

<b>Report To:</b>	<b>Governing Body</b> <b>13 October 2016</b>
<b>Title of Report:</b>	<b>High Level Risk Log and Report:</b> <b>Risk Cycle 3 2016-17 25 July – 15 August 2016</b>
<b>FOI Exemption Category:</b>	<b>Open</b>
<b>Responsible Officer:</b>	<b>Matt Walsh - Chief Officer</b>
<b>CCG Leads:</b>	<b>Judith Salter - Corporate &amp; Governance Manager</b> <b><a href="mailto:judith.salter@calderdaleccg.nhs.uk">judith.salter@calderdaleccg.nhs.uk</a></b>
<b>Report Author and Job Title:</b>	<b>Rob Gibson - Risk, Health &amp; Safety Manager</b> <b><a href="mailto:robert.gibson@calderdaleccg.nhs.uk">robert.gibson@calderdaleccg.nhs.uk</a></b>
<b>Executive Summary:</b>	<p>This paper presents the high level risk report at the end of the third review cycle for 2016-17.</p> <p>All risks on the CCG Risk Register were submitted for review to either the Finance and Performance Committee (finance, performance and corporate risks) or the Quality Committee (clinical risks) on 25 August 2016.</p> <p>The Audit Committee has responsibility for overseeing the risk management process and for monitoring high level risks rated 12 or above. This review was undertaken at their meeting on 30 September 2016.</p> <p>Calderdale CCG Risk Register currently contains a total of 37 risks, including 3 risks marked for closure, leaving 34 open risks; this compares with 30 open risks at the last risk cycle. Of the CCG's 34 open risks, there is;</p> <ul style="list-style-type: none"> <li>• 1 Critical risk (scoring 20) this is the same as at the end of the last risk cycle. There are:</li> <li>• 6 Serious risks (scoring 15-16), this compares with 7 such risks at the end of the last risk cycle.</li> </ul>

<b>Finance/Resource Implications:</b>	Not applicable
<b>Risk Assessment:</b>	Risk is managed in line with the CCG's Integrated Risk Management Framework. Risks are captured on the Corporate Risk Register or the Governing Body's Assurance Framework as appropriate.
<b>Legal Implications:</b>	None identified
<b>Health Benefits:</b>	Not applicable
<b>Staffing/Workforce Implications:</b>	As identified within the content of the Risk Log
<b>Outcome of Equality Impact Assessment:</b>	Not applicable
<b>Recommendation (s):</b>	<p>It is recommended that, following recommendation from the Audit Committee meeting on 30 September 2016, the Governing Body receives:</p> <ul style="list-style-type: none"> <li>▪ Receives the Risk Report, High Level Risk Log and CCG Risk Dashboard at the end of Risk Cycle 3 of 2016-17</li> <li>▪ Updated Critical Risk Report - 709</li> </ul>
<b>Appendices</b>	<p>Appendix 1: High Level Risk Log Cycle 3 2016-17</p> <p>Appendix 2: CCG Risk Dashboard Cycle 3 2016-17</p> <p>Appendix 3: Updated Critical Risk Report - 709</p>

## 1.0 Purpose of the Report

- 1.1 To provide assurance on the process for the detailed review of the CCG's risks.
- 1.2 To set out all risks rated 15 or above (see Appendix 1).
- 1.3 To provide a summary of the CCG's current risk profile and related comparative data via the CCG Risk Dashboard Report (see Appendix 2).

## 2.0 Risk Review: Risk Cycle 3

- 2.1 Risk Cycle 3 commenced on 25 July 2016. Following updates by Risk Owners and review of individual risks by the allocated Senior Manager, the Corporate Risk Register was reviewed by the Senior Management Team on 15 August 2016.
- 2.2 All risks were submitted to either the Finance and Performance or the Quality Committees for review at their meetings on 25 August 2016.
- 2.3 Risks scoring 12 and above were reviewed by the Audit Committee at their meeting on 30 September 2016.
- 2.4 The CCG Risk Register for Risk Cycle 3 has now been archived and Risk Cycle 4 for 2016-17 has commenced.

### Risk Register Summary: Risk Cycle 3

- 2.5 At the end of Risk Cycle 3, the CCG had 37 risks on the Corporate Risk Register, including 3 risks marked for closure, leaving 34 open risks (compared with 30 open risks at the last risk cycle).
- 2.6 11 of the CCG's 34 open risks (32%) related to quality and clinical matters. The remaining 23 open risks (68%) related to finance, performance or corporate matters.

## 3.0 High Level Risks

- 3.1 There was one critical risk (scoring 20 or 25) on the CCG Risk Register during Risk Cycle 1, this is the same number as at the end of the last risk cycle.

Risk ID	Risk Summary	Risk Score
709	Risk that patients being discharged from hospital are subject to delays in their transfer of care.	20

An update on this critical risk was presented to the last meeting of the Governing Body on 11 August as part of a report on improving care for patients in relation to transfers of care. An update on this risk was provided to the Finance & Performance Committee meeting on 29 September as part of a report on the Better Care Fund. An update was also provided to Audit Committee at their meeting on 30 September (see appendix 3)

- 3.2 There are 6 open risks rated as Serious (with a score of 15 or 16) during the current risk cycle (this compares with 7 such risks at the end of the last risk cycle) these are detailed below.

Those risks where the score remains the same are carefully reviewed (i.e. a static score does not mean that the risk has not been reviewed and that mitigating actions have not changed).

Risk ID	Risk Summary	Risk Score	Risk Movement
849 (F&P)	The main acute and community contract with Calderdale and Huddersfield NHS Foundation Trust (CHFT) over-trades significantly by the end of the year due to increased levels of A&E attendances and emergency admissions and increased demand in terms of GP referrals, outpatient and diagnostic activity with the potential to convert into day case or elective inpatient activity. This could result in a detrimental effect on the CCG financial position.	16	New
829 (F&P)	The CCG fails to deliver our 16/17 planned financial surplus. The 16/17 financial plan includes a number of pressures/risks which will need mitigating to ensure delivery	16	Static for 1 risk cycle
826 (F&P)	The CCG may not have the appropriate QIPP schemes in place to ensure the system model is affordable going forward. This may result in the non-achievement of control total and/or failure to achieve QIPP targets	16	Static for 1 risk cycle
62 (F&P)	The system will not deliver the NHS Constitution 4-hour A&E target for the next quarter due to pressures associated with demand, capacity and flow, resulting in patient care and patient experience being compromised and an inability to provide NHSE with assurance on the stability and resilience of the system	16	Score static for 7 cycles
864 (Q)	There is a risk of harm for patients to increasing concerns around the assurance of the quality of maternity services, this is identified by the deteriorating position against the performance indicators and the CQC visit carried out in March 2016 which highlighted a number of issues within Maternity.	15	New
240 (F&P)	The lack of availability of Appointment Slots at Calderdale and Huddersfield Foundation Trust (CHFT) exceed the agreed 5% due to CHFT having fewer outpatient appointments available for patients to book into. This potentially results in patients being unable to access their provider of choice, poor patient experience and reputational damage to both provider and commissioner.	15	Static for 1 risk cycle

F&P – Finance, performance, corporate

Q - Quality

Risks 826 & 849 are currently under review by their respective senior manager to consider if the risk rating of the likelihood of each risk (currently 4) is appropriate at this juncture. Any changes to the risk ratings will be undertaken during risk cycle 4.

#### 4.0 Recommendations

It is recommended that, following recommendation from the Audit Committee meeting on 30 September 2016, the Governing Body receives:

- Receives the Risk Report, High Level Risk Log and CCG Risk Dashboard at the end of Risk Cycle 3 of 2016-17

- Updated Critical Risk Report - 709

## **5.0 Appendices**

Appendix 1: High Level Risk Log Risk Cycle 3 as at 15 August 2016

Appendix 2: CCG Risk Dashboard Cycle 3 2016-17

Appendix 3: Critical Risk Report 709