

Risk Register

Date	21/10/2013
Risk Status	Open
Risk Area	Kingston CCG
Sub Risk Area	2013-4

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Risk Ref	Risk Title	Cause & Effect	Inherent Risk Priority	Existing Controls	Residual Risk Priority	Action Required
651	Inability to take forward essential business due to information governance restrictions	<p>Cause & Effect: Cause: Changes in information governance arrangements associated with the Health & Social Care Act 2012</p> <p>Effect: Ability to continue with existing schemes such as Caretrak or introduce new schemes such as risk stratification, are compromised. The inability to access information compromises the ability of KCCG to robustly commission, validate and monitor health services. Currently no legal basis for KCCG to access PCD and no definitive guidance as of yet.</p>	4 5 Very High (20)	Information Governance Framework in place	4 5 Very High (20)	Complete IGT and apply to become Accredited Safe Haven (ASH) Action Owner: Jill Pearse To be implemented by: 31/10/2013
	Risk Owner: Jill Pearse					
	Last Updated: 21/10/2013					

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173	Breaches of Confidentiality and Data Protection Act (Information Governance requirements compliance) Risk Owner: Jill Pearse Last Updated: 21/10/2013	Cause & Effect: CAUSE: Organisational changes during transition New IG toolkit requirements for CCG EFFECT: Failure to demonstrate satisfactory level of IG security Loss of public confidence and fines of up to £500,000	4 3 High (12)	Completion of Information Governance Toolkit (IGT) for 2011/12. <hr/> Local Information Governance Steering Group (IGSG) <hr/> Mandatory IG Training	4 3 High (12)	Apply for accredited safe haven status Action Owner: Jill Pearse To be implemented by: 31/10/2013 <hr/> Implement IG action plan Action Owner: Jill Pearse To be implemented by: 31/10/2013 <hr/> Independent Audit of IG Toolkit - audit completed - awaiting final report from auditors Action Owner: Jill Pearse To be implemented by: 25/10/2013 <hr/> Review Registration Authority (RA) arrangements, roles and responsibilities Action Owner: Jill Pearse To be implemented by: 29/11/2013 <hr/> Complete self-assessment against requirements of IG Toolkit for CCG, ensure evidence attached, review evidence and obtain sign-off for final submission Action Owner: Jill Pearse To be implemented by: 31/10/2013

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Risk Ref	Risk Title	Cause & Effect	Inherent Risk Priority	Existing Controls	Residual Risk Priority	Action Required
314	Effectiveness of multi-agency arrangements for Safeguarding children and looked after children services	<p>Cause & Effect: Cause: - Ofsted report (July 12) and re-inspection report (June 13) rated the children's social care services as "inadequate"</p> <p>Effect: - The effectiveness of the multiagency arrangements for safeguarding children are compromised - Reputational risk due to adverse publicity</p>	5 3 Very High (15)	<p>CQC/Ofsted Report - Kingston Health Action Plan - in place and monitored monthly</p> <hr/> <p>Full time Designated Nurse post filled as from 1st April 2013</p> <hr/> <p>Quarterly reports and monthly exception reporting to IGC</p> <hr/> <p>RBK Project Manager & Action Plan in place</p> <hr/> <p>Required roles are covered: Designated Nurse for Safeguarding and LAC, Named Nurse, Named GP, Designated Doctor, Named Doctor and Looked After Children (Vacancy)</p> <hr/> <p>Safeguarding Improvement Board in place. Health action plan in place</p>	4 3 High (12)	<p>Complete Annual Report for 2012/13 (Safeguarding Children and LAC)</p> <p>Action Owner: Christine Robjohn To be implemented by: 31/10/2013</p> <hr/> <p>Complete Serious Case reviews to timescale</p> <p>Action Owner: Christine Robjohn To be implemented by: 31/03/2014</p> <hr/> <p>LAC Named Doctor arrangements to be finalised</p> <p>Action Owner: Elizabeth Brandhill To be implemented by: 29/11/2013</p>

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Risk Ref	Risk Title	Cause & Effect	Inherent Risk Priority	Existing Controls	Residual Risk Priority	Action Required
609	Failure to deliver 13/14 QIPP savings target	<p>Cause & Effect:</p> <p>CAUSE:</p> <ul style="list-style-type: none"> - Lack of readily available robust data leading to inability to monitor achievement accurately - New patient pathways do not deliver acute savings - Delayed start to the delivery of QIPP schemes impacts on ability to realise full amount of savings - Lack of robust setting of saving trajectories impacts on QIPP reporting <p>EFFECT:</p> <p>13/14 QIPP savings target not achieved</p> <ul style="list-style-type: none"> - Negative impact on CCGs ability to meet statutory financial obligations 	3 4 High (12)	<p>Robust performance measures in place to measure achievement of the QIPP schemes against set trajectories</p> <hr/> <p>Regular performance review meetings with providers to ensure any new service pathways are implemented to plan</p> <hr/> <p>Regular reporting of progress of the delivery of QIPP schemes through CCG finance Committee</p> <hr/> <p>Regular review of saving trajectories to ensure they are accurate</p>	3 4 High (12)	<p>Escalate any concerns around performance to the finance committee to agree appropriate actions (M6 review shows lower risk i.e. <£100K - committee asked to consider whether risk can be adjusted to "moderate")</p> <p>Action Owner: Neil Ferrelly - Director of Financial Planning</p> <p>To be implemented by: 31/03/2014</p>

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Risk Ref	Risk Title	Cause & Effect	Inherent Risk Priority	Existing Controls	Residual Risk Priority	Action Required
610	Support the Better Services, Better Value consultation during 2013/14 Risk Owner: David Smith - Managing Director for Kingston Last Updated: 21/10/2013	Cause & Effect: CAUSE: Failure to engage and take account of the views of partners and the public during the consultation phase of the BSBV programme EFFECT: Insufficient response to the BSBV consultations impacts negatively on the final option for service reconfiguration in Kingston	3 4 High (12)	BSBV programme team funded by commissioners to oversee consultation <hr/> Use of existing forums by the CCG to support consultation <hr/> Membership of the Joint Committee of CCGs ensuring Kingston views of the consultation are reflected in the decision making process	3 4 High (12)	Ensure material produced by BSBV Team focus on the issues impacting on Kingston Action Owner: Tonia Michaelides To be implemented by: 31/10/2013 <hr/> Agree timeline for consultation with BSBV team Action Owner: Tonia Michaelides To be implemented by: 31/10/2013

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611	Quality and Safety of services	<p>Cause & Effect: CAUSE: - Failure in SI process through transition of old regime to new - Capacity to manage SIs as host of 3 provider organisations - YHC, SWL&StG, KHT - Uncertainty around responsiveness of CCGs and SIs post-Francis Report</p> <p>EFFECT: - Risk to patient safety if SIs are not managed appropriately through transition - Capacity of CCG to process SIs only, no capacity to analyse and identify and act on trends - Uncertainty</p>	4 3 High (12)	<p>Capacity in place in the CCG to manage the SI process</p> <hr/> <p>Effective CQRGs in place to review and agree appropriate action arising from SI reporting</p> <hr/> <p>Processes to manage SI in CCGs governance functions including reporting to IGC</p>	4 3 High (12)	<p>Agree quality and safety work plan for implementing recommendations of the Francis report, Berwick report, the Winterbourne Review Group and the Keogh Review</p> <p>Action Owner: Laura Jackson To be implemented by: 22/10/2013</p>

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612	Statutory Financial obligations	<p>Cause & Effect: CAUSE: - Unclear financial risks in new commissioning regime impact on CCG finances - Adjustments made by NHS England at start of year not robust and potentially negatively impact on CCG finances</p> <p>EFFECT: CCG unable to meet statutory financial obligations</p>	3 4 High (12)	<p>Regular reports to Finance Committee on CCGs financial position</p> <hr/> <p>Reserves built into CCGs financial plans to offset risks</p> <hr/> <p>Risk share agreement in place between 6 SWL CCGs</p>	3 4 High (12)	<p>Agree year end settlement with acute providers to remove risk</p> <p>Action Owner: Neil Ferrelly - Director of Financial Planning To be implemented by: 31/12/2013</p> <hr/> <p>Specialist commissioning adjustment to be made at month 7 (adjustment made in month 6, but further adjustment due in month 7)</p> <p>Action Owner: Neil Ferrelly - Director of Financial Planning To be implemented by: 29/11/2013</p>
622	Conflicts of Interest	<p>Cause & Effect: CAUSE: Conflicts of interest (potential, perceived or actual), may arise where award of a contract is proposed to a Board or Council member or to an organisation, company or person which a Board or Council member has listed in any conflicts disclosure.</p> <p>EFFECT: Procurement decisions are open to judicial review for apparently subjective concerns.</p>	3 4 High (12)	<p>Conflicts of interest discussed at public meeting of Governing Body and at IGC</p> <hr/> <p>Kingston CCG Constitution in place covering conflicts of interest</p>	3 4 High (12)	<p>Conflict of Interests policy to be agreed and implemented</p> <p>Action Owner: Nazim Jivani To be implemented by: 30/11/2013</p> <hr/> <p>Devise and implement a transparent and speedy escalation process as part of policy</p> <p>Action Owner: Nazim Jivani To be implemented by: 30/11/2013</p>

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680	Acute Contracts Risk Owner: Neil Ferrelly - Director of Financial Planning Last Updated: 21/10/2013	Cause & Effect: CAUSE:- Acute contracts have not yet been signed due to uncertainties around specialist commissioning adjustments. There is the potential for contract plans to change when adjustments are applied EFFECT:- Contract plans may become unaffordable impacting CCG's ability to meet financial plans.	4 3 High (12)	Regular reports to Finance Committee on the Acute Contracting position. Reserves built into CCG's financial plans to offset risks	4 3 High (12)	
163	Risk of non compliance with CQC Essential Standards for Quality & Safety. Risk of future lapse in management and monitoring of Serious Incidents for of Mental Health Commissioned Services. Risk Owner: Sylvie Ford Last Updated: 07/10/2013	Cause & Effect: Cause:- Identified areas for improvement that need to be addressed following CQC final inspection report. Effect: Recurrence in concerns around evidence of Patient safety, effectiveness of care and patient satisfaction	5 3 Very High (15)	Mental Health Contract in place with key performance indicators and performance management processes and in built financial penalty clauses Performance management framework in place via contract. SI monitoring system in place and SI manager in post (up to March 31st 2014) SWL&StG CQC action plans SWL&StG Board reports - presented to CQRG on monthly basis	5 2 High (10)	To receive Action plan to implement CQC recommendations Action Owner: Sylvie Ford To be implemented by: 06/11/2013

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Risk Ref	Risk Title	Cause & Effect	Inherent Risk Priority	Existing Controls	Residual Risk Priority	Action Required
166	Risk to patient safety and Safeguarding Adults Risk Owner: David Smith Last Updated: 21/10/2013	Cause & Effect: Cause: Effective systems and procedures not fully embedded in Primary Care Effect: Adult death/serious injury occurs or ongoing significant harm.	5 3 Very High (15)	Winterbourne View Concordat - effective alert system in place <hr/> Development of Integrated Adult Safeguarding Team between CCG and RBK <hr/> Joint Health & Social Care Service Adult Safeguarding team in place <hr/> Safeguarding Adults Partnership Board in place	5 2 High (10)	Establish Multi-Agency Safeguarding Hub (MASH) Action Owner: Jill Pearse To be implemented by: 31/12/2013 <hr/> Implement LGA Peer Review Action Plan in line with identified target dates - plan being implemented - but some aspects behind schedule. Action Owner: Tonia Michaelides To be implemented by: 30/06/2014 <hr/> Recruit to Nurse Lead for Adult Safeguarding - Interviews scheduled for September Action Owner: Tonia Michaelides To be implemented by: 30/10/2013

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Risk Ref	Risk Title	Cause & Effect	Inherent Risk Priority	Existing Controls	Residual Risk Priority	Action Required
608	Over activity in acute services Risk Owner: Tonia Michaelides Last Updated: 21/10/2013	<p>Cause & Effect:</p> <p>CAUSE:</p> <ul style="list-style-type: none"> - Unpredicted activity not included in forecasting and contract plans leads to over performance of contract - Uncertainty around statutory body responsible for some elements of acute activity leads to unaccounted pressure on CCG budgets - Ability of SL CSU to respond to CCG <p>EFFECT:</p> <ul style="list-style-type: none"> - Quality of patient care is compromised - CCG cannot meet its statutory financial functions - Risk around adjustments in respect of budgets transferring to NHS England not addressed robustly and pressure placed on CCG commissioning budgets 	5 3 Very High (15)	<p>Monthly acute contract meetings</p> <hr/> <p>Monthly Clinical Quality Review Group Meetings - reviewing relationship between finance and patient safety</p> <hr/> <p>In depth Review of acute activity and finance reports at Finance committee</p>	5 2 High (10)	<p>Agree year end balances where at all possible.</p> <p>Action Owner: Neil Ferrelly - Director of Financial Planning</p> <p>To be implemented by: 31/12/2013</p> <hr/> <p>Monitor acute activity and finance through IGC agreeing action to mitigate risks as appropriate</p> <p>Action Owner: Neil Ferrelly - Director of Financial Planning</p> <p>To be implemented by: 31/03/2014</p>

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621	Fraud and Bribery	<p>Cause & Effect: Cause: Lack of procedures, processes, policies, fraud and bribery awareness training, segregation of duties.</p> <p>Effect: Fraud and bribery across Kingston CCG leading to financial and reputational loss; financial penalties and possible criminal proceedings.</p>	<p>3 3 High (9)</p>	<p>Polices in place</p> <p>Process and procedure in place</p>	<p>3 3 High (9)</p>	<p>Co-ordinate implementation of Action Plan arising from LCFS Proactive Report</p> <p>Action Owner: Tina Jones To be implemented by: 31/03/2014</p> <hr/> <p>Agree Fraud Risk Assessment Action Plan</p> <p>Action Owner: Tina Jones To be implemented by: 31/10/2013</p>

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393	South London Commissioning Support Unit (SLCSU) - issues of capacity and capability Risk Owner: Tonia Michaelides Last Updated: 21/10/2013	<p>Cause & Effect:</p> <p>CAUSE:</p> <ul style="list-style-type: none"> - SLCSU as a new organisation is unable to provide consistency and robust commissioning support to CCG _ Inability of SLCSU to provide sufficient capacity to deliver functions CCG has contracted for _ CCGs lack of control of the functions provided by SLCSU means resources not deployed sufficiently in the CCG and not aligned to the delivery of the CCGs strategic priorities <p>EFFECT:</p> <ul style="list-style-type: none"> - CCGs unable to deliver strategic priorities or statutory duties effectively. - Financial pressures as CCG need to cover gaps in SLCSU capacity and capability - Reputational issues arising from ineffectiveness of the SLCSU 	3 4 High (12)	<p>Contract in place with SLCSU with KPIs and financial penalties linked to non delivery.</p> <hr/> <p>Line of accountability with the CSU established through Accountable Director assigned to Kingston CCG.</p> <hr/> <p>Regular reporting of SLCSU performance through Kingston CCG Audit Committee</p>	2 3 Moderate (6)	<p>Review where the CCG sources its commissioning support to inform the operating model going forward</p> <p>Action Owner: Tonia Michaelides To be implemented by: 31/10/2013</p>

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571	Failure to deliver National Outcomes Framework	<p>Cause & Effect:</p> <p>CAUSE:</p> <ul style="list-style-type: none"> - Uncertainty in the new NHS as to who is responsible for monitoring and reporting progress against the National Outcomes Framework - Need to balance financial pressures with delivery of National Framework outcomes may mean that some areas may not be achieved due to lack of funding <p>EFFECT:</p> <ul style="list-style-type: none"> - Failure to meet statutory responsibilities - Failure to take remedial action if we are unaware that we are failing to deliver in any area 	3 3 High (9)	<p>Improvement Action Plans - sign off at IGC</p> <hr/> <p>Performance Function within Kingston CCG - routine reporting against national outcomes at IGC</p> <hr/> <p>Performance reporting integral function of South London CSS</p>	2 3 Moderate (6)	<p>Establish Performance Group reporting to IGC to act as an "early Warning System" for underperformance</p> <p>Action Owner: Tonia Michaelides</p> <p>To be implemented by: 31/10/2013</p>

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613	Surbiton Health Centre	<p>Cause & Effect: CAUSE: CCG is unable to maximise usage of clinical space available in Surbiton Health Centre, either through allocated space or space not being used optimally</p> <p>EFFECT: - Empty clinical space could lead to a financial cost pressure to CCG - Missed opportunity to deliver out of hospital work stream of BSBV</p>	4 3 High (12)	Options paper for use of unallocated space being drawn up Service provision by provider documented and timetable for moving onto premises agreed	2 3 Moderate (6)	Complete capacity review of Surbiton HC. Action Owner: Tonia Michaelides To be implemented by: 30/11/2013
614	Continuing Care - Retrospective reviews	<p>Cause & Effect: CAUSE: CCG has insufficient financial resource and commissioning capacity to manage continuing care retrospectives</p> <p>EFFECT: CCG unable to meet costs associated with continuing care retrospectives and unable to process cases in a timely manner</p>	3 4 High (12)	Current commissioning capacity in place to manage continuing care 2m provision in 12/13 accounts to fund continuing care prospectives	2 3 Moderate (6)	Generate regular reports for Finance Committee re. expenditure associated with continuing care retrospectives Action Owner: Neil Ferrelly - Director of Financial Planning To be implemented by: 31/03/2014

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615	CCG capacity to deliver	<p>Cause & Effect:</p> <p>CAUSE:</p> <ul style="list-style-type: none"> - Blueprint for CCG Commissioning support is not fit for purpose as CCG takes a statutory role - External providers such as SLCSU fail to deliver functions for which they have been contracted - Insufficient commissioning capacity puts at risk CCGs ability to pass annual assessment process <p>EFFECT:</p> <ul style="list-style-type: none"> - Functions not met or inadequately covered - Cost pressure to CCG as extra resource - Management costs exceed £25 per head 	3 4 High (12)	<p>CCG Structure has been operating since September 2012 so has had time to bed down</p> <hr/> <p>CCG has contract in place with SLCSU which includes financial penalties for non-delivery</p>	2 3 Moderate (6)	<p>Provide regular reports of expenditure against running cost allowance to finance committee</p> <hr/> <p>Action Owner: Neil Ferrelly - Director of Financial Planning</p> <p>To be implemented by: 28/03/2014</p> <hr/> <p>Review commissioning support during 2013/14</p> <hr/> <p>Action Owner: Tonia Michaelides</p> <p>To be implemented by: 31/12/2013</p>
334	Inability to demonstrate sufficient assurance of effectively embedded governance arrangements	<p>Cause & Effect:</p> <p>Inability to demonstrate sufficient assurance of effectively embedded governance arrangements could compromise CCG authorisation</p>	4 2 High (8)	<p>CCG Committee Framework</p> <hr/> <p>Governance Audit completed</p> <hr/> <p>Integrated Governance Committee in place</p> <hr/> <p>KCCG Authorisation evidence</p> <hr/> <p>KCCG Constitution</p> <hr/> <p>Risk Register</p>	4 1 Moderate (4)	<p>Implement recommendations from Internal Audit Report</p> <hr/> <p>Action Owner: Jill Pearse</p> <p>To be implemented by: 31/03/2014</p> <hr/> <p>Internal Audit of Governance Framework</p> <hr/> <p>Action Owner: Jill Pearse</p> <p>To be implemented by: 30/09/2013</p> <hr/> <p>Review Governance Policies and Procedures: Implement Project Plan</p> <hr/> <p>Action Owner: Jill Pearse</p> <p>To be implemented by: 31/03/2014</p>