

Date: 09.06.16 Meeting: CCG Governing Body  
Item No. 7.1  
Public

**REPORT TITLE: Board Assurance Framework**  
**DECISIONS TO BE MADE: To note and approve**

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**GB Lead: Catherine Wylie, Director of Risk & Quality Assurance**

Continue to improve the quality of services	X	Improve patient experience	
Reduced unwarranted variations in services		Reduce the inequalities gap in North Lincolnshire	
Deliver the best outcomes for every patient		Statutory/Regulatory	X

**Executive Summary (Question, Options, Recommendations):**

To inform the Governing Body of the risks identified for North Lincolnshire CCG (NL CCG) on the Governing Body Assurance Framework (AF).

The AF identifies key strategic risks in line with NL Risk Management Strategy. All other identified risks are held on the NL CCG Corporate and Directorate Risk Registers. Work is on-going to ensure that risks, including partnership risks, continue to be captured and managed at the appropriate level.

A review has been undertaken of the BAF format and changes will be made to its presentation including the addition of a risk tolerance score and risk score tracker.

The AF is reviewed by the Audit Group. The AF and CCG Corporate Risk Register are also reviewed regularly by the Quality Group.

<b>Equality Impact</b>	<b>N</b>	
<b>Sustainability</b>	<b>N</b>	
<b>Risk</b>	<b>Y</b>	The AF is a key element of the organisations corporate governance framework.
<b>Legal</b>	<b>Y</b>	The organisation needs to demonstrate that it has an effective system to identify and manage risks.
<b>Finance</b>	<b>N</b>	

<b>Patient, Public, Clinical and Stakeholder Engagement to date</b>									
	<b>N/A</b>	<b>Y</b>	<b>N</b>	<b>DATE</b>		<b>N/A</b>	<b>Y</b>	<b>N</b>	<b>DATE</b>
Patient:	X				Clinical:			X	
Public:	X				Other:			X	



**North Lincolnshire**  
Governing Body Assurance Framework

Risk ID		Link to Strategic Objective	Risk Description	Key Controls	Source of Risk	Current Risk Score				Previous Risk Score	Movement	Assurance on Controls	Positive / External Assurance	Gaps in Control	Gaps in Assurance	Last Review Date	Lead
						Impact	Likelihood	Risk Score	Status								
Q1	C		If there is a lack of collated or accurate data on out of hospital mortality there is a potential that areas of high risk are not identified and/or addressed.	Community Mortality Action Plan. Roll out of End of Life gold standard framework. Meetings with care homes/care network to facilitate integrated working.	NLaG Mortality Data	4	3	12	M	16	Lower	Results of review to be monitored by Primary Care Development Group/Quality Group. MD and DoR&QA attend community mortality meeting as required	Joint Co-commissioning Board (NHSE membership) Engine Room. Multi agency meeting.			01/06/2016	MD
Q2	C		End of life care is fragmented and does not provide a seamless pathway of care	Palliative Care services. Healthy Lives Healthy Futures. Palliative Care and End of Life Strategy Group.	The pathway involves many agencies and organisations	3	3	9	M	12	Same	Commissioning Plan for 2015/16. Through the Better Care Fund an increase in ECP capacity has been secured (RATL). Invested in additional Macmillan nurses in locality teams.	A revised EOL strategy with multi-agency sign up is now in place.	Progress is slow in achieving seamless pathway	Need to monitor effectiveness of co-ordinated approach across North Lincolnshire.	20/05/2016	DRQA
Q4	A		Risk to CCG regarding delayed delivery of retrospective claims.	SLA and supporting service specification in place. Governance arrangements in place. Now outsourced and trajectory set.	CHC Performance Data	4	4	16	H	16	Same	Commissioned from Doncaster and outsourced to CHC company and monitoring in place. NHSE returns	NHS England monitoring. Doncaster monitoring. CHC monitoring. Penalties are in place for non achievement of targets.	Recently outsourced to external company. Performance yet to be achieved.	New contract awaiting performance update	01/06/2016	DRQA
Q5			Inability to recruit sufficient GPs could lead to difficulty maintaining current level of service and quality outcomes for patients	The CCG currently joined into Humber wide initiative to recruit practice nurses and GPs. Systems being re-organised to develop primary care. Participation in targeted investment in recruiting returning doctors pilot scheme.	Primary care data	5	4	20	H	20	Same	Joint commissioning group work. GP Federation		Considering engagement with HUB advance training practices.	Reporting and monitoring systems being developed	01/06/2016	Medical Director

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AO1	E	If the CCG fails to engage and work with key partners and stakeholders (including Local Authorities, GPs, Public) the delivery of CCG strategic objectives could be threatened.	Health & Wellbeing Board established with CCG Vice Chair. Engagement with practices - Engine Room, Governing Body, Council of Members, Safer Neighbour Boards, CCG Collaborative established. Focusing work with key strategic partners and building locality based working. Health and Wellbeing Board have now agreed on-going priorities going forward including HLHF. Care Networks coming on stream.	HLHF programme work	4	3	12	M	12	Same	Health and Wellbeing Board Reports and minutes. Performance Report. HWB adopts areas as methods to improve health inequalities, health inequalities top priority. Joint Governance Board re Better Care Fund established with LA. Section 75 agreements in place to support BCF. Joint HWB Strategy agreed. Meeting of Governing Body and Council of Members.	ICP / IWP established as working groups of Health and Wellbeing Board. Better Care Fund signed off by HWBB 15 CCG assurance process - NHSE Q1 assurance received. HWBB peer reviews undertaken.		Peer review action plan now in place and in part implemented	30/03/2016	AO
AO3	A	If the CCG fails to agree an acceptable / affordable option for Healthy Lives Healthy Future in a timely manner there is a risk of system failure.	HLHF Programme Board. Support Groups operating. Regular reporting into Governing Body.	HLHF Programme Board data	5	4	20	H	20	Same	Programme Board and Governing Body reports. PMO Office, Clinical Lead and Programme Director. NLaG plan to Monitor submitted taking CCG systems into account.	Independent Chair appointed for Assurance Group. Strategic engagement from NLaG. Gateway report received. Joined up plan for Healthy Lives, Healthy Futures. PWC have reviewed financial gap, HLHF Programme Board scrutiny. Monitor & Area Team attendance at Programme Board.	Revised programme arrangements in place up to April 16 to support phase 2. Programme arrangements for HLHF. Strategic Workforce Group. Underpinning Clinical Working Groups in place and support including finance / BI etc. and links to BI work emerging.	Plan for 16/17 has been developed but not yet agreed.	30/03/2016	AO
F1	A	If the CCG fails to deliver a balanced budget there will be no resources to support investment and the CCG could lose ability to self direct from NHS England.	Financial controls, regular meetings with budget holders. QIPP monitoring, Contract monitoring, Finance & Performance Group. Financial Control Environmental Assessment.	Finance & Performance Data	4	4	16	H	16	Same	Position monitored by CCG Engine Room and Governing Body. Reviews of monitoring reports. Monitoring information is also Added to BIZ. Audit Group monitors adequacy of controls. Standard Checklist for Budget Holder meetings. The Better Care Fund metrics and finances are also reported to joint meetings with the Council and to NHS England, on at least a Quarterly basis.	External Audit Value for Money Reports. Deloitte assurance report available to CCG and their auditors. CSU QIPP review process. QIPP monitoring reports to CCG. Independent review on CHC spend. PWC provided costing support for Better Care Fund plans Underlying position reported to NHS England and included in Board Report. CCG assurance process includes finance (assured with support). MOU and various risk shares helps to minimise financial risk in 16/17.	Resulting from the move to a more formal PBR contract with NLaG (as opposed to the MoL based contract in 2015/16) arrangements are being made for the formal monitoring of the NLaG Contract, including imposition of contract penalties and resolution of challenges and queries (using the ECB Board) in a more timely manner.	Finance and performance committee to be established. QIPP plan being worked up. However in order to meet financial targets in 2016/17, an unresolved risk of £2.446m has been reported to NHS England via a revised submission of the CCG's 2016/17 Financial Plan.	01/06/2016	CFO
A. Continue to improve the quality of services																
B. Reduce unwarranted variations in services																
C. Deliver the best outcomes for every patient																
D. Improve patient experience																
E. Reduce the inequalities gap in North Lincolnshire																

Almost 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
<b>Probability</b>					
<b>Severity</b>	Negligible	Minor	Moderate	Serious	Catastrophic

## **NL CCG Assurance Framework Commentary – Governing Body**

### **June 2016**

There are 7 risks identified on the current Assurance Framework. The score of one risk has been reduced other risk scores remain the same.

The format of the Assurance Framework has been reviewed and in the future will include risk appetite and a tracker for risk scores.

#### **Risk Movement**

##### **Q1 (Mortality data)**

Risk controls and assurances have been updated. The likelihood for the risk occurring has been reduced from a 4 to a 3 thus reducing the overall score from 16 to 12. This is a result of a positive impact from a number of on-going actions.

##### **2 (End of life)**

Risk controls and assurances have been updated.

##### **Q4 Delayed Delivery of retrospective claims**

Risk controls and assurances have been updated.

##### **Q5 Inability to recruit GPs**

Risk mitigation actions are in place; more robust systems interventions are being developed.

##### **AO1 (Stakeholder engagement)**

Risk controls and assurances have been updated. Discussions around HLHF and plans for new governance arrangements with the Council could lead to further reduction in risk score.

##### **A03 (HLHF options)**

Risk controls and assurances have been updated. Despite significant actions and scrutiny this risk level remains the same and the highest rated risk currently on the Assurance Framework

##### **F1 (Financial challenge)**

Risk controls and assurances have been updated. Despite significant actions and scrutiny this risk score remains the same.