

811 There is a risk that provider workforce constraints may impact on the ability of providers to deliver, leading to sub-optimal care.
AF28

	Initial	Current	Target
Likelihood	LIKELY	LIKELY	UNLIKE
Consequence	MAJOR	MAJOR	MAJOR
Overall rating	16	16	8

Summary of Current Mitigation

Provider workforce challenges and actions are overseen in the Local Workforce Action Board (LWAB) which links with the Strategic Workforce Group at BOB-level. The actions are system-based and require commitment and drive from all stakeholders. Some provider workforce challenges are based on external economical and housing factors.

Controls

- 03/07/2019 - Local Workforce Action Board oversees challenges from an STP level
- 22/08/2019 - Good interface with Health Education England (Thames Valley)
- 22/08/2019 - A fixed term appointment of Director of Human Resources at main acute provider
- 07/01/2020 - The Local Authority have appointed a workforce transformation lead for adult services
- 07/01/2020 - Work across BOB to ensure a consistent resolution to the pensions issue
- 07/01/2020 - The Local Authority have developed a "finding a home in Oxfordshire" accomodation guide affecting high-earning staff in the NHS
- 07/01/2020 - Government funding for the Student Nursing bursary will support recruitment and training
- 07/01/2020 - Oxford University Hospitals have made substantive appointments into Human Resources, to lead the workforce agenda at the trust

Assurance

- 03/07/2019 - LWAB operates at STP level with participation from major stakeholders
- 22/08/2019 - No services have been closed as a result of staffing challenges
- 22/08/2019 - Primary Care forms path of the LWAB
- 22/08/2019 - Reports from providers on recruitment challenges allows some secondary assurance
- 22/08/2019 - Requirements for providers to include workforce in planning as part of the long term plan
- 31/10/2019 - Oxford University Hospitals NHS Foundation Trust have recently undergone successful recruitment
- 31/10/2019 - Oxford Health NHS Foundation Trust are developing the Associate Nurse role
- 16/01/2020 - The LWAB has an action plan ongoing to implement the NHS People Plan

Gaps in Controls

- 03/07/2019 - External economic, housing, social & political constraints which LWAB has limited scope to mitigate
- 03/07/2019 - LWAB requires commitment from stakeholders across the system

Gaps in Assurance

- 03/07/2019 - Not all stakeholders are represented or driving agenda
- 22/08/2019 - Recruitment information is only available as secondary assurance

Action Assigned to:	Due:	Action Description:	Progress to Date:	Completed Date:
Sula Wiltshire	30/04/2020	The LWAB meets quarterly to address system workforce challenges	LWAB meetings are ongoing across system	
Sula Wiltshire	31/03/2020	LWAB has an action plan to implement the actions from the NHS People Plan.	Actions are in process, with log provided from latest LWAB	

815 Poor cybersecurity leaves OCCG at risk of cyber attack. This can result in data loss, ransom, denial of service, business continuity impacts and a barrier to data sharing. The consequences can be financial, operational, reputational and regulatory.
AF29

	Initial	Current	Target
Likelihood	LIKELY	LIKELY	UNLIKE
Consequence	MAJOR	MAJOR	MAJOR
Overall rating	16	16	8

Summary of Current Mitigation

Work has been done map and understand current vulnerabilities and an action plan is being drawn up to address these.

Controls

- Aug 19 Included in system (ODSG) programme and interdependencies have been recognised and mapped.
- Aug 19 Local cybersecurity arrangements are in place for individual organisations and the local network.
- Aug 19 Audit processes are in place, including vulnerability and penetration testing at organisation and network level.
- Aug 19 IM&T capital plans include upgrades that reduce risk.
- Aug 19 CCG SLA with CSU has been re-negotiated to include a commitment to deliver cyber security plus within 3 months GPIT support arrangements in place under contract via CSU. Including incident management.
- Aug 19 CareCert reports flowing through to CCG.
- Aug 19 GPIT replacement programme in place.

Assurance

- Aug 19 CSU SLA
- Aug 19 Workstream report to ODSG
- Aug 19 CCG Internal Audit Report
- Aug 19 Incident reporting from CSU on GPIT

Gaps in Controls

- Aug 19 New CSU service spec not yet fully implemented
- Aug 19 No policy to control software and hardware rights in practices
- Aug 19 Old IT infrastructure in places.
- Aug 19 Open cybersecurity focussed culture not yet evident in the system

Gaps in Assurance

- Jan 2020 Cyber essentials plus accreditation not received but changes in national requirements requires adjustments
- Aug 19 Sight of system partner audit reports.

Action Assigned to:	Due:	Action Description:	Progress to Date:	Completed Date:
Cecile Coignet	31/08/2020	Complete Network upgrade to address old infrastructure issue	New action	
Cecile Coignet	30/06/2020	Take steps to help move cybersecurity organisation centric culture towards an open, system centric culture	New action	
Cecile Coignet	30/06/2020	System action plan adopted by ODSG	Progress update received by ODSG - awareness is growing	
Cecile Coignet	30/06/2020	Admin rights to be revoked	Project underway - dialogue with LMC underway	
Cecile Coignet	30/06/2020	unmanaged devices such as appointment screens in practices can be a source of infection	underway	
Cecile Coignet	30/04/2020	New CSU service to be implemented	Service spec signed off - implementation underway	
Cecile Coignet	30/04/2020	Adjust Action Plans to meet national requirements: DSP toolkit and cyber essential plus	Jan 2020: New action	
Cecile Coignet	28/02/2020	ensure a phishing exercise is carried out and communicate results to promote cyber awareness	Exercise complete 19/11/2019. Communication under development	
Cecile Coignet	28/02/2020	they introduce vulnerability in our infrastructure	in progress but issues with OUHFT delays are being raised at ODSG	

816 Risk that we do not implement digital solutions to provide a single shared care record for Oxon. The consequence of this is that the benefits of delivering integrated person and population centred care aren't realised to their potential.
AF30

	Initial	Current	Target
Likelihood	LIKELY	LIKELY	UNLIKE
Consequence	MAJOR	MAJOR	MAJOR
Overall rating	16	16	8

Summary of Current Mitigation

System governance arrangements include the Oxfordshire Digital Steering Group (ODSG) reporting to the ISDB. ODSG will have oversight of programme delivery, enabling the necessary buy-in for implementation and adoption. The technical solutions are available to Oxfordshire but next steps require agreement from data controllers to share and 'on-board' patient data into the solutions. Business case completed and signed off at ODSG, application (BOB signed) submitted to NHSE.

Controls

- Aug 19 A platform/software solution is in place for Oxfordshire (Cerner HIE, HealthIntenet and Patient Portal).
- Aug 19 Oxfordshire is signed up to the LHCRE which will provide a shared care record and population health management capability.
- Aug 19 System digital group has been established with all key stakeholders engaged. Reporting to system CEO group.
- Aug 19 CEO sponsor identified.
- Aug 19 CCG staff engaged to provide the link and support to PCNs to adopt.
- Aug 19 Programme and project management arrangements are in place.
- Aug 19 Links in place to the Population Health Management workstream (public health led).
- Aug 19 Funding in place to 'onboard' community, mental health, social care and SCAS data.

Gaps in Controls

- Aug 19 No data sharing agreement in place with GP practices to share and include primary care data.
- Aug 19 Up to date project and programme plans.
- Aug 19 Change in key leadership in organisations
- Aug 19 Funding agreements to cover full scope of PHM capabilities (disease registries) and system analytic service.
- Aug 19 Commitment from PCNs, practices and LMC.
- Aug 19 National IG framework for data sharing.

Assurance

- Aug 19 Programme reporting to ODSG.
- Aug 19 ODSG Terms of Reference.- evidence that that this work is captured by system governance
- Aug 19 ODSG and ISDB minutes – evidence that system oversight is in place.
- Aug 19 Project highlight and exception reports.

Gaps in Assurance

- Aug 19 Signed DSAs for participants in a full shared record. User acceptance and clinical safety certification.

Implementation of Digital Solutions

Action Assigned to:	Due:	Action Description:	Progress to Date:	Completed Date:
Cecile Coignet	16/01/2020	Draft and secure agreement for DSAs with all stakeholders.	Jan 20 New ToR agreed and implemented AUG 19 New Action	
Ms Julie Dandridge	15/11/2019	Structure and process to manage joint data controllership for Oxfordshire.	Jan 20 Under development Aug 19 Resource secured to progress	
Ms Julie Dandridge	31/10/2019	Project/programme plans updated and agreed. Robust reporting developed and implemented.	LMC agreement secured - next steps to be defined	

Other (specify in description), Jo Cogswell

Priorities affected: PRI1: Operational delivery
 PRI2: Transforming health and care
 PRI3: Devolution and integration
 PRI4: Empowering patients
 PRI5: Engaging communities
 PRI6: System leadership

Identified on: 01/07/2019
 Target closure: 24/08/2020

817 Risk the system doesn't work effectively together requirements of the Long Term Plan won't be delivered.
AF31 Implications are that we may not be able to ensure the delivery of services to meet population need & that the funding we can attract is limited.

	Initial	Current	Target
Likelihood	POSS	POSS	UNLIKE
Consequence	MAJOR	MAJOR	MAJOR
Overall rating	12	12	8

Summary of Current Mitigation

Programme of work to establish integrated care partnership for Oxfordshire. System focus accross health and care to collaboratively work to identify and address population need.

Controls

Aug 19 Review progress against programme of work to establish integrated care partnership for Oxfordshire. System focus accross health and care to collaboratively work to identify and address population need.
 Oct 19 System workshop to explore creation of an ICP led to set of ambitions to establish a revised operating model for an ICP

Gaps in Controls

Jan 20 Met by new operating model plans

Assurance

Aug 19 Programme management approach to the delivery of Oxfordshire 'place' workstreams. Scope, objectives and delivery plans subject to approval and monitoring.
 Aug 19 Quarterly reports to Health and Wellbeing Board
 Jan 20 Monthly Integrated Systems Delivery Board meetings to progress

Gaps in Assurance

Jan 20 Update report to 30th January Health & Wellbeing Board

Action Assigned to:	Due:	Action Description:	Progress to Date:	Completed Date:
Jo Cogswell	31/12/2020	Implement the agreed operating model for Oxfordshire ICP Transformation through February 2020. To be operational from March / April 2020.	January 2020 New Action	
Jo Cogswell	31/12/2020	Work to develop a plan to deliver the requirements of the NHS Long Term Plan in Oxfordshire	January 2020 New Action	
Jo Cogswell	30/04/2020	Implement the agreed operating model for Oxfordshire ICP Transformation through February 2020. To be operational from March / April 2020.	January 2020 New Action	

818 There is a risk that cost pressures against OCCGs allocation will lead to non-delivery of OCCG's statutory financial
AF32 duty and NHSE business rules for CCG's. This will impact on future sustainability and viability and impact on
 providers and services

	Initial	Current	Target
Likelihood	LIKELY	LIKELY	POSS
Consequence	MAJOR	MAJOR	MAJOR
Overall rating	16	16	12

Summary of Current Mitigation

The CCG is planning to deliver its 2019/20 financial plan targets moving to a balanced net risk position in Month 9. The CCG has submitted a financial plan as part of the ICS plan for 2020/21- 2023-24 in November 2019 and re-submitted in January 2020. The plan is for a deficit of £8.3m and is not compliant with business rules. Contracts have not yet been agreed with key providers but are expected to be some form of block arrangement. Risks to the financial plan are in excess of £5m and arise from potential tariff impacts which exceed the national planning assumptions, exposure to activity based expenditure and savings non-delivery.

Controls

- Aug 2019 : System priorities overseen by ISDB
- Aug 2019 : Alignment of resource (eg urgent care, planned care) to deliver joint plan
- Feb 2020: Priority savings projects for the ICS have been identified and SROs assigned to the projects
- Feb 2020: Process in place for developing CCG savings plan and review of discretionary spend

Gaps in Controls

- Aug 2019 : Development of Provider led ICP to replace ISDB and oversee delivery structure
- Aug 2019 : Agreed reporting into individual organisations
- Feb 2020: Savings plans for CCG not yet in place to close the gap

Assurance

- Aug 2019 : Operational Plan includes agreed priorities
- Nov 2019: ICS First draft plan submitted
- Jan 2020: ICS Revised plan submitted
- Feb 2020: Draft OCCG financial plan in place

Gaps in Assurance

- Submitted ICS plan for OCCG not compliant with business rules

Action Assigned to:	Due:	Action Description:	Progress to Date:	Completed Date:
Louise Patten	01/07/2020	Recruitment of MD for ICP	Nov 2019: Did not appoint, approach being revisited Aug 2019: Job Description agreed	
Gareth Kenworthy	01/06/2020	The Oxfordshire system has identified a set of priority projects. SROs for each project are to work up these projects for implementation.	Projects identified and assigned an SRO	
Gareth Kenworthy	01/06/2020	Budget holders to meet with DoF to review status of projects/proposals and agreed actions including review of discretionary spend.	Budget holders have commenced work in preparation	
Mr Jonathan Horbury	31/03/2020	Development of agreed transition to ICP model.	Dec 2019: Agreed approach to principles which are currently being refined. Priority Transformation Programme agreed. Aug 2019: ISDB to consider Sept 2019	

819 There is a risk that organisational change to the CCG may impact on the organisation's ability to continue to deliver the business/statutory duties
 AF33

	Initial	Current	Target
Likelihood	LIKELY	LIKELY	POSS
Consequence	MOD	MOD	MOD
Overall rating	12	12	9

Summary of Current Mitigation

Agreed Joint Bucks and Oxford Director team. Reviewing approaches to manage priorities and workload. Continued support offer and communication with staff to address concerns.

Controls

Jan 2020 : Directors review and agree all vacancies
 2019 : Senior Management Team established to keep oversight on priority projects
 2019 : Agreed single Director Team and 'do once' approach
 2019 : Joint workshops/development support put in place for staff

Assurance

2019: Minutes of SMT (Verto) show projects are on track
 2019: Staff Survey comments indicated increased workload

Gaps in Controls

2019 : Agreed work plans for all teams with agreed resource requirements
 Jan 2020 : Alignment of priorities/processes across Bucks CCG and OCCG

Gaps in Assurance

none

Action Assigned to:	Due:	Action Description:	Progress to Date:	Completed Date:
Catherine Mountford	31/03/2020	Proposed development of single Director team for BOB	Jan 2020: Recommendation to Board to commence recruitment	
Catherine Mountford	31/01/2020	All Directors to establish clear priorities and work plans for Directorates and teams	Jan 2020: Work plans proposed Aug 2019: Template agreed	
Catherine Mountford	31/01/2020	Review of Functions/approaches across 2 CCGs to determine how these could be delivered more effectively	Jan 2020: Sharing of appointments, developing IG, Planned Care IG Oct 2019: Joint on-call rota implemented	

820 There is a risk that failure to comply with national targets will result in poor patient experience.

AF34

	Initial	Current	Target
Likelihood	POSS	POSS	UNLIKE
Consequence	MAJOR	MAJOR	MAJOR
Overall rating	12	12	8

Summary of Current Mitigation

The CCG is working with providers to mitigate the quality impact of non-delivery and develop harm minimization. The CCG is working towards a harm minimization process.

Controls

- Aug 2019 : Finance Committee review monthly reports
- Aug 2019 : Executive Committee review of integrated performance report and finance report - covers known issues and emerging risks
- Aug 2019 : A&E Delivery Board and urgent care working group
- Aug 2019 : ISDB overseeing system
- 07/01/2020 - Systems and processes are in place in provider organisations to assure patient safety
- 07/01/2020 - Duty of Candour requirement on all provider organisations
- 07/01/2020 - National quality targets are included in all NHS contracts
- 07/01/2020 - Contract and Quality Review Meetings provide a regular opportunity to review performance and challenges for providers, along with the impact this is having on patient care
- 16/01/2020 - Oxford University Hospitals has a process to escalate pressures on ED
- 16/01/2020 - A harm review process is in place for patients waiting in excess of 52-weeks, with risk stratification to identify serious incidents
- 16/01/2020 - All cancer patients waiting over 104 days are reviewed for harm
- 16/01/2020 - Oxfordshire CCG and Oxford Health are developing a process to review potential harm from long waits.
- 16/01/2020 - Oxford Health triages each referral and has been asked to review long waiters to ensure their clinical condition is not becoming more acute while waiting

Assurance

- 07/01/2020 - Benchmarking data on areas of challenged performance such as CAMHs and urgent care show we are performing well or well within peers respectively
- 07/01/2020 - Minimal 12 hour trolley waits in 19/20
- 07/01/2020 - SCAS targets not met but nationally a very high performer
- 07/01/2020 - A paper is being taken to Quality Committee regarding the processes in place to ensure patient safety in high-risk/high-volume areas
- 07/01/2020 - Out of 69 practices, only 3 are rated "Requires Improvement", 62 are rated "Good" and 4 are rated "Outstanding"
- 07/01/2020 - Oxford University Hospitals are rated as "Requires Improvement" overall as well as for Urgent Care and Gynaecology services
- 07/01/2020 - National data is released demonstrating compliance against national targets and key quality measures
- 07/01/2020 - Healthcare intelligence software and the commissioning support unit can support investigation of the causes and effects of failing to meet national targets
- 08/01/2020 - Paper sent to Quality Committee, outlines additional monitoring being developed as a result of services being unable to meet waiting times pledges
- 16/01/2020 - Oxford University Hospitals has only had 2 x 12-hour trolley breaches in 2018/19
- 16/01/2020 - Patient safety incidents at Oxford University Hospitals are reported on the risk management system and overseen by the CCG at Clinical Governance Committee
- 16/01/2020 - The 52-week review process has identified 21 cases of moderate or major harm in planned care

Gaps in Assurance

- 07/01/2020 - the CCG is reliant on information provided by other organisations (e.g. providers) and service users approaching the CCG directly with concerns

Action Assigned to:	Due:	Action Description:	Progress to Date:	Completed Date:
Sula Wiltshire	30/06/2020	OCCG is meeting with OUHFT to participate in reviews of patient harm caused by long waits for cancer treatment	Meetings are currently ongoing with OUHFT	
Sula Wiltshire	31/03/2020	OCCG is working with OHFT to agree a process to monitor harm to patients in Adult Mental Health and CAMHS caused by long waits.	OCCG collaborating with OHFT	

Other (specify in description), Helen Ward

Priorities affected: PRI1: Operational delivery
 PRI2: Transforming health and care
 PRI3: Devolution and integration

PRI4: Empowering patients
 PRI5: Engaging communities
 PRI6: System leadership

Identified on: 21/04/2020

Target closure: 29/05/2020

821 There is a risk that the impact of COVID-19 may affect the ability of the Oxfordshire healthcare system to deliver safe & effective patient care - this may lead to patient harm.
 AF35

	Initial	Current	Target
Likelihood	LIKELY	LIKELY	RARE
Consequence	MAJOR	MAJOR	MAJOR
Overall rating	16	16	4

Summary of Current Mitigation

Individual issues and mitigations are listed in the attached spreadsheet.

Controls

Please refer to attached spreadsheet for details

Gaps in Controls

Please refer to attached spreadsheet for details

Assurance

Please refer to attached spreadsheet for details

Gaps in Assurance

Please refer to attached spreadsheet for details