

**Report to the NHS Somerset Clinical Commissioning Group on 18 June 2020**

<b>Title: Risk Update Report</b>	<b>Enclosure G</b>
Version Number / Status:	[0.1]
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<b>Purpose of Paper</b>	<p>1 To update the Governing Body about corporate risks that are new, escalated, de-escalated, increased, decreased or closed in the Corporate Risk Register (CRR) since the full review by the Clinical Executive Committee for Q3 on 4 March 2020</p> <ul style="list-style-type: none"> <li>• To advise Governing Body no risks have been closed.</li> <li>• To advise Governing Body no risks have been de-escalated from the CRR.</li> <li>• To advise that risk 202 CCG 2020/21 Budgets, has reduced from a risk score of 20 to 16. This reflects the 2020/21 financial year, which has a degree of uncertainty around the financial position, but not a definite financial deficit. The CCG has not yet delivered a balanced financial plan and uncertainty around funding levels and expenditure commitments currently exist.</li> <li>• To advise Governing Body no risks have been escalated to the CRR.</li> <li>• To advise Governing Body that one risk has increased the current risk score. Risk 386 COVID19: Personal Protection Equipment supply risk score has increased from 15 to 16, with an increased likelihood from 3 to 4 due to late deliver of the PPE portal and the completion of the educational organisations supply of PPE.</li> <li>• To advise Governing Body that the grouped risk 255 SWASFT Category 1 and Category 2 Performance has remained static (risk score 15).</li> <li>• To advise Governing Body that that 5 directorate risks have a risk score of 12 and above and/or are COVID19 sensitive: <ul style="list-style-type: none"> <li>- 297: Dermatology GPw - Access to Clinical Supervision (risk score (risk score L4 * S4 = 16).</li> <li>- 322: CFS/ME Service Review (risk score L4 * S4 = 16).</li> </ul> </li> </ul>
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	<ul style="list-style-type: none"> <li>- 392: No commissioning lead manager for services for Neuro Rehab patients and gaps in service (risk score L5 * S3 = 15).</li> <li>- 325: Risk of Capacity to Deliver Outcomes (risk score L4 * S3 = 12).</li> <li>- 387: Symphony Healthcare Services (SHS) Financial Stability (risk score L4 * S3 = 12).</li> </ul> <p>2 To advise that CCG members of staff are currently permitted to supply risk updates once every 2 months into Datix instead of monthly due to capacity constraints from the COVID19 pandemic.</p> <p>3 To advise Governing Body that the next full CRR update will be at the Governing Body meeting 30 July 2020.</p>
<b>Recommendation</b>	To approve the additions and amendments.
<b>Previous GB/ Committee(s), Dates</b>	Q3 full CRR review approved at Clinical Executive Committee (CEC) on 4 March 2020.

#### Monitoring and Assurance Summary

<b>This report links to the following CCG Strategic Themes:</b>	<ul style="list-style-type: none"> <li>• Transform the effectiveness and efficiency of urgent and acute care across all services</li> <li>• Sustain and continually improve the quality of all services.</li> </ul>		
<b>This report links to the following Somerset STP priorities:</b>	The STP priorities are fundamental to informing the design and content of these two central Governing Body support tools, in terms of operational risks (CRR) and strategic risks (GBAF )		
		<b>Any action required?</b>	
	<b>Yes</b>	<b>Yes</b>	<b>No</b>
<b>Equality Impact Assessment</b>			✓
<b>Quality</b>	✓	As covered by risk action plans	
<b>Privacy</b>		No confidential information included	✓
<b>Stakeholder Engagement</b>	✓	Through Lay Representation of Governing Body and Health & Care Strategy Engagement	
<b>Financial / Resource / Sustainability</b>	✓	As covered by risk action plans	
<b>Legal/Regulatory</b>	✓	Meets statutory obligations of the CCG in respect of good governance	
<b>Freedom of Information</b>		The report will become a public document when presented at Governing Body meeting	✓
<b>Risk Assessment</b>		No risk assessments identified for this report.	✓
<b>I confirm that I have considered the implications of this report on each of the matters above, as indicated</b>	Claire Miller		