

Standard Risk Register

Report Date	04 Nov 2019
Risk Status	Open
Service Line	Information Management & Technology, Primary Care Commissioning , Primary Care Improvement, BE Primary Care
Control Status	Existing
Action Status	Outstanding

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PCIM4	Adherence to the wound formulary Risk Owner: Catriona Khetyar Delegated Risk Owner: Last Updated: 14 Oct 2019	BEC Only-We will commission services that improve the outcome and experience of all our residents by consistently delivering the NHS Constitutional Standards.	24 Jan 2017	Cause If Tissue Viability expertise is limited Nursing Homes, District Nurses and Practice Nurses may inappropriately request dressings from FP10 Informed at March 2019 Berkshire Wound Care Advisory Group that 1 x TVN and Team Lead TVN is leaving the service which may impact TVN service delivery and support. This in turn may impact adherence to formulary for Woundcare; resulting in less clinical and cost effective choices and potentially driving prescribing via GP FP10 Effect Increase in Primary Care prescribing budget. Inappropriate choice of woundcare products due to potential use of less clinical and cost effective options used	I = 4 L = 4 16	Quarterly meetings with Tissue Viability nurses to discuss adherence to the formulary, cost per base. Monitoring EPACT data on Primary Care. Training with Practices who outside the norm. Tissue Viability nurses to educate DN. Pharmacist and Clinical leads can visit the practice. Report through Quality channels to decide whether contractual levers are required.						I = 3 L = 4 12	A new model of delivery and support by TVN service for Woundcare Formulary Person Responsible: Catriona Khetyar To be implemented by: 31 Jan 2020		There has been continuing staffing issues through the summer. However BHFT have not needed to put in mitigations for care homes or primary care.	14 Oct 2019

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PCIM 6	Increase in EColi bacteraemias from the 2016/17 baseline Risk Owner: Joanne Greengrass Delegated Risk Owner: Last Updated: 14 Oct 2019	BEC Only- We will commission services that improve the outcome and experience of all our residents by consistently delivering the NHS Constitutional Standards.	23 Oct 2017	Cause If there is not a decrease in the number of EColi bacteraemias Effect Then this could have an impact on the CCG Quality premium targets.	I = 4 L = 4 16	ICS Ecoli bacteraemia group monitoring the action plan						I = 4 L = 3 12	Implementation across the system, hydration project and the catheter passport Person Responsible: Joanne Greengrass To be implemented by: 01 Nov 2019		Action plan refreshed and Jo Greengrass has been involved in the national work. No areas for improvement that have been identified that could be implemented locally.	14 Oct 2019
						Monitoring of action plan by the ICS Quality Group					Implementation of the Gram negative infection action plan Person Responsible: Joanne Greengrass To be implemented by: 31 Mar 2020					

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PCIM9	inequitable service delivery to all residents in care homes from Primary Care Risk Owner: Joanne Greengrass Delegated Risk Owner: Last Updated: 14 Apr 2019	BEC Only- We will commission services that improve the outcome and experience of all our residents by consistently delivering the NHS Constitutional Standards.	04 Jan 2019	Cause If there is not an agreed model of service delivery for people in care homes Effect Then there will be an inequity on care provided which could result in increased hospital admissions and poor resident experience.	I = 4 L = 3 12	GMS contract						I = 3 L = 3 9	To develop a service delivery model across East Berkshire CCG and work with partners in the ICS. Phase one will be supporting care homes with knowledge and skills and how they can reduce the burden on Primary Care. Phase 2 will be the implementation of the DES 2020. Person Responsible: Joanne Greengrass To be implemented by: 20 Dec 2019	05 Jun 2019 Joanne Greengrass Task and finish group to be set up to scope the new model to support care homes in phase 1 14 Apr 2019 Joanne Greengrass Care home workshop was held in April to start to develop a future model.	Business case in development. Royal Borough members agreed to proposal but Bracknell and Slough wanted more information. To have a meeting with clinical leads.	14 Oct 2019
						PCOG to monitor individual cases										

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709	Primary Care Estates Sustainability - committed new premises	BEC Only-We will play a proactive role in the development and delivery of an innovative and united Sustainability and Transformation Plan	11 Jul 2016	<p>Cause Some Primary and community care premises are not fit for the delivery of the primary care strategy either due to standards of the premises or to changes to service and population needs. Alignment to new models of integrated care require co-location suitable for the provision of a wider range of services, therefore needs different physical and digital capacity</p> <p>Effect The commissioners will be unable to secure the primary care transformation plans if works are not put in place to refurbish, extend, rebuild or develop surgeries.</p>	I = 4 L = 4 16	PID approved for three ETTF schemes in cohort 2/3. Move to Outline Business cases for three sites by April 2019	NHS England ETTF			Adequate	<p>BEN Lynwood and Britwell Outline Business Cases for ETTF funding were approved by NHSE in January 2019, the Commissioning Support Officer is working up a programme plan for Full Business Case submission for each of the ETTF Schemes.</p> <p>Heatherwood Hospital ETTF OBC is dependent on</p>	I = 3 L = 3 9	<p>Progress the opportunities through ETTF to identify facilities to secure and transform general practice services in east Berkshire</p> <p>Person Responsible: Ann Bryant</p> <p>To be implemented by: 31 Oct 2019</p>		Infrastructure plan to PCCC and members in Sept and Oct 2019	03 Sep 2019
													<p>Develop a framework of advisors and support to primary care providers and partners to progress transformation plans in the community. Specifically; legal, financial, service model expertise</p> <p>Person Responsible: Alex Tilley</p> <p>To be implemented by: 29 Nov 2019</p>			

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											confirmation of FHFT CDEL limit and confirmation of ETTFF funding route. Binfield/Blue Mountain - work progressing on revised concept design and associated build and revenue costs.						

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						Needs assessment exercise on areas identified as at risk following publication of the Local Borough Plans in east Berkshire. The Infrastructure Plan will be completed on the revision of the GVA report and presented to PCOG in May 2019.											
						Routinely survey practice premises under the 6 facet survey audit - recommended every 3/4 years. This provides the commissioners and providers with state of premises including fit for purpose, maintenance and capacity Next audit expected 2020											

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PCIM8	Workforce in Primary care Risk Owner: Joanne Greengrass Delegated Risk Owner: Hayley Edwards Last Updated: 31 Oct 2019	BEC Only- We will commission services that improve the outcome and experience of all our residents by consistently delivering the NHS Constitutional Standards.	19 Oct 2018	Cause If the rate of Practice Managers leaving Primary care continues at the current rate Effect then there is a risk practices will not be compliant with CQC, loss of organisational memory and locality expertise.	I = 4 L = 3 12	Monthly monitoring of the workforce situation reviewed at PCOG and PCQIG meetings						I = 3 L = 3 9	Programme of resilience and management training for Practice Managers and key staff aligned to the ICS workforce development and national initiative through Training Hubs, LMC and HEE Person Responsible: Hayley Edwards To be implemented by: 20 Dec 2019		The ICS programme for Practice Manager resilience and management training advertising commenced in September. The CCG will work with the ICS regarding the uptake and outputs, including those that do not engage. Work underway regarding non clinical training, aligning with the Training Hub plans.	31 Oct 2019	
						Resilience and training plans being developed for non-clinical staff for delivery in 2019											Work with the PC Networks to include non clinical staff Person Responsible: Hayley Edwards To be implemented by: 31 Jan 2020
						The Primary Care Networks made aware of the risk and consider the inclusion of non clinical staff development in their Network Plans											

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IMT 15	Cyber Security Risk Owner: Anshu Varma Delegated Risk Owner: Arif Gulzar Last Updated: 03 Sep 2019	BEC Only- We will commission services that improve the outcome and experience of all our residents by consistently delivering the NHS Constitutional Standards.	24 May 2017	<p>Cause Cyber risk is increasingly prevalent across healthcare sector as the cyber threats continue and become more sophisticated and can impact on the operational delivery. IMT Risk -Systems are compromised or ineffective due to cyber attacks that jeopardise effective patient care. Information assets are damaged.</p> <p>Effect It can impact on the delivery of safe patient care, key information assets as well as business processes. It is therefore a major risk that needs to be mitigated to an appropriate level. Controls are in place to reduce the risk of attack around the CCG IT Infrastructure and key information assets that are maintained/ managed by SCW on behalf of CCG.</p>	I = 4 L = 3 12	IMT Control- Business continuity plans and disaster recover plans have planned reviews and with additional revisions where there is a known cyber breach. All primary care support systems are assessed						I = 2 L = 3 6	<p>Person Responsible: To be implemented by:</p>		The risk reviewed and noted that the risk of cyber security can never eliminated and is something which is managed continuously via communication to all staff.	03 Sep 2019

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						<p>The following mitigations are in place:</p> <ul style="list-style-type: none"> •Effective SCW Information Security Management System including IT security framework and IT security assurance plan for CCG. •SCW Implementation of Cyber Security framework that is based on Department of Health '10 Steps to Cyber Security'. •Information Governance Privacy Impact Assessment process including the System Level Security policy review. •Annual Penetration Tests aligned with ISO 27001 standards. For year 2017/18, penetration test was performed by NHS Digital during March 											

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						2017 as a part of CareCERT Assure early adopters programme. <ul style="list-style-type: none"> •IT security incident handling policy. •SCW IT business continuity plans and disaster recovery plans. •CareCERT advisories/bulletins from NHS Digital (NHSD) received and actioned by SCW for CCG. •CareCERT Threat notifications by NHSD received and actioned by SCW IT services. •As a part of CareCERT React, guidance is available from NHSD CareCERT team in the event of a cyber-attack. •IT SAR (Service Audit Review) performed annually by external auditors. •CCG Annual IG toolkit return. •Mandatory IG 											

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						training for CCG staff, refreshed annually. •SCW service desk communications highlighting the CCG staff vigilance against cyber threat landscape. •Provision of Cyber Security Report which highlights key activities relating to Cyber security that have taken place within SCWCSU Central IT Services. The report provides high level summary of actions taken to clear identified risks by penetration (Pen) tests and provides threat landscape trends over the last six months and mitigations in place. It also illustrates the implementation of CESG 10 Steps to Cyber Security. •Data Flow Maps											

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						regularly updated to identify information assets and risks and training provided to Information Asset Owners (IAOs and Administrators (IAAs). •PMO office manages project lifecycle of new projects which may include implementation of/or changes to information systems which will prompt completion of Privacy Impact Assessment which are approved by IT Security and Information Governance. •PMO manage projects via PRINCE which is an approved methodology which gives a structured and logical approach to conducting projects when developing new											

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						information assets which should cover project stages such as requirements analysis, functional specification, system architecture and design, creation/selection of software, testing, acceptance and implementation and operation and management.										

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PCC 32	Anticipated services pressures from predicted population growth from Local Borough Plans	BEC Only- We will ensure that Clinical Leadership and patient engagement is at the heart of everything we do and develop a culture that brings to life 'thinking locally, working together.'	19 Jul 2019	<p>Cause Published Local Borough Plans highlight the increased number of dwellings over the next 20 years set out increased demand on existing services which may not have the infrastructure</p> <p>Effect existing providers are unable to deliver effective care as commissioned and patient experience of registration and access is diminished</p>	I = 3 L = 3 9	Revision of the PC Infrastructure Plan to ensure the commissioners are able to predict pressures and establish possible future population needs						I = 3 L = 2 6	<p>Identify with all local authorities the impact in primary care infrastructure from local borough plans, through the sharing of the infrastructure plan on sign off</p> <p>Person Responsible: Ann Bryant</p> <p>To be implemented by: 27 Sep 2019</p>		reviewed - Slough LBP due in Autumn, so risk will be retained until review of this policy	03 Sep 2019
	Risk Owner: Alex Tilley												<p>Deliver additional capacity through ETTF in areas of pressure: Binfield/Warfield/Winkfield areas which border Wokingham</p> <p>Person Responsible: Ann Bryant</p> <p>To be implemented by: 31 Oct 2019</p>			
	Delegated Risk Owner: Ann Bryant												<p>Deliver statement of need to RBWM development lead: Maidenhead town centre and large development at Golf course</p> <p>Person Responsible: Alex Tilley</p> <p>To be implemented by: 29 Nov 2019</p>			

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PCC 30	Primary Care Premises - District Valuer capacity Risk Owner: Alex Tilley Delegated Risk Owner: Ann Bryant Last Updated: 17 Apr 2019	BEC Only- We will commission services that improve the outcome and experience of all our residents by consistently delivering the NHS Constitutional Standards.	11 Apr 2019	Cause District Valuers' offer provide the re-assessment and establishment for the levels of reimbursement to practice under the Primary Care Premises Regulations, the capacity has been reduced in 2019 Effect Practices have outstanding routine assessments of their reimbursement levels and appeals to re-assessments are not being reviewed within expected timelines. New premises and extensions approvals are being delayed due to reduction in capacity at DV and increased demand through capital investment. Creates financial pressures in CCG delegated budget due to delays and delays in ETTF capital investments	I = 3 L = 3 9	SLA with CSU to facilitate and manage the rent reimbursement process - establish with delegated responsibilities						I = 2 L = 3 6	Risk assessment will be carried out on the August rent review Person Responsible: Ann Bryant To be implemented by: 27 Sep 2019		Extended review of rent review report due to workload on ETTF schemes	03 Sep 2019

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PCC 13	General Practice Sustainability Risk Owner: Alex Tilley Delegated Risk Owner: Joanne Greengrass Last Updated: 03 Sep 2019	BEC Only- We will play a proactive role in the development and delivery of an innovative and united Sustainability and Transformation Plan	18 Oct 2016	Cause General Practice is operating under considerable pressure and may not be able to deliver the ambitions set out in the GPFV, national policy and ICS plans Effect Services under pressure will be susceptible to any adverse or unforeseen occurrences resulting in continued lack of transformation and opportunity to build sustainability or ability to change	I = 4 L = 3 12	Primary Care has initiated a GP Forward View Time for Care programme to optimise the support available to practices and to be sure that the focus of is really on what is required by practices to become more sustainable and be part of transformation.						I = 3 L = 2 6	Report on the improvements to resilience investment in 2017/18 to learn the most effective interventions Continue to support practices that have been identified with resilience issues through knowledge and intelligence from the PC dashboard tool Work with Primary Care Networks on the investment of further resilience funds in 2017/18 Propose to PCOG in July investment of 2018/19 resilience funds from the GPFV Person Responsible: Hayley Edwards To be implemented by: 29 Mar 2019	16 Jul 2019 Hayley Edwards General Practice sustainability 'trigger dashboard' has been created to proactively identify practices that potentially have issues regarding resilience and sustainability. Work with the PCNs will develop as they mature.	residual risk reduced to 6 - establishment of the resilience group and robust vulnerability register to PCOG has reduce the likelihood and practice vulnerability	03 Sep 2019

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						Through the GPFV delivery the CCG has supported GP federations, established Primary Care Networks and encouraged practice clusters with some investment to support the space to delivery transformation, these are linked to direct outcomes for each initiative aimed at transforming general practice to greater resilience and integration.										

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PCC 2	Workforce Development for Sustainability Risk Owner: Alex Tilley Delegated Risk Owner: Joanne Greengrass Last Updated: 03 Jul 2019	BEC Only- We will play a proactive role in the development and delivery of an innovative and united Sustainability and Transformation Plan	11 Jul 2016	Cause Workforce in General Practice requires development and future planning to attract clinicians, retain existing workforce and introduce new roles to deliver new career and workforce models. Service delivery depends on high quality and capacity in our workforce. Effect Practice sustainability is weakened without a workforce plan and the retention and development of roles in general practice. Practices may be forced to reduce service offer and risks to staff and patients may increase.	I = 4 L = 3 12	Establishment of workforce training hub across ICS with a focus on primary care: general practice and community workforce development.						I = 3 L = 2 6	Person Responsible: To be implemented by:		updated closure and review of GPFV transformation programme extended capacity and demand support - PCN workforce plans expected end of October 2019	03 Sep 2019

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IMT 24	Windows 10 Enterprise Licences	BEC Only- We will play a proactive role in the development and delivery of an innovative and united Sustainability and Transformation Plan	17 Jun 2019	<p>Cause NHS Digital have committed to providing Windows 10 Enterprise licences to all NHS organisations at zero cost. The first tranche of licences purchased by the Department of Health was insufficient to meet demand.</p> <p>Effect Failure to supply licences will leave the CCG and GP Practices with a cyber security risk as support from Microsoft for Windows 7 patches and updates will cease in January 2021. There would also be significant cost to the CCG for purchasing Windows 10 licences, and associated savings from using the cyber security elements of Windows 10 Enterprise would also need to be realised by the CCG</p>	I = 3 L = 2 6	Deployment of Windows 10 Enterprise to CCG staff. SCW have created a Work Request to scope, plan and cost the deployment of Windows 10 Enterprise.	SoW sent to and approved by EB CCG					I = 2 L = 2 4	<p>Microsoft support for Windows 7 has been extended to January 2021 eliminating the immediate risk to the CCG. SCW will be deploying Windows 10 Enterprise, but using a Windows 10 Professional licence until the W10 Enterprise licences are available. Once issued by NHS Digital, SCW will then remotely upgrade the licence to enable the features of W10 Enterprise</p> <p>Person Responsible: Simon Hodge</p> <p>To be implemented by: 31 Dec 2020</p>	Updated to reflect submitted SOW	11 Oct 2019	

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IMT 25	Use of Fax Machines Risk Owner: Anshu Varma Delegated Risk Owner: Graham Brown Last Updated: 03 Sep 2019	BEC Only-We will commission services that improve the outcome and experience of all our residents by consistently delivering the NHS Constitutional Standards.	17 Jun 2019	Cause National phasing out of the use of Fax machines across the NHS by 2020. Removal of all fax machines, physical and soft, from GP Practices. Effect Failure to remove or cease all fax services by 2020, will cause the CCG and GP Practices in East Berkshire to breach the NHS England Directive. In addition to this, fax services are not guaranteed to be secure or encrypted, therefore posing serious risk of patient identifiable information being exposed to non-authorized people.	I = 4 L = 3 12	Risk Control: Review the IG impact and recommendations prior to proceeding with cessation of fax services in GP Practices. Reviewing the clinical impact of removal of fax services from GP Practices. Understanding alternative options for transmitting information previously sent by fax, working with GP Practices, Acute hospitals, Pharmacies, Care Homes etc.						I = 2 L = 2 4	Establish with CCG the date for full cessation of fax services from GP Practices. Action plan for removal of fax services currently being finalised between IT Services and Digital Transformation. Person Responsible: Graham Brown To be implemented by: 01 Apr 2020	24 Sep 2019 Graham Brown End date 31/03/2020 SoW sanctioned August 2019 IM&T meeting Project underway 24 Sep 2019 Graham Brown End date 31/03/2020 SoW sanctioned August 2019 IM&T meeting Project underway	cause and effect drafted	03 Jul 2019

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IMT 27	Delay in migration of HSCN Risk Owner: Anshu Varma Delegated Risk Owner: Ryan Edridge Last Updated: 20 Sep 2019	BEC Only- We will commission services that improve the outcome and experience of all our residents by consistently delivering the NHS Constitutional Standards.	20 Sep 2019	Cause Delay in the implementation of the HSCN due to issues related to BT and N3. Currently all sites specifically accessing BT Point of Presence (PoP) need to be moved off by August 2020 Effect – if practices are not moved off the transition network then there could be a financial impact on the CCG with a share of the cost. The approximate cost of this to the CCG would be around £70k PCM	I = 4 L = 2 8	East Berkshire do not have any PoP sites on the transition network so this would not apply. In addition East Berkshire have now completed there pilot HSCN site successfully so will have all sites migrated by July 2020						I = 2 L = 2 4	Person Responsible: To be implemented by:			

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PCC 16	Primary Care Premises Sustainability - leases Risk Owner: Alex Tilley Delegated Risk Owner: Ann Bryant Last Updated: 03 Sep 2019	BEC Only- We will play a proactive role in the development and delivery of an innovative and united Sustainability and Transformation Plan	08 Mar 2017	Cause The number of general practice building leases due to expire are not yet known, therefore sustainability of services through forward planning is not able to occur proactively. Work is ongoing to build a picture of general practice ownership so that we can future proof services. Effect This could cause the practice to close or force a tenancy at will which means a very short notice period if the landlord wants to reclaim the building.	I = 4 L = 3 12	We have now received some individual practice lease information (submitted with the healthcheck tool-kit). This information has been logged and all practices with short leases will be contacted and lease discussions commenced. Where practices have not shared this information the PC Project Support Officer will follow it up. This will give us a clearer picture of the lease situation for all practices across East Berkshire so that we can continue to monitor individual situations and action in a timely manner.						I = 3 L = 1 3	Lease information has been added to our Infrastructure plan which will be used to help shape delivery and realised through transformation plans. Information will be shared at Members' Meetings, Practice Manager forums and used as a working tool at the Primary Care Premises sub-group and reported through PCOG and PCC CIC meetings. The infrastructure plan will be completed following revision of the GVA report and presented to PCOG members in May 2019 for approval. Person Responsible: Ann Bryant To be implemented by: 31 Oct 2019		reviewed and confirmed timeline for infrastructure plan	03 Sep 2019

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IMT 21	Check In Screen Risk Owner: Anshu Varma Delegated Risk Owner: Ryan Edridge Last Updated: 03 Sep 2019	BEC Only- We will commission services that improve the outcome and experience of all our residents by consistently delivering the NHS Constitutional Standards.	17 Dec 2018	Cause The East Berkshire GPIT estate has 52 Patient Check-in screens, 14 of which are still running on windows XP. Windows XP is no longer supported by Microsoft. Effect The machines running windows XP present a high risk of virus outbreaks and other cyber security vulnerability's due to no longer receiving security updates.	I = 3 L = 3 9								All 23 Jayex check-in screens to be implemented across East Berkshire practices Person Responsible: Ryan Edridge Admin To be implemented by: 30 Dec 2019		Procurement under way for replacement check in screens	03 Jul 2019

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IMT 26	Primary Care IT Asset Risk Owner: Ryan Edridge Delegated Risk Owner: Last Updated: 03 Sep 2019	BEC Only-We will commission services that improve the outcome and experience of all our residents by consistently delivering the NHS Constitutional Standards.	16 Aug 2019	Cause IT asset such as Laptops are being assigned to other users who are not contracted staff without having any honorary contract in place . Effect IT and Governance policies are being breached as the laptop provide access to sensitive patient data	I = 2 L = 3 6								Send communication to all practices on use of the Laptops and other IT assets. Identify to them that if the asset is being used by third party provider then they must have an honorary contract in place with them. Person Responsible: Ryan Edridge To be implemented by: 04 Oct 2019			