 2017</p>	70%		In Progress
05a Schedule of Accommodation Approved	20-May-2016	Mike Woodhead	Approved by Whitefield User Group, Tech Group, Steering Group, SMT	100%		Completed
05b PID Complete and Approved	31-Jul-2016	Mike Woodhead	PID approved by CCG and Bury SEG; and then by NHSPS and NHSE	100%		Completed
05c Approval by relevant committee of the CCG, NHSPS, NHS England – OBC approval	30-Apr-2018	Mike Woodhead	Revised programme issued by NHSPS August 2017	0%		In Progress
05d Approval by relevant committee of the CCG, NHSPS, NHS England – FBC approval	31-Jul-2018	Mike Woodhead	Revised programme issued by NHSPS August 2017	0%		In Progress
05e Commence on Site (Estimated 60 week build)	31-Oct-2018	Mike Woodhead	Revised programme issued by NHSPS August 2017	0%		In Progress
05f Completion and operationalisation	30-Nov-2019	Mike Woodhead	Revised programme issues by NHSPS August 2017	0%		In Progress

<b>Risk Code &amp; Title</b>	RR_SB_F_05 Uplands Health Centre - Existing Infrastructure				
<b>Risk Statement</b>	If the CCG/NHSPS fail to deliver a new health and care centre to replace the existing Uplands Health Centre there will be an ever increasing risk that the premises will deteriorate to state patient care will be interrupted or can no longer be delivered to the local population. <b>The risk to the CCG is the impact on service delivery should the building fail.</b>	<b>Risk Owner</b>	<b>Current Risk Status</b>	<b>Direction of Travel</b>	<b>Annual profile</b>
		Mike Woodhead			
<b>Current Issues</b>	<p><b>Although NHS Bury CCG is not the sole owner of the risk, the implications of the risk not being managed effects how healthcare is provided to residents of Bury.</b></p> <ul style="list-style-type: none"> <li>. Inadequate building, disruption to patient care</li> <li>. External timber cladding is in very poor condition and requires replacement</li> <li>. The internal fabric of the building is generally in poor condition</li> <li>. Domestic hot water pump is in need of replacement and presents a high risk to clinical service provision</li> </ul>				

Original Risk				Current Risk				Next Risk Review Date	Target Risk			
Date Risk Identified	Impact	Likelihood	Rating	Current Risk Review Date	Impact	Likelihood	Rating	Next Risk Review Date	Impact	Likelihood	Rating	Target Date
23-Aug-2012	5	4	20	12-Sep-2017	2	2	4	13-Nov-2017	2	2	4	31-Mar-2019

Existing Assurance	Existing Controls	Gaps in Assurance / Gaps in Controls
<ul style="list-style-type: none"> <li>. Regular agenda item on the Whitefield Steering group with status and mitigation reports provided by NHSPS</li> <li>. Updates given to the Bury Strategic Estates Group</li> <li>. Adhoc reporting to Primary Care Commissioning Committee (for information)</li> </ul>	<ul style="list-style-type: none"> <li>. Adhoc agenda item on the Whitefield Steering group with status and mitigation reports provided by NHSPS</li> <li>. NHSPS continually monitors statutory compliance and H&amp;S at the site and if critical works are identified these would be addressed in the appropriate manner as landlord works. A specific lifecycle and maintenance programme has been developed for the property</li> <li>. Longer term risk control plan is the development of the new build</li> <li>. CCG Business continuity plan cover major/adverse incidents</li> <li>. CCG monitor the NHSPS maintenance plan</li> <li>. <b>Development of new build options appraisal</b></li> </ul>	<ul style="list-style-type: none"> <li>. None identified</li> </ul>

Action	Due Date	Assigned To	'Action' progress update (latest)	% Progress	Status
05a Review options appraisal and recommend preferred course of action	31-Oct-2017		<p><u>Progress update:</u>  <u>Q1. What has happened since this action was last reviewed. what decisions have been made?</u></p> <p>A1. Financial and non-financial appraisal reviewed with NHSPS in light of new evidence. Paper to be finalised to go through CCG Governance framework for decisions October 2017</p>	70%	 In Progress



## Appendix C: Risk Matrix

### Quantitative Measure of Risk – Consequence Score

	Consequence score (severity levels) and examples of descriptors				
	1	2	3	4	5
Domains	Negligible	Minor	Moderate	Major	Catastrophic
Impact on the safety of patients, staff or public (physical/psychological harm)	Minimal injury requiring no/minimal intervention or treatment.	Minor injury or illness, requiring minor intervention	Moderate injury requiring professional intervention  RIDDOR/agency reportable incident  An event which impacts on a small number of patients	Major injury leading to long-term incapacity/disability   Mismanagement of patient care with long-term effects	Incident leading to death   An event which impacts on a large number of patients
Quality/Complaints/audit	Peripheral element of treatment or service suboptimal  Informal complaint/inquiry	Overall treatment or service suboptimal  Formal complaint (stage 1) Local resolution	Treatment or service has significantly reduced effectiveness  Formal complaint (stage 2) complaint  Local resolution (with potential to go to independent review)  Repeated failure to meet internal standards  Major patient safety implications if findings are not acted on	Non-compliance with national standards with significant risk to patients if unresolved   Multiple complaints/independent review   Low performance rating  Critical report	Totally unacceptable level or quality of treatment/service  Gross failure of patient safety if findings not acted on  Inquest/ombudsman inquiry   Gross failure to meet national standards  Severely critical report
Human resources/organisational development/staffing/competence	Short-term low staffing level that temporarily reduces service quality (< 1 day)	Low staffing level that reduces the service quality	Late delivery of key objective/ service due to lack of staff  Low staff morale  Poor staff attendance for mandatory/key training	Uncertain delivery of key objective/service due to lack of staff  Very low staff morale  No staff attending mandatory/ key training	Non-delivery of key objective/service due to lack of staff   No staff attending mandatory training /key training on an ongoing basis
Statutory duty/ inspections	No or minimal impact or breach of guidance/ statutory duty	Breach of statutory legislation   Reduced performance rating if unresolved	Single breach in statutory duty  Challenging external recommendations/ improvement notice	Multiple breaches in statutory duty  Enforcement action   Low performance rating  Critical report	Multiple breaches in statutory duty  Prosecution   Zero performance rating  Severely critical report

	Consequence score (severity levels) and examples of descriptors				
	1	2	3	4	5
Domains	Negligible	Minor	Moderate	Major	Catastrophic
Adverse publicity/ reputation	Rumours  Potential for public concern	Local media coverage  short-term reduction in public confidence  Elements of public expectation not being met	Local media coverage  Long-term reduction in public confidence	National media coverage <3 days  service well below reasonable public expectation	National media coverage h >3 days  MP concerned (questions in the House)  Total loss of public confidence
Business objectives/ projects	Insignificant cost increase  No impact on objectives	<5 per cent over project budget  Minor impact on delivery of objectives	5–10 per cent over project budget	Non-compliance with national 10–25 per cent over project budget  Major impact on delivery of strategic objectives	Incident leading >25 per cent over project budget  Failure of strategic objectives impacting on delivery of business plan
Finance including claims	Small loss Risk of claim remote	Loss of 0.1–0.25 per cent of budget  Claim less than £10,000	Loss of 0.25–0.5 per cent of budget  Claim(s) between £10,000 and £100,000	Loss of 0.5–1.0 per cent of budget  Claim(s) between £100,000 and £1 million	Loss of >1 per cent of budget  Claim(s) >£1 million
Service/business interruption Environmental impact	Loss/interruption of >1 hour  Minimal or no impact on the environment	Loss/interruption of >8 hours  Minor impact on environment	Loss/interruption of >1 day  Moderate impact on environment	Loss/interruption of >1 week  Major impact on environment	Permanent loss of service or facility  Catastrophic impact on environment

### Qualitative measure of risk – Likelihood Score

	1	2	3	4	5
Descriptor	Rare	Unlikely	Possible	Likely	Almost certain
Frequency How often might it/does it happen	Not expected to occur for years	Expected to occur annually	Expected to occur monthly	Expected to occur weekly	Expected to occur daily
Probability	<1%	1-5%	6-20%	21-50%	>50%
	Will only occur in exceptional circumstances	Unlikely to occur	Reasonable chance of occurring	Likely to occur	More likely to occur than not occur

### Quantification of the Risk – Risk Rating Matrix

		Likelihood					
		1	2	3	4	5	
		Rare	Unlikely	Possible	Likely	Almost certain	
Consequence	5	Catastrophic	5	10	15	20	25
	4	Major	4	8	12	16	20
	3	Moderate	3	6	9	12	15
	2	Minor	2	4	6	8	10
	1	Negligible	1	2	3	4	5