

ICB Primary Care Commissioning Committee

Date of meeting	13 February 2025
Title of paper	Risk Management Report
Presented by	Claire Moore, Head of Risk, Assurance and Delivery
Author	Claire Moore, Head of Risk, Assurance and Delivery
Agenda item	5
Confidential	No

Executive summary

The purpose of this report is to present an update on the risk management activity undertaken for those risks which relate to the business of the Primary Care Commissioning Committee (PCCC) since the last report presented in October 2024.

Risks held on the Board Assurance Framework (BAF) are those which have the potential to impact on the delivery of the ICB's Strategic Objectives. There are no risks held on the BAF relating to the business of the Primary Care Commissioning Committee (PCCC).

Risks held on the Operational Risk Register (ORR) are those which have been assessed as having the potential to significantly impact on the delivery of the ICB's plans or priorities and, are categorised as "high". These receive Corporate Oversight (CO), through the Executive Management Team (EMT) and through the relevant assuring committee.

There are three risks held on the ORR which meet the threshold for CO in relation to the business of the committee:

- Risk ID ICB 007: Prevalence of dental caries: There is a risk that the
 prevalence of dental caries will deteriorate and that the underlying level of oral
 health will deteriorate putting additional pressure on access to routine dental
 care and other dental services available in primary and secondary care.
- Risk ID ICB 009: GP Contract 2024/25 dispute Collective Action; there is a risk that collective action may further result in reduced level of service and impact on patients' ability to access healthcare via their GP; reduce the number of patient contacts; resulting in practices not engaging with advice and guidance and further impacting on secondary care.

The following risk is jointly overseen with the Quality Committee:

• Risk ID ICB 013: There is a risk that the ICB is not sighted on and effectively managing the quality of care delivered by Primary Care. This could adversely impact patient safety, experience, outcomes, clinical effectiveness and the ICB's ability to meet its statutory responsibilities in relation to quality oversight.

A summary of the actions taken to mitigate the above risks, including any approved changes/movement in risk scores is presented within section 3 of the report.

The risk register entries are provided in full at Appendix 1 and a high-level summary dashboard of all risks currently held which meet the threshold for corporate oversight through other assuring committees is attached at Appendix 2.

Advise, Assure or Alert

The report is to advise the committee of the management and oversight of risks held on the ORR relating to the business of the committee and the risk management activity undertaken during the reporting period.

Recommendations

The Primary Care Commissioning Committee is requested to:

- **Note** the contents of the report.
- Note the risk management activity undertaken during the reporting period.
- **Review** the risks relating to the business of the PCCC (Appendix 1).
- Note for information all risks held on the ORR (Appendix 2).

Wh	nich Strategic Objective/	s does	s the r	eport	contribute to	Tick	
1	Improve quality, including safety, clinical outcomes, and patient						
	experience						
2	To equalise opportunities	and c	linical	outco	mes across the area	✓	
3	Make working in Lancash						
	desirable option for existi	ng and	d potei	ntial er	nployees		
4	Meet financial targets and	d deliv	er imp	roved	productivity	✓	
5	Meet national and locally	deter	mined	perfor	mance standards and targets		
6	6 To develop and implement ambitious, deliverable strategies						
Im	plications						
		Yes	No	N/A	Comments		
As	sociated risks	✓			Outlined in the report		
Are	e associated risks	✓			Outlined in the Appendices		
det	tailed on the ICB Risk						
	gister?						
	ancial Implications						
		ussec	d (list d	other c	ommittees/forums that have		
dis	cussed this paper)						
Me	eting	Date			Outcomes		
Ex	ecutive Management	Monthly			Endorsed the actions and		
Te	Team				recommendations outlined in the		
					report.		
	nflicts of interest associ	ated v	vith th	is rep			

Impact assessments							
	Yes	No	N/A	Comments			
Quality impact assessment			✓				
completed							
Equality impact			✓				
assessment completed							
Data privacy impact			✓				
assessment completed							

Report authorised by:	Debra Atkinson, Company Secretary/Director of
	Corporate Governance

ICB Primary Care Commissioning Committee 13 February 2025

Risk Management Update Report

1. Introduction

1.1 The purpose of the report is to present an update on the risk management activity for those risks relating to the business of the Primary Care Commissioning Committee (PCCC) since the last report presented in October 2024.

2. Background

- 2.1 Risks which are assessed as having the potential to significantly impact on the delivery of the ICB's Strategic Objectives are held on the Board Assurance Framework (BAF). There are no risks held on the BAF relating to the business of the Primary Care Commissioning Committee (PCCC).
- 2.2 Risks which are assessed as having the potential to significantly impact on the delivery of plans or priorities and are categorised as "high," are held on the Operational Risks Register (ORR). These are reported to the Executive Management Team (EMT) monthly, with quarterly risk updates provided to the relevant assuring committee.
- 2.3 There are currently three risks held on the ORR which relate to the business of the PCCC (including one risk which is jointly overseen with the Quality Committee).

3. Review of Risks relevant to the business of the PCCC

- 3.1 The following tables present a summary of the risk management activity undertaken during the reporting period. Each table presents the changes to the risk controls and assurances, any gaps identified and where relevant the mitigating actions planned.
- 3.2 The full risk entries are provided at Appendix 1, and a high-level dashboard of all risks currently held with corporate oversight through other assuring committees is also provided for information, at Appendix 2.

Risk ID ICB 007: There is a risk that the prevalence of dental caries will deteriorate and that the underlying level of oral health will deteriorate putting additional pressure on access to routine dental care and other dental services available in primary and secondary care.

urrent so (C4xL4)	ore:	Target (C4 x L		In/out of risk appetite (current risk score):	In/out of risk appetite (target risk
				Out (4-10)	score): In

The risk has been reviewed with no proposed movement to the risk score.

Controls have been fully reviewed and updated as follows:

- Dental Access and Oral Health Improvement Plan, focusing on 5 key themes (Investment Framework/Outcome Measures; Pathways; Communications; Contracting and Workforce) developed and implemented.
- Two-year Dental Investment Plan approved and implemented, and progress reviewed on a regular basis.
- Approved to pay for activity up to 110% in 2024/25 for top 5 priority Local Authority areas
- National Dental Recovery Plan 2024/25: minimum UDA rate increased to £28 for 28 contracts - 88% of L&SC practices opted in to New Patient Premium Scheme -14 posts funded under Dental Recruitment Incentive Scheme
- Pathway 1 (Urgent Care) commissioned until 31.3.25
- Pathway 3 (priority patients) commissioned until 31.3.25
- Child Access and Oral Health Improvement Pathway commissioned until 30.8.26
- BI team is now providing some support, but this is still to be developed.

Gaps in controls have been updated including:

 National contracting constrictions are restricting the ICB's ability to invest and support the providers to become more resilient and sustainable. Ongoing national reform programme is not moving at a pace required to better support practices. This is resulting in more applications to re-base contracts nationally.

Assurances have been strengthened:

• Performance metrics are reported into PCCC and Finance and Performance Committee monthly.

Actions have been reviewed and the following new action opened:

 Dental access oral health improvement 5 Year Plan – initial workshop held to design and develop the 5 Year Plan with clinical input and dental public health advice. The 5 Year Plan is due to be considered at the PCCC meeting in February 2025.

Risk ID ICB 009: GP Contract 2024/25 dispute Collective Action; there is a risk that collective action may further result in reduced level of service and impact on patients' ability to access healthcare via their GP; reduce the number of patient contacts; result in practices not engaging with advice and guidance; with further impact on secondary care.

Current score:	Target score: 8	In/out of risk appetite	In/out of risk
16 (C4xL4)	(C4 x L2)	(current risk score): Out	appetite (target risk
		(4-10)	score): In

Following the verbal update provided at the PCCC meeting in October, the EMT further reviewed and approved the re-instatement of this risk to the ORR at a score of "16". The EMT requested that a further briefing was provided on the impact of the collective industrial action.

Controls to support the mitigation of the risk include:

- A review of all general practices Local Enhanced Services (LES) has been undertaken and recommendations made to the Board.
- Weekly system wide General Practice Collective Action meeting plus Morecambe Bay specific meeting.
- Joint ICB and UHMB mitigation plan for actions underway and planned by Morecambe Bay practices.

Gaps in controls have been identified including:

- The progress of national contract negotiations is unknown.
- Mitigations may reduce patient access. Mitigation currently not identified for MGUS monitoring.

Actions have been reviewed and the following new actions opened:

- Delivery planning for new LES (which effectively mitigate all known planned and potential collective actions.
- LES specification and pricing negotiations with LMC commenced in December 2024 and planned completion by 7 February 2025.
- MGUS monitoring proposal to be considered by Commissioning Resource Group.
- 3.3 The following risk is jointly overseen with the ICB's Quality Committee; the risk has been reviewed with no proposed change in risk score:

Risk ID ICB 013: There is a risk that the ICB is not sighted on and effectively managing the quality of care delivered by Primary Care. This could adversely impact patient safety, experience, outcomes, clinical effectiveness and the ICB's ability to meet its statutory responsibilities in relation to quality oversight.

Current score:	Target score: 8	In/out of risk appetite	In/out of risk
16 (C4xL4)	(C4 x L2)	(current risk score): Out	appetite (target risk
		(4-10)	score): In
			· ·

The risk has been reviewed with no proposed change in risk score.

Controls have been updated including:

- Proactive practice visits were established to identify emerging risks before they materialise.
- Weekly soft intelligence reporting provides information of issues arising because of the collective action including information on discharges. These reports are shared with Primary Care Associate Directors.

Gaps in controls have been identified including:

 Lack of patient safety oversight due to Patient Safety Incident Reporting Framework (PSIRF) not being implemented across practices (not a statutory requirement). Patient specific safety concerns are escalated via soft intelligence reporting process.

Assurances have been strengthened through:

- NHS England regional complaints oversight group.
- Proactive GP Quality Support visits undertaken to identify support requirements and mitigate potential issues.
- Integrated Performance Report is being produced and shared with Primary Care Quality Group.

Gaps in assurance have been identified including:

- Implementation of PSIRF in Primary Care is not a statutory requirement.
- Limited capacity to ensure complaints identify learning, that it is implemented and leads to improvement.

Actions have been reviewed and the following actions added:

- Review of medicines related incentive schemes for 2025/26 to reflect prescribing indicators.
- Continued maturation of surveillance, triangulation, and monitoring of reports in relation to medicines managements which includes prescribing and primary care indicators.
- Development of Practice Visit Standard Operating Procedure (SOP).

4. Recommendations

- 4.1 The committee is requested to:
 - Note the contents of the report.
 - Note the risk management activity undertaken during the reporting period.
 - Review the risks relating to the business of the PCCC (Appendix 1).
 - Note for information all risks held on the ORR (Appendix 2).

Claire Moore

Head of Risk, Assurance and Delivery

High level summary dashboard of all risks held on Operational Risk Register (Corporate Oversight)

			Senior				
Risk ID	Risk Title	Exec Lead	Responsible Officer	Directorate/ Functional Area	Initial Risk Score	Current Risk Score	Target Risk Score
ICB-026	ICB ability to meet its statutory SEND responsibilities	Sarah O'Brien	Vanessa Wilson	CYP	20 - C4 \times L5, High	20 - C4 x L5, High	8 - C4 x L2, Medium
ICB-029	Neurodevelopment pathways across Lancashire and South Cumbria	Sarah O'Brien	Vanessa Wilson	CYP	20 - C5 x L4, High	20 - C4 x L5, High	8 - C4 x L2, Medium
CB001	Learning Disability and Autism - inpatient services	Sarah O'Brien	Jane Brennan	Adult Health and Care	16 - C4 x L4, High	16 - C4 x L4, High	12 - C4 x L3 Medium
CB006	Medicines shortages impacting clinical time and financial balance	David Levy, Sarah O'Brien	Andrew White	Meds Optimisation	20 - C4 x L5, High	16 - C4 x L4, High	12 - C4 x L3 Medium
CB007	High levels of Oral Health issues (Dental Caries) and the longer time to recover from COVID means patients are having difficulties in accessing routine dental access or specific services to manage oral health issues.	Craig Harris	David Armstrong	Primary Care - Dental	16 - C4 x L4, High	16 - C4 x L4, High	8 - C4 x L2, Medium
CB009	GP contract 2024/25 dispute – collective action	Craig Harris	Peter Tinson	Primary Care - Medical	16 - C4 x L4, High	16 - C4 x L4, High	8 - C4 x L2, Medium
CB010	Staff resource and capacity to effectively deliver quality oversight for Primary Care.	Sarah O'Brien	Kathryn Lord	Quality Assurance and Safety	16 - C4 x L4, High	16 - C4 x L4, High	8 - C4 x L2, Medium
CB011	Non compliance with National Patient Safety Alert: Valproate (NatPSA/2023/013/MHRA)	David Levy, Sarah O'Brien	Andrew White	Meds Optimisation	16 - C4 x L4, High	16 - C4 x L4, High	8 - C4 x L2, Medium
ICB012	Clinical Commissioning Policy Backlog	Sarah O'Brien	Andrew White	Quality Assurance and Safety	16 - C4 x L4, High	16 - C4 x L4, High	8 - C4 x L2, Medium
CB013	Ability of the ICB to effectively identify and respond to quality concerns for Primary Care.	Sarah O'Brien	Kathryn Lord, Peter Tinson, Andrew White	Quality Assurance and Safety	16 - C4 x L4, High	16 - C4 x L4, High	8 - C4 x L2, Medium
CB-024	Maternity Services Risk - Lack of a secure shared data environment is preventing the establishment of dashboards and system wide BI reporting to statutory obligations	Sarah O'Brien	Vanessa Wilson	Maternity	20 - C4 x L5, High	16 - C4 x L4, High	8 - C4 x L2, Medium
ICB-025	Failure to deliver the Women's Health Programme	Sarah O'Brien	Vanessa Wilson	Women's Health	25 - C5 x L5, Extreme	16 - C4 x L4, High	12 - C4 x L3 Medium
ICB-028	Long Covid Services post 31 March 2025	Craig Harris	Peter Tinson	Community Commissioning	16 - C4 x L4, High	16 - C4 x L4, High	8 - C4 x L2, Medium
CB-030	Provision of Chronic Wound Care across Lancashire and South Cumbria	Craig Harris	Peter Tinson	Community Commissioning	16 - C4 x L4, High	16 - C4 x L4, High	8 - C4 x L2, Medium
CB002	Quality of Maternity and Neonatal Care	Sarah O'Brien	Vanessa Wilson	Maternity	15 - C5 x L3, High	15 - C5 x L3, High	10 - C5 x L2 Medium
CB-022	NWAS Mental Health patient safety risk from high volume of calls and a risk of harm if calls not managed in a timely manner.	Craig Harris	Fleur Carney	Mental Health	20 - C5 x L4, High	15 - C5 x L3, High	9 - C3 x L3, Medium
CB-027	Neurology service gaps across South Cumbria locality	Craig Harris	Jayne Mellor	Urgent, Emergency and Planned Care	25 - C5 x L5, Extreme	15 - C5 x L3, High	10 - C5 x L2 Medium