

OXFORDSHIRE CLINICAL COMMISSIONING GROUP BOARD

Date of Meeting: 25 July 2019	Paper No: 19/47
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Title of Paper: Oxfordshire CCG Risk Register
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Paper is for: <small>(please delete tick as appropriate)</small>	Discussion <input checked="" type="checkbox"/>	Decision <input type="checkbox"/>	Information <input checked="" type="checkbox"/>
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Conflicts of Interest <small>(please delete tick as appropriate)</small>	
This is the proposed new Strategic Risk Register for OCCG, which identifies any risks, threats and opportunities across all business activities in the CCG.	
No conflict identified	<input checked="" type="checkbox"/>
Conflict noted: conflicted party can participate in discussion and decision	
Conflict noted, conflicted party can participate in discussion but not decision	
Conflict noted, conflicted party can remain but not participate in discussion	
Conflicted party is excluded from discussion	

Purpose and Executive Summary: This paper provides an overview of a proposed refresh of the Strategic Risk Register.

Engagement: clinical, stakeholder and public/patient: OCCG engages with Board and its sub-committees as well as with all OCCG Directors via the bi-monthly 'Directors Risk Review meeting' to discuss its risks.

Financial Implications of Paper: Risk Registers identify risks; threats and opportunities and the steps proposed to mitigate these risks. This process enables risks to be identified, evaluated, analysed and reported across the CCG.
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Action Required: The Board is asked to review the proposed refresh of the Strategic Risk Register.
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OCCG Priorities Supported <small>(please delete tick as appropriate)</small>	
<input checked="" type="checkbox"/>	Operational Delivery
<input checked="" type="checkbox"/>	Transforming Health and Care

✓	Devolution and Integration
✓	Empowering Patients
✓	Engaging Communities
✓	System Leadership

Equality Analysis Outcome: The risk management process enables equality and diversity related risks to be identified, evaluated, analysed and reported across the CCG.

Link to Risk:

This paper is the Oxfordshire CCG Risk Register.

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Executive Summary of the Risk Register

This paper shares the summary of the proposed refresh of the OCCG Strategic Risk Register.

OCCG Risk Grading Matrix

OCCG Risk Grading Matrix has been adapted from the NPSA risk grading matrix, see below:

Consequence	Likelihood				
	1	2	3	4	5
	Rare	Unlikely	Possible	Likely	Almost certain
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

Key to calculating risk ratings		
Colour Code	Risk score	Risk Rating
	1 – 4	Low risk
	5 – 11	Moderate risk
	12 – 19	High risk
	20 – 25	Extreme risk

Review of the Risk Register since last OCCG Board meeting in May 2019

Since the last Board meeting on 23 May 2019 the OCCG Strategic Risk Register and risk management processes were discussed by Directors on 3 July 2019. A refresh of the Strategic Risk Register is proposed.

Current Strategic Risks

Risk	Title	Risk Score
Strategic Risks :		
AF19	Demand and Performance Challenge	20
AF26	Delivery of Primary Care Services	16
AF22	Quality	15
AF25	Achievement of Business Rules	12
AF27	System Sustainability	8

Proposed New Strategic Risk Register for Consideration by Board:

System Strategic Risks

1. System Working – Jo Cogswell

Risk Description: There is a risk that if the system does not work effectively together the requirements of the Long Term Plan will not be delivered. The implications of this would be that the CCG may not be able to effectively assure the delivery of services that will meet population need and that the funding we are able to attract is limited.

Current Risk Score: Likelihood 3, Consequence 4 = 12 (High Risk/Amber)

Target Risk Score: Likelihood 2, Consequence 4 = 8 (Moderate Risk/Yellow)

System management through ISDB and the Integrated Care Partnership.

2. Use of Resources – Catherine Mountford

Risk Description: There is a risk that Oxfordshire will not deliver comprehensive services if resources (money and people) are not used optimally leading to poorer health outcomes.

Current Risk Score: Likelihood 4, Consequence 4 = 16 (High Risk/Amber)

Target Risk Score: Likelihood 3, Consequence 4 = 12 (High Risk/Amber)

System management through ISDB/ICP (and use of Distributing the Oxfordshire Pound/System Delivery Group)

3. Delivery – Gareth Kenworthy and Diane Hedges

Risk Description: Non-compliance with business rules or national targets as a result of lack of resources – workforce or financial (there is a knock on impact on capacity to deliver as failure brings regulatory scrutiny and action)

Current Risk Score: Likelihood 3, Consequence 3 = 9 (Moderate Risk/Yellow)

Target Risk Score: Likelihood 2, Consequence 3 = 6 (Moderate Risk/Yellow)

System management through ISDB/ICP (and use of Distributing the Oxfordshire Pound/ System Delivery Group)

4. Workforce- Sula Wiltshire

Risk Description: There is a risk that workforce constraints may impact on the ability of providers to deliver, leading to sub-optimal care or direct patient harm.

Current Risk Score: Likelihood 4, Consequence 4 = 16 (High Risk/Amber)

Target Risk Score: Likelihood 2, Consequence 4 = 8 (Moderate Risk/Yellow)

System management through Local Workforce Action Board (LWAB), with greater drive from stakeholders.

5. Digital – Gareth Kenworthy

There are two main components to digital risk and the Board may consider them to be separate risks.

Risk Description (part 1): There is a risk that we do not implement digital solutions that provide a single, shared care record for Oxfordshire in a effective and timely manner. These solutions provide access to the relevant complete record of a patient at point of care delivery and the functionality to enable population health management. The consequence of this is that the transformational benefits of delivering integrated person and population centred care are not realised to their potential.

Risk Description (part 2): There is a risk that sub-optimal local cyber security arrangements leave organisations susceptible to cyber-attack. This can result in loss of data, ransom, denial of service and business continuity impacts. The consequences of this are multiple but can include financial (fines and ransom), operational (loss of service and subsequent impact on patients), reputational and regulatory. This risk encompasses the CCGs responsibilities in the provision of IT support services to GP primary care.

Current Risk Score: Likelihood 4, Consequence 4 = 16 (High Risk/Amber)

Target Risk Score: Likelihood 2, Consequence 4 = 8 (Moderate Risk/Yellow)

System management through Oxfordshire Digital Steering Group and to ISDB.

6. Delivery of National Agenda – Diane Hedges

Risk Description: In order to deliver the national agenda and performance standards – the CCG will need to remain focused on delivery while also going through potential organisational change that affects individual staff members and movements in staff across organisations

Current Risk Score: Likelihood 3, Consequence 3 = 9 (Moderate Risk/Yellow)

Target Risk Score: Likelihood 2, Consequence 3 = 6 (Moderate Risk/Yellow)

System management through ISDB and its subgroups on planned care and urgent care (AEDB) - System Exec Group will be key in overseeing staffing welfare during transition

OCCG Strategic Risks

1. CCG Organisational Change – Catherine Mountford

Risk Description: 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

Current Risk Score: Likelihood 4, Consequence 3 = 12 (High Risk/Amber)

Target Risk Score: Likelihood 3, Impact 3 = 9 (Moderate Risk/Yellow)

Issues: These should be part of the Integrated Performance Report

- A+E performance including DTOC
- RTT/52 Weeks
- Cancer
- Mental Health/CAMHS
- Political Backdrop