

ICB Primary Care Commissioning Committee

Date of meeting	20 July 2023
Title of paper	ICB Risk Register Report
Presented by	Debra Atkinson Company Secretary/Director of Corporate Governance
Author	Claire Moore, Head of Risk Assurance and Delivery
Agenda item	2.3
Confidential	No

Purpose of the paper

The purpose of this report is to provide the Integrated Care Board's (ICB) Primary Care Commissioning Committee with the first ICB Risk Management Update Report as part of an annual cycle of review during 2023/24.

Executive summary

The Board Assurance Framework (BAF) and Corporate Risk Register (CRR) are key documents that capture risks related to the ICB's strategic objectives and day-to-day business delivery, respectively. The risks are aligned to these registers and are based on their impact and managed at the appropriate levels within the organisation.

The report includes the BAF and CRR risks relating to the business of the of the Primary Care Commissioning Committee; a risk dashboard is also provided which summarises those risks held on the BAF and CRR and, the 2023/24 annual cycle of risk reporting to the board and its committees.

There is 1 risk currently held on the BAF that is relevant to the committee's work

- **ICB-026:** Primary care dental services are taking longer to recover from COVID which means patients are finding it difficult to access routine dental care

This is in relation to the following strategic objective:

- **SO2:** to equalise opportunities and clinical outcomes across the area

Following discussion at the ICB board meeting on 5th July it is proposed that this risk is transferred to the CRR as it relates to the operational business of the ICB.

Members can access and view the dynamic risk registers and assurance framework via the following link: [Board Risk Dashboard \(with links to BAF and CRR\)](#); the monthly Executive Management Team (EMT) risk exception report can be viewed here: [Monthly EMT risk exception report](#).

The report also includes a cycle of risk management oversight and review for 2023/24

Alert, Advise or Assure				
Assure				
Recommendations				
<p>The Primary Care Commissioning Committee is requested to:</p> <ul style="list-style-type: none"> • Note the contents of the report and the risk reporting schedule for 2023/24; • Review the risk which relates to the business the committee (ICB-026); • Support the movement of this risk from the BAF to CRR • Support the revised risk score from 12 to 8 				
Governance and reporting (list other forums that have discussed this paper)				
Meeting	Date			Outcomes
Executive Management Team	13 June 2023			Endorsed
Conflicts of interest identified				
N/A				
Implications				
<i>If yes, please provide a brief risk description and reference number</i>	Yes	No	N/A	Comments
Quality impact assessment completed			N/A	
Equality impact assessment completed			N/A	
Data privacy impact assessment completed			N/A	
Financial impact assessment completed			N/A	
Associated risks			Yes	Outlined in the report
Are associated risks detailed on the ICB Risk Register?			Yes	Outlined in the Appendices

Report authorised by:	Mrs Debra Atkinson, Company Secretary/Director of Corporate Governance
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ICB Primary Care Commissioning Committee

ICB Risk Register Report

1. Introduction

- 1.1 The purpose of this report is to provide the Integrated Care Board's (ICB) Primary Care Commissioning Committee (PCCC) with a report on the risks held on the Board Assurance Framework (BAF) and Corporate Risk Register (CRR) which relates to the business of the of the committee.
- 1.2 Also presented is a "risk dashboard" which provides, a high-level summary of the risks held on the ICB's risk registers, and a cycle of risk reporting to the committee for 2023/24.

2. Background

- 2.1 As described in the PCCC Terms of Reference (ToR), the committee has responsibility for providing regular assurance updates to the board that there are effective systems of governance and internal control that supports it. This includes reviewing those risks on the BAF and CRR which relate to both high risk and operational areas that could impact on primary care services.
- 2.2 To support this, a system which provides a dynamic and streamlined approach to risk reporting and assurance using "live" dashboards, has been implemented and is fully operational via Smartsheets. This includes a monthly exception dashboard report which is reviewed by the Executive Management Team (EMT). Risks can be submitted for review, and updated, via Smartsheets which allows the Senior Risk Owners (SROs) to share in "real time" issues that arise which may require executive/senior leadership attention.
- 2.3 Members can access and view the dynamic risk registers and assurance framework via the following link:

[Board Risk Dashboard \(with links to BAF and CRR\)](#)

The monthly EMT risk exception report can be viewed here:

[Monthly EMT risk exception report](#)

3. Board Assurance Framework and Corporate Risk Register

- 3.1 A full summary of ICB BAF and CRR risks is attached at **Appendix A**; the committee is asked to note that risks have been re-aligned to capture risks based on the criteria below rather than escalated and de-escalated based on risk scores as follows:
 - **Board Assurance Framework** – holds risks that relate to the delivery of the ICB's strategic objectives and have the highest potential for external impact. The

BAF is a key document which supports the board focus on the delivery of its strategic objectives and captures the controls and assurances in place to mitigate potential, emerging and actual risks

- **Corporate Risk Register** – captures risks that relate to the ICB's on-going day-to-day business delivery. Whilst these risks may have some external impact, operational risks mostly affect internal functioning and services. Depending on the level of risk involved, operational risks are managed at directorate and committee level. Significant operational risks, which are not effectively managed can have an impact on the delivery of the strategic objectives and therefore processes are in place to escalate these risks as required.

4. Strategic Objectives

4.1 The board agreed the following strategic objectives (SO):

- **SO1:** improve quality including safety, clinical outcomes and patient experience
- **SO2:** to equalise opportunities and clinical outcomes across the area
- **SO3:** make working in Lancashire and South Cumbria an attractive option for existing and potential employees
- **SO4:** meet financial targets and improve productivity
- **SO5:** meet national and locally determined performance targets and standards
- **SO6:** to develop and implement ambitious, deliverable strategies

5. Risk for Review by the PCCC

5.1 There is currently one risk held on the BAF which relate to the business of the committee (aligned to SO2); this is attached at **Appendix B**.

- **ICB-026:** Primary care dental services are taking longer to recover from COVID which means patients are finding it difficult to access routine dental care.

5.2 Following discussion at the ICB board meeting on 5 July it is proposed that this risk is moved to the CRR as it relates to the operational business of the ICB.

5.3 Following review by the risk owner it is proposed that the risk score be reduced from "12" to "8". This is due to the progression of the action plan and an increase in the controls including the establishment of a dental access and oral health programme implementation group to develop a dental access plan. Further mitigation is provided through the commissioned pathways in place to support patients who require urgent care, follow up treatment to finalise an urgent intervention and comprehensive care for patients where their oral health impact on wider health, or where there is significant risk of further deterioration.

6. Annual Cycle of Risk Reporting

- 6.1 An annual cycle of risk reporting is attached at **Appendix C**. This aligns to the board and committee meeting dates across 2023/24 to ensure the timely review of all risks held in advance of the Board Assurance Framework being presented to the board and through its committees.

7. Conclusion

- 7.1 The report provides the PCCC members with an update on the risk held relating to the business of the committee. A summary dashboard of all BAF and CRR is also attached along with a schedule of risk reporting to the committee for 2023/24.

8. Recommendations

- 8.1 The PCCC is requested to:
- **Note** the contents of the report and the risk reporting schedule for 2023/24;
 - **Review** the risk which relates to the business the committee (ICB-026);
 - **Support** the movement of this risk from the BAF to CRR
 - **Support** the revised risk score from 12 to 8

Claire Moore

Head of Risk Assurance and Delivery

20 July 2023

ICB Summary Risk Dashboard July 2023

Summary of BAF

Risk ID	Risk Title (no more than 20 words)	Type of Risk	Strategic Objective at Risk	Exec Lead	Directorate/ Functional Area	Assuring Committee	Initial Treated Risk Score	Current Risk Score	Target Risk Score	for Reducing/ Closing the Risk	Risk Progress
ICB-001	Continuing Healthcare	Level 1 - ICB (Our Statutory Responsibility)	1. Improve quality, including safety, clinical outcomes and patient experience	Sarah O'Brien	Adult Health and Care	Quality Committee	20	16	12	31/12/23	→
ICB-019	SOF ratings of commissioned organisations and the ICB.	Level 2 - ICB (NHS System Oversight)	1. Improve quality, including safety, clinical outcomes and patient experience	David Levy, Sarah O'Brien	Quality Assurance and Safety	Quality Committee	12	12	8	29/03/24	→
ICB-006	Implementation of Fuller Report recommendations	Level 2 - ICB (NHS System Oversight)	2. To equalise opportunities and clinical outcomes across the area	David Levy	Primary Care	ICB Execs	16	12	8	30/09/25	→
ICB-020	Worsening economic impact on health inequalities	Level 1 - ICB (Our Statutory Responsibility)	2. To equalise opportunities and clinical outcomes across the area	David Levy	Population Health	Quality Committee	16	16	12	01/04/24	→
ICB-026	Primary care dental services are taking longer to recover from COVID which means patients are finding it difficult to access routine dental care.	Level 1 - ICB (Our Statutory Responsibility)	2. To equalise opportunities and clinical outcomes across the area	David Levy	Primary Care	Primary Care Commissioning Committee	12	8	4	31/03/26	↑
ICB-009	Workforce Transformation	Level 1 - ICB (Our Statutory Responsibility)	3. Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential employees	James Fleet	People - Transformation	People Board	12	12	6	31/03/26	→
ICB-008	System Financial Sustainability	Level 3 - ICB - (System Partners Supporting Integration)	4. Meet financial targets and deliver improved productivity	Sam Proffitt	Strategic Finance	Finance and Performance Committee	20	20	15	31/03/24	→
ICB-012	Physical and digital infrastructure (cyber security and business continuity)	Level 1 - ICB (Our Statutory Responsibility)	4. Meet financial targets and deliver improved productivity	Asim Patel	Digital	Finance and Performance Committee	15	15	10		→
ICB-013	Delivery of Lancashire and South Cumbria system-wide estates plan and LSC Health Infrastructure Strategy.	Level 1 - ICB (Our Statutory Responsibility)	4. Meet financial targets and deliver improved productivity	Sam Proffitt	Strategic Estates, Infrastructure and Sustainability	Finance and Performance Committee	16	15	10	28/07/23	→
ICB-010	Meet national and locally determined performance targets	Level 2 - ICB (NHS System Oversight)	5. Meet national and locally determined performance standards and targets	Maggie Oldham	Planning, Performance and Strategy - General	Finance and Performance Committee	20	20	16	29/09/23	→
ICB-016	Contribution of the ICB to the development of places in LSC.	Level 2 - ICB (NHS System Oversight)	6. To develop and implement ambitious, deliverable strategies	Craig Harris	Health and Care Integration	ICB Execs	12	12	4	01/09/23	→

Summary of CRR

Risk ID	Risk Title (no more than 20 words)	Type of Risk	Strategic Objective at Risk	Exec Lead	Directorate/ Functional Area	Assuring Committee	Initial Treated Risk Score	Current Risk Score	Target Risk Score	Target Date for Reducing/ Closing the Risk	Risk Progress
ICB-002	Failure to deliver statutory safeguarding duties	Level 1 - ICB (Our Statutory Responsibility)	1. Improve quality, including safety, clinical outcomes and patient experience	Sarah O'Brien	Safeguarding	Quality Committee	12	12	8	29/03/24	→
ICB-003	LeDeR	Level 1 - ICB (Our Statutory Responsibility)	1. Improve quality, including safety, clinical outcomes and patient experience	Sarah O'Brien	Nursing - general	Quality Committee	15	12	6	31/03/24	→
ICB-004	Learning Disability and Autism - inpatient services	Level 1 - ICB (Our Statutory Responsibility)	1. Improve quality, including safety, clinical outcomes and patient experience	Sarah O'Brien	Adult Health and Care	Quality Committee	20	16	12	31/05/24	→
ICB-007	Quality of Maternity and Neonatal Care	Level 2 - ICB (NHS System Oversight)	1. Improve quality, including safety, clinical outcomes and patient experience	Sarah O'Brien	CYP and Maternity	Quality Committee	15	15			→
ICB-023	CYP Autism Assessment	Level 1 - ICB (Our Statutory Responsibility)	1. Improve quality, including safety, clinical outcomes and patient experience	Sarah O'Brien	CYP and Maternity	Quality Committee	15	15	12	24/11/23	→
ICB-024	Adult Autism Assessments	Level 2 - ICB (NHS System Oversight)	1. Improve quality, including safety, clinical outcomes and patient experience	Sarah O'Brien	Adult Health and Care	Quality Committee	15	15	12	28/03/24	→
ICB-028	The fragility of the care sector impacting on quality and wider system resilience.	Level 3 - ICB - (System Partners Supporting Integration)	1. Improve quality, including safety, clinical outcomes and patient experience	Sarah O'Brien	Adult Health and Care	Quality Committee	12	12	9	01/04/24	→
ICB-031	Waiting times for Adult ADHD	Level 2 - ICB (NHS System Oversight)	1. Improve quality, including safety, clinical outcomes and patient experience	David Levy	Mental Health	Quality Committee	16	16	12	31/12/23	→
ICB-030	Waiting times for CYP ADHD	Level 2 - ICB (NHS System Oversight)	1. Improve quality, including safety, clinical outcomes and patient experience	David Levy	Mental Health	Quality Committee	16	16	12	31/12/23	→
ICB-032	Reduction of Psychiatric Intensive Care Capacity (PICU)	Level 1 - ICB (Our Statutory Responsibility)	1. Improve quality, including safety, clinical outcomes and patient experience	David Levy	Mental Health	Quality Committee	16	16	4	04/07/23	→
ICB-005	Cancer Performance (backlog reduction)	Level 2 - ICB (NHS System Oversight)	2. To equalise opportunities and clinical outcomes across the area	David Levy	Cancer Alliance	Quality Committee	12	12	4	29/09/23	→
ICB-025	Complexity in development of the South Cumbria place	Level 2 - ICB (NHS System Oversight)	6. To develop and implement ambitious, deliverable strategies	Craig Harris	Health and Care Integration	ICB Execs	9	9	3	30/09/23	→
ICB-029	Failure to deliver the Community Transformation Programme	Level 3 - ICB - (System Partners Supporting Integration)	6. To develop and implement ambitious, deliverable strategies	James Fleet, Sarah O'Brien	People - Transformation	Quality Committee	16	16	8	01/09/25	→

Annual Cycle of Risk Management Reporting

