

## Oxfordshire Primary Care Commissioning Committee Meeting

<b>Date of Meeting:</b> 4 June 2019	<b>Paper No:</b> 12
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<b>Title of Paper:</b> OCCG Primary Care Risk Register
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<b>Paper is for:</b> <small>(please delete tick as appropriate)</small>	<b>Discussion</b> ✓	<b>Decision</b>	<b>Information</b> ✓
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**Purpose and Executive Summary:**  
To share with the Oxfordshire Primary Care Commissioning Committee (OPCCC) the OCCG Primary Care Risk Register.

**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.

**Action Required:**  
The Oxfordshire Primary Care Commissioning Committee (OPCCC) is requested to review and note updates to risks since its last meeting where risks were discussed on 5 March 2019.

There are three risks in the Primary Care Risk Register. There are no Extreme/Red risks.

The OPCCC risk register does not present the risks in order of severity. Also the risk rating box has codes rather than the Likelihood and Consequence (for example Likelihood 2 means Unlikely – kindly refer to Risk Grading matrix in the Front sheet).

<b>OCCG Priorities Supported</b> <small>(please delete tick as appropriate)</small>	
✓	Operational Delivery
✓	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 OCCG risk register.

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**Date of Paper:** 28 May 2019

## Risk Register

This committee reviews the OCCG Primary Care Risk Register.

### OCCG Risk Grading Matrix

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

	Likelihood				
Consequence	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

For grading risk, the scores obtained from the risk matrix are assigned grades as follows:

	1 – 4	Low risk
	5 – 11	Moderate risk
	12 – 19	High risk
	20 – 25	Extreme risk

### Last review of OCCG Risk Registers

The OCCG Risk Registers including Primary Care risks were last reviewed by:

- OCCG Board on 23 May 2019
- OCCG Directors reviewed the full risk registers and their summaries for both Strategic and Operational Risks on 1 May 2019

### Primary Care Risk Register

Risk	Title	Risk Rating
AF26	Delivery of Primary Care Services (Strategic Risk)	16
789	Primary Care Estates (Operational Risk)	16
799	Workforce in Primary Care (Operational Risk)	12

**Strategic Risk AF26 – Delivery of Primary Care Services:** the risk rating has remained as 16 with a Likelihood of ‘Likely’ and a Consequence as ‘Major’.

- **Risk Description:** *There is a risk that in some areas the sustainability of primary care is challenged and this will adversely impact on the delivery of primary, secondary and wider health system services which will impact on the care received by patients.*
- **The summary of current mitigation has changed from:**

Primary care continues to transform to deliver the increased demand in contacts of around 4% per annum and to proactively support rising demographic needs from long term conditions and frailty. Solutions to address workload (GP access hubs, triage, home visiting nurses, care navigators, social prescribing), workforce (development of a primary care workforce strategy, skill mix, retention scheme and GP fellows) and infrastructure (mergers, working at scale and estate) are in place. Focus is now on maturing the 17 Oxfordshire Primary Care Networks so that they are in a position to deliver the long term plan. Following the recruitment of a new partner, the West practice that gave notice on its contract in July 18, has now been assessed as being in a position to provide a sustainable solution for its patients. An innovative solution for Banbury has now been found with the aim of implementation during winter 2018. Primary Care continues to work to ensure it provides whole system support with a focus on reducing urgent care demand

To:

The Long Term Plan and GP contract reform see more funding for primary and community care. Work progresses to ensure Primary Care Network areas provide 100% population coverage across Oxfordshire with delivery of extended hours at network level by 1 July 2019. Primary care continues to transform to deliver the increased demand in contacts of around 4% per annum and to proactively support rising demographic needs from long term conditions and frailty. Solutions to address workload (GP access hubs, triage, home visiting nurses, care navigators, social prescribing), workforce (development of a primary care workforce strategy, skill mix, retention scheme, international recruitment of GPs and GP fellows) and infrastructure (mergers, working at scale and estate) are in place. focus in now on maturing the 19 Oxfordshire Primary Care Networks so that they are in a position to lead on the integration of community and primary care and deliver the Long Term Plan. A Primary Care Estates Strategy is being developed at STP level. An innovative solution for Banbury has now been found with the first implemented in May 2019. Primary Care continues to work to ensure it provides whole system support with a focus on reducing urgent care demand and GP referrals.

**Operational Risk 789 Primary Care Estates:** the risk rating has reduced from 20 with a Likelihood of 'Almost Certain' with Consequence as 'Major' to a risk rating of 16 with a Likelihood of 'Likely' and a Consequence of 'Major'. This is due to the fact that the Estates Development Manager (OCCG joint post with Buckinghamshire CCG) has some expertise and has commenced this role.

- **Risk description:** *There is a risk that the Primary Care estate will not be fit for purpose and there will be insufficient funding to address this.*
- **Summary of current mitigation has changed from:**  
Locality place based plans have identified concerns for primary care estates. A tactical delivery plan has been prepared and work is ongoing to identify priorities and timelines. There are specific issues around Wantage, Kidlington, Bicester, Upper Heyford, Didcot, Abingdon and Oxford City. Links have been made with the One Public Estate agenda. A bid for STP capital has been submitted for Didcot. An option development workshop has been held in Bicester with health providers. Recruitment has taken place to appoint an Estates Development Manager working across Oxfordshire and Buckinghamshire CCGs.

To:

Population growth, 6 facet survey and expiring leases have been identified as concerns for primary care estates. A tactical delivery plan has been prepared with various projects to progress estates solutions for Wantage, Kidlington, Bicester, Upper Heyford, Didcot, Abingdon and Oxford City. Links have been made with the One Public Estate agenda. An Estates Development Manager working across Oxfordshire and Buckinghamshire CCGs is now in place. Work continues across the STP to deliver a primary care estates review and consideration is being given to the implications of PCNs.

**Operational Risk 799 Workforce in Primary Care:** the risk rating has remained at 12 with a Likelihood of 'Possible' and a Consequence as 'Moderate'.

**Risk description:** *There is a risk that a lack of Primary Care workforce will affect the sustainability of Primary Care and affect services to patients.*

- **Summary of current mitigation has changed from:**

Primary care workforce strategy is currently in final draft. It addresses how we will close the gap in primary care workforce that is predicted over the next 10 years (as identified in the Locality plans and due to current and expected vacancies and population growth). NHS England funding has been secured for the newly announced GP retention scheme with NHSE currently recruiting a project manager to manage this fund across BOB.

To:

GP contract reform will bring funding to Primary Care Networks for additional workforce over the next five years. Primary care workforce strategy has been the subject of a deep dive at an OPCCC workshop. It addresses how we will close the gap in primary care workforce that is predicted over the next 10 years (as identified in the locality plans and due to current and expected vacancies and population growth). STP funding is available for workforce training development, retention and resilience

**There are no new risks and no risks have been closed.**

**789** There is a risk that the Primary Care estate will not be fit for purpose and there will be insufficient funding to address this.

	<b>Initial</b>	<b>Current</b>	<b>Target</b>
<b>Likelihood</b>	LIKELY	LIKELY	UNLIKE
<b>Consequence</b>	MAJOR	MAJOR	MAJOR
<b>Overall rating</b>	16	16	8

**Summary of Current Mitigation**

**Population growth, 6 facet survey and expiring leases have identified been identified as concerns for primary care estates. A tactical delivery plan has been prepared with various projects to progress estates solutions for Wantage, Kidlington, Bicester, Upper Heyford, Didcot, Abingdon and Oxford City. Links have been made with the One Public Estate agenda. An Estates Development Manager working across Oxfordshire and Buckinghamshire CCGs is now in place. Work continues across the STP to deliver a primary care estates review and consideration is being given to the implications of PCNs.**

**Controls**

- Apr 17: CCG undertaking rent reviews due from 1 April 17.
- Apr 17: 6 Facet survey
- Oct 17: Estates advisor in place
- Jan 18: Locality Place Based Plans
- MArch 18: Bicester Site Search
- July 18: Bicster options appraisal - short list
- June 18: Didcot Health hub bid for STP estates funding
- Oct 18: Oxfordshire primary care estates priorities included as part of the STP Strategic Estates Workbook
- Jan 19: Primary Care estates review at STP level being undertaken
- Mar 19: System wide estates group established

**Assurance**

- Jul 17: Capital financing options presented to Finance Committee
- Dec 17: ETTF slippage identified for a practice in the South West Locality
- Feb 18: PID for the relocation of a practice in the North Locality agreed by NHS England
- Apr 18: Links with One Public Estate made
- Jan 19: Joint appointment made by Oxfordshire and Buckinghamshire CCGs for an Estates Development Manager
- May 19: Bid for ETTF slippage made through STP
- May 19: Bid for ETTF slippage made through STP

**Gaps in Controls**

- July 18: Lack of framework on which to make minor improvement grant agreements
- Jan 19; Capital pipeline not identified

**Gaps in Assurance**

- Apr 17: 6 Facet survey identified gaps in building suitability
- Jul 18: Lack of Estates Plan
- Mar 19: lack of pipeline funding

Action Assigned to:	Due:	Action Description:	Progress to Date:	Completed Date:
Ms Julie Dandridge	31/10/2022	Improve estates capacity for Bicester given population growth	May 19: Patient engagement event April 19: PID to Finance Committee	
Ms Julie Dandridge	23/12/2019	New capacity and building is required within Didcot to provide primary care services to the expected population growth.	April 19: Options appraisal undertaken for site solutions Jan 19: Didcot STP bid not successful but funding received for OPE project in Didcot Oct 18: Meeting held with practices, Oxford Health and Federation to scope innovative solutions for population growth July 18: Bid submitted. Await result expected Nov 18 June 18: Planning to submit bid for capital to have 4 of STP bid. Apr 18: Revised matters application under way for submission in July. Feb 17: Options appraisal for estates completed Dec 17: Bidder engagement event held. Next steps to be planned. Oct 17: Public Interest Notice issued.	

*Primary Care Estate*

Ms Julie Dandridge	30/06/2019	The practices in Wantage are at capacity in terms of space and will need more capacity to absorb the housing growth anticipated for the area.	<p>May 19: Awaiting feedback from landlords</p> <p>Jan 19: Plans under review following District Valuer comments</p> <p>Oct 18: Plans submitted to District Valuer for comment</p> <p>June 18: Plans presented. Awaiting updated business case.</p> <p>Apr 18: Outline specification provided. Architect design in progress.</p> <p>Jan 18: Meeting held - outline specification with agreement from all parties to be produced.</p> <p>Oct 17: Meeting to be arranged with OH/OCCG/Assura.</p> <p>June 17: Space utilisation now undertaken in both OH space and practice space. There is some space for short term solutions but this will last for a maximum of 18 months</p>
Hannah Scarisbrick-Rowe	19/04/2019	Develop a strategic estates plan	<p>May 19: review to be undertaken to consider PCN implications for networks</p> <p>Jan 19: First draft of BOB Primary care estates review presented to STP estates group</p> <p>August 18: Oxfordshire Primary care submitted as part of the STP Strategic Estates Workbook</p> <p>June 18: Draft estates framework presented to Oxfordshire Primary Care Commissioning Committee.</p>
Ms Julie Dandridge	05/03/2019	Heyford Park Redevelopment will see approximately 5 - 6,000 new people who will need primary care services. Need to explore how provision can be provided.	<p>May 19: Consideration as part of Bicester redevelopment</p> <p>Jan 19: Offer of space received from developer</p> <p>Sept 18: One Bicester practice has extended its boundary to include Upper Heyford</p> <p>June 18: Paper to OPCCOG</p> <p>Oct 17: Meeting with developer, District Council and Neighbourhood Plan Group agreed to further explore provision of a branch surgery.</p> <p>Dec 17: Letter sent to all relevant practices asking for expressions of interest.</p>

**794** There is a risk that in some areas the sustainability of primary care is challenged and this will adversely impact on the delivery of primary, secondary and wider health system services which will impact on the care received by patients.  
**AF26**

	Initial	Current	Target
Likelihood	ACERT	LIKELY	UNLIKE
Consequence	MAJOR	MAJOR	MAJOR
Overall rating	20	16	8

**Summary of Current Mitigation**

**The Long Term Plan and GP contract reform see more funding for primary and community care. Work progresses to ensure that Primary Care Network areas provide 100% population coverage across Oxfordshire with delivery of extended hours at Network level by 1 July 2019. Primary care continues to transform to deliver the increased demand in contacts of around 4% per annum and to proactively support rising demographic needs from long term conditions and frailty. Solutions to address workload (GP access hubs, triage, home visiting nurses, care navigators, social prescribing), workforce (development of a primary care workforce strategy, skill mix, retention scheme, international recruitment of GPs and GP fellows) and infrastructure (mergers, working at scale and estate) are in place. Focus is now on maturing the 19 Oxfordshire Primary Care Networks so that they are in a position to lead on the integration of community and primary care and deliver the Long Term Plan. A Primary Care Estates Strategy is being developed at STP level.**

**An innovative solution for Banbury has now been found with the first step implemented in May 19. Primary Care continues to work to ensure it provides whole system support with a focus on reducing urgent care demand and GP referrals.**

**Controls**

- Apr 16: Oxfordshire Primary Care Commissioning Committee
- Apr 17: GP Access Fund rolled out across county providing more appointments
- May 17: Primary Care Framework agreed
- Oct 17: Implementaiton of the National Urgent Repeat Medicines Supply Scheme
- Jan 18: Engagement events held in each locality during November 2017
- Feb 18: First Version of Locality Place Based Plans Published
- Sept 18: Involvement of patients working with CCG to find solutions for practice in West Locality
- Jan 19: Solution found for West Locality practice
- May 19: Interantional GP to commence in June 19 with others in pipeline

**Assurance**

- Aug 18: GP Access Survey better than national average
- Jul 17: QOF achievement for 16/17 better than national average (awaiting 17/18)
- June 18: Approval of new entity in Banbury
- Oct 17: Continued work with vulnerable practices and where offering greatest impact
- Feb 18: GPs per head of population greater than the national average
- June 18: All practices bar one rated good or above by CQC.
- June 18: Solution for termination of one City plan found and implemented.
- July 18: Working at scale event held 12 July 2018.
- Dec18: Draft Primary Care workforce plan prepared for sign off
- Feb 19: GP contract reform brings new money to primary care
- Feb 19: Plan agreed to help support PCNs preparedness
- Feb 19: Plan in place to support PCN preparedness for 1 July 2019
- May 19 : process in place to approve Network areas
- May 19: 19 Network areas submitted for approval



**Gaps in Controls**

Oct 17: Sufficient resources aligned to ambition  
 Dec 18: Further information required on primary care components of the long Term plan  
 May 19: PCNs not yet signed up to Network DES

**Gaps in Assurance**

January 18: A prioritised Estates Plan  
 Jan 19: Practices not yet signed up to Network contract

Action Assigned to:	Due:	Action Description:	Progress to Date:	Completed Date:
Ms Julie Dandridge	31/03/2021	One of the key functions of PCNs will be to lead on the integration of primary and community services	May 19: Cross system workshop planned for June April 19: New action	
Hannah Scarisbrick-Rowe	01/08/2019	One City practice has provided notice on its contract	May 19: New provider identified Feb 19: new action	
Ms Julie Dandridge	15/07/2019	Develop a Prioritised primary care estates plan and strategy	See Operational risk 789 Primary Care Estate	
Ms Julie Dandridge	12/04/2019	Solution for end of a North Locality practice APMS Contract.	Feb 19: Contractual changes expected April 19 Dec 18: Awaiting implementation of plan for lease Oct 18: New contract awarded whilst solution for for primary care in Banbury is implemented July 18: Working to implement Nov 18. June 18: Decision made for contract award. Apr 18: Procurement process in progress Feb 18: Review next steps following Prior Information Notice (PIN) Jan 18: Working up solution with PML, OH and OUH for Darzi appointments	
Ms Julie Dandridge	31/03/2019	Primary Care Networks - identify and improve their maturity	May 19; CCG approval process agreed and in place May 19: 19 PCN areas submitted to CCG for 15 May 19 deadline April 19: Joint LMC/CCG workshop held Feb 19: Workshops planned to support primary care network meeting May deadline for sign up Dec 18: All practices now part of a primary care network	
Hannah Scarisbrick-Rowe	24/12/2018	Development of a Workforce Plan to improve the sustainability of Primary Care.	Jan 18: see risk 799	
Hannah Scarisbrick-Rowe	17/12/2018	To work across BOB footprint to introduce international GPs to the workforce under the NHS England scheme.	May 19: Practice identified and GP recruited to start in June 19 Dec 18: NHSE appointing a project manager Aug 18: Work continuing across BOB footprint. Apr 18: Bid successful. Start date of October 2018 with first GPs employed from April 2019. Feb 18: Still awaiting outcome from bid Dec 17: Bid submitted	
Ms Julie Dandridge	31/08/2018	Implementation of first steps of locality plan	Jan 19: Review and update of locality plans taking place Oct 18: Most schemes now delivering. Recruitment of care navigators for Social Prescribing bid underway July 18: Social Prescribing bid for NE, N&W localities successful. Implementation roll out planned for Oct 18. June 18: 12 schemes from plans implemented in full; 2 schemes awaiting outcome of social prescribing bid. Apr 18: Specifications developed and awaiting sign off Feb 18: Project charters updated to reflect impact on non-elected admissions Jan 18: Project charters being developed for each of the workstreams to be presented to Clinical and Management Forum.	24/05/2019

**799** There is a risk that a lack of Primary Care workforce will affect the sustainability of Primary Care and affect services to patients.

	<b>Initial</b>	<b>Current</b>	<b>Target</b>
<b>Likelihood</b>	LIKELY	POSS	UNLIKE
<b>Consequence</b>	MOD	MOD	MOD
<b>Overall rating</b>	12	9	6

**Summary of Current Mitigation**

**GP contract reform will bring funding to Primary Care Networks for additional workforce over the next 5 years. Primary care workforce strategy has been the subject of a deep dive at an OPCCC workshop. It addresses how we will close the gap in primary care workforce that is predicted over the next 10 years (as identified in the Locality plans and due to current and expected vacancies and population growth). STP funding is available for workforce training development, retention and resilience**

**Controls**

- Mar 17: Primary Care Framework agreed which addresses workforce
- May 17: Locality lead practice nurse in place for the CCG
- Sept 17: Initial workforce data collected from practices
- May 18: BOB STP primary care workforce submission
- Jan 19: GP retention funding from NHS E
- Feb 19: GP contract reform announces funding for additional workforce at PCN level

**Assurance**

- Oct 17: OCCG website advertises Oxfordshire as a good place to work.
- Feb 19: GP contract reform identifies funding for additional workforce for networks
- Jan 19: Primary care workforce plan subject to deep dive as part of OPCCC workshop
- May 19: Workforce strategy to provide direction

**Gaps in Controls**

May 18: 21 GP vacancies identified. 84.5 additional GPs needed in 10 years due to housing growth if nothing changes.

**Gaps in Assurance**

- May 19 : Unclear implications of additional roles as part of Network DES
- May 19: Lack of Network plan

Action Assigned to:	Due:	Action Description:	Progress to Date:	Completed Date:
Hannah Scarisbrick-Rowe	31/03/2020	Implications of additional roles reimbursement	May 19: New action	
Ms Julie Dandridge	31/12/2018	GP Workforce Plan to integrate with other Primary Care Workforce Plan	Mar 19 : Plan supported by OPCCC Feb 19: Final plan go to OPCCC for approval Jan 18: Plan subject to a deep dive by OPCCC Oct 18: Final draft being agreed internally before taking to OPCCC for sign off. June 18: Workforce plan being developed. May 18: External support commissioned to develop plan. April 18: Working group established and additional support identified to pull together strategy. Jan 18: Workforce working group set up to take forward Dec 17: Funding identified to deliver Oct 17: Now identified as a countywide theme running through the Locality Place Based Plans	