

Agenda item: 11

Paper no: 9

Title of Report:	PCCC Risk Register Part 1 January 2020 including East Surrey CCG	
Status:	TO NOTE & FOR DECISION	
Committee:	PCCC Part 1 CIC	Date: 13/03/2020
Venue:	NW Surrey CCG offices	

Presented by:	Helen Snelling, Head of Primary Care Contracting, Surrey Heartlands CCGs	
Executive Lead sign off:	Rachael Graham, Deputy Director of Contracts Non Acute and Primary Care, Surrey Heartlands CCGs	Date: 05/03/2020
Author(s):	G Langlois-Pearson, Primary Care Contracts Manager, Surrey Heartlands CCGs	

Governance

Conflict of Interest: The Author considers:	None identified	✓
Previous Reporting: (relevant committees/ forums this paper has previously been presented to)	Committee name: PCOG Meeting date: 28/02/2020 Outcome: report noted	
Freedom of Information: The Author considers:	Open – no exemption applies	✓

Executive Summary

To note:
<ul style="list-style-type: none"> • Current risks for Part 1 Committees in Common PCCC meeting including East Surrey (manual) • Risk Register report (appendix) for additional information

Working together across Surrey Heartlands

East Surrey CCG | Guildford and Waverley CCG | North West Surrey CCG | Surrey Downs CCG

Implications

What is the health impact/ outcome and is this in line with the CCGs' strategic objectives ?	<ul style="list-style-type: none"> • Continue to work towards achieving sustainable systems. • Develop collaborative working • Support Primary Care Development in line with the NHS Long Term Plan. • Safe, effective care providing the best possible health and care outcomes and patient experience.
What is the financial/ resource required?	N/A
What legislation, policy or other guidance is relevant?	NHSE directive/CCG Governance/policy
Is an Equality Analysis required?	N/A
Any Patient and Public Engagement/ consultation required?	N/A
Potential risk(s) ? (including reputational)	Refer to Risk Register Summary and Risk Register excel spreadsheet for additional information

Recommendation(s)

<p>To note:</p> <ul style="list-style-type: none"> • Risk Register Summary outlining current risks for Part 1 Committees in Common PCCC meeting. • Risk Register reports (appendix) for additional information <p>Decision:</p> <ul style="list-style-type: none"> • Risk #61 – proposed to close
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Next Steps

<p>Primary Care teams to continue reviewing and reporting Surrey Heartlands CCGs Primary Care Risk Register for PCCC. Monthly reviews to be completed by the handler and risk owners.</p>

Primary Care Commissioning Committee
Risk Register Summary

Part 1

PCOG February 2020 / PCCC March 2020

Executive Summary:

This summary is part of an overall review of all Primary Care risks, ensuring that they are captured accurately on DATIX including identifying all appropriate owners and handlers for each Primary Care risk within Surrey Heartlands CCGs.

It has been adopted that the Primary Care Risk Register is prepared and presented to the Primary Care Operation Group (PCOG) prior to being presented to PCCC for assurance and approval.

NOTE:

All owners/handlers continuing to work towards updating comprehensive content in timely manner. Where available, this summary will reflect the current position of these risks.

Currently the East Surrey CCG Risk Register is a separate spreadsheet completed manually as they are currently not set up on DATIX system. It is expected that the CCG will be cut over to DATIX with effect April 2020.

Summary of Risks to Note:

Risk # / Title	CCG	Risk Description	Actions & Comments	Current Risk Rating	Status/Recommendation to PCCC
Risk #61	Surrey Heartlands CCGs	Primary Care will not have sufficient capacity to absorb all the activity which will be repatriated from community and acute settings	Primary Care Capacity is a known issue nationally and in SH CCGs when commissioning further services or there is a known shift in workload we appropriately remunerate. Also the shift to digital platforms/workforce to support capacity is underway. Proposing to close.	9	Proposed to Close
Risk # 002 Manual	East Surrey	There is a risk that due to Practices capping their patient registration lists will put further pressure on neighbouring practices is an extra process for patients who may then not register.	19.02.20 Meetings have been held to address the capping issues. Action plans have been implemented.	16	Ongoing
Risk # 003 Manual	East Surrey	There is a risk that Primary Care will not be resilient because of various factors including estates and premises issues and population growth across the CCG. If a primary care estates plan is not in place	Process underway to review	12	Ongoing

Risk Register Summary PART 1

PCOG FEBRUARY 2020 – PCCC MARCH 2020

Working together as the Surrey Heartlands Clinical Commissioning Groups

Risk # / Title	CCG	Risk Description	Actions & Comments	Current Risk Rating	Status/Recommendation to PCCC
		then it will not be possible to access funding to maintain and develop General Practice Premises.			
Risk #4 manual	East Surrey	Following CQC visits there are four GP practices rates as requires improvement. If resultant action plans are not implemented, there is a risk to the provision of care received by patients.	Actions plans been developed by East Surrey Quality Team and continue to support practices with concerns	12	Please refer to East Surrey CQC report for details

Appendices:

Surrey Heartlands CCGs Primary Care Risk Register Part 1 PCCC March 2020 excel spreadsheet

RISK REGISTER PART 1 SURREY HEARTLANDS - PCOG FEBRUARY 2020/PCCC MARCH 2020

ID	Title	Approval status	Opened	Organisation	Owner	Handler	Description	Potential effect of the risk	Source of risk	Controls	Gaps in controls	Assurance	Gaps in assurance	Rating (initial)	Rating (current)	Rating (Target)	Risk Appetite	Actions and Comments	Director Public Comments	Last updated
61	Primary Care Capacity	Proposed for Closure	05/09/2016	Surrey Heartlands CCGs	Mallinder, Nikki	Eugene, Shelley	Primary Care will not have sufficient capacity to absorb all the activity which will be repatriated from community and acute settings	The anticipated benefits of shifting care into a primary care setting are not achieved qualitatively and quantitative	Insufficient capacity (skills, experience, opening hours) in primary care workforce to deliver revised models of care. Lack of capacity in estate to accommodate additional clinics	Robust planning process for all projects, early identification of any workforce and estates requirements for the delivery of new services in primary care	Risk must be treated - cannot be tolerated, terminated or transferred.	Projects will identify workforce and estates implications for shifting the delivery of a service from acute or community setting into primary care as part of the initial planning process and subsequently include plans to increase capacity in workforce and estates within the mobilisation plan (if necessary)	Will the additional workforce which might be required for new servicees will be available? Whether it will be possible to re-configure existing estate to accommodate new services	12	9	9	High 9-12	When services are commissioned, they will be assessed in respect of workforce and estates implications to ensure delivery of service Primary Care Capacity is a known issue nationally and in SH CCGs when commissioning further services or there is a known shift in workload we appropriately remunerate. Also the shift to digital platforms/workforce to support capacity is underway.	Primary Care Capacity is a known issue nationally and in SH CCGs when commissioning further services or there is a known shift in workload we appropriately remunerate. Also the shift to digital platforms/workforce to support capacity is underway. I am proposing closure by PCCC	Nikki Mallinder 04/03/2020 09:26:46

RISK REGISTER PART 1 - EAST SURREY CCG - PCOG February 2020 / PCCC March 2020 - MANUAL

ID	Title	Approval status	Opened	Organisation	Owner	Handler	Description	Potential effect of the risk	Source of risk	Controls	Gaps in controls	Assurance	Gaps in assurance	Rating (initial)	Rating (current)	Rating (Target)	Risk Appetite	Actions and Comments	Director Public Comments	Last updated
002	Manual		09/12/2019	East Surrey	Sara Brine	Tina Sey	There is a risk that due to Practices capping their patient registration lists will put further pressure on neighbouring practices is an extra process for patients who may then not register.	This could lead to further instability of GP Practices as a result of practices capping their lists. It also increases workload of CCG Staff to allocate patients.	Insufficient capacity in primary care to deal with the high demand of additional patients and patient dissatisfaction. Lack of Primarycare estate and workforce.	Meetings with practices to put in place plans to address list capping and come up with a system solution	Risk must be treated - cannot be tolerated, terminated or transferred.	Plans will identify workforce and estates implications, which will then need to be addressed as a priority in alignment with Local workforce and estate strategy.	Will the additional workforce which might be required for this service be available? Whether it will be possible to re-configure existing estate to accommodate this service requirement	16	16	4	Significant 15-25	19.02.20 Meetings have been held to address the capping issues. Action plans have been implemented.		20.02.20 Tina Sey
003	Manual		09/12/2019	East Surrey	Sara Brine		There is a risk that Primary Care will not be resilient because of various factors including estates and premises issues and population growth across the CCG. If a primary care estates plan is not in place then it will not be possible to access funding to maintain and develop General Practice Premises.	Destabilisation of Primary care, reduced access to primary care, reputational risk. This could lead to a deterioration in primary care estate with fewer GPs willing to become premises owning partners and making the financial commitment. This could result in patients receiving their primary care treatment from premises which may not be fit-for-purpose. If current primary care estates capacity is not increased then this could prevent any work stream aimed at bringing services from hospital to community. The current estates may not support sustainable delivery of services to meet population needs.	Lack of primary care estate/estate not fit for purpose	Developing the Surrey heartlands estates strategy and prioritising premises needs, developing local practice plans	Risk must be treated - cannot be tolerated, terminated or transferred.	Overall review of East Surrey estates being undertaken by Strategic Estates Lead. Bids for resilience from national funding pot to support primary care.	Will there be sufficient funding to address the estates requirement	12	12	6	High 9-12	Process underway to review		20.02.20 Tina Sey
004	Manual		09/12/2019	East Surrey	Sara Brine		Following CQC visits there are four GP practices rates as requires improvement. If resultant action plans are not implemented, there is a risk to the provision of care received by patients.	Impact on patient care	Medication monitoring, safety alerts, clinical audit and outcomes, staffing and infection control	Actions plans to be agreed with practice with the support of quality team	Risk must be treated - cannot be tolerated, terminated or transferred.	Working with practices to identify remedial actions	Non aware of at this stage	12	12	6	High 9-12	Actions plans been developed by quality team. 19.02.20 There has been two practice visits and action plans have been developed to address the issues		

Likelihood	Consequence				
	None	Minor	Moderate	Major	Catastrophic
Certain	5	10	15	20	25
Likely	4	8	12	16	20
Possible	3	6	9	12	15
Unlikely	2	4	6	8	10
Rare	1	2	3	4	5

Range:	Low (1-4)	High (9-12)
	Moderate (5-8)	Significant (15-25)