**AGENDA ITEM NO: ……14…………………**

**Date of Meeting: ……26 May 2017…………**

<table>
<thead>
<tr>
<th>TITLE OF REPORT:</th>
<th>Board Assurance Framework – Q4 1 January 2017 to 31 March 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>AUTHOR:</td>
<td>Diane Sankey, Risk &amp; Complaints Manager</td>
</tr>
<tr>
<td>PRESENTED BY:</td>
<td>Su Long, Chief Officer</td>
</tr>
<tr>
<td>PURPOSE OF PAPER:</td>
<td>This paper provides assurance that risks associated with achieving Bolton CCG’s 2016/17 objectives and its 5 year aims are effectively being identified and monitored. Corporate risks assessed as High (15 or above) are routinely reported to the Board. There is just one high operations risk remaining on the CCG risk register at year end.</td>
</tr>
<tr>
<td>(Linking to Strategic Objectives)</td>
<td></td>
</tr>
<tr>
<td>RECOMMENDATION TO THE BOARD: (Please be clear if decision required, or for noting)</td>
<td>The Board is asked to accept the Board Assurance Framework and the assessment of high level corporate risks for Q4 (January to March 2017).</td>
</tr>
<tr>
<td>COMMITTEES/GROUPS PREVIOUSLY CONSULTED:</td>
<td>Various sub-committees review risks on routine basis. Risks identified in the Q4 Corporate Risk Register and Board Assurance Framework have been reviewed by: Quality &amp; Safety Committee IM&amp;T Operational Board Executive Committee Audit Committee members</td>
</tr>
<tr>
<td>VIEW OF THE PATIENTS, CARERS OR THE PUBLIC, AND THE EXTENT OF THEIR INVOLVEMENT:</td>
<td>Risks identified as a result of patient complaints, incidents or service user feedback are added to the Risk Register if necessary and managed as part of the Assurance Framework as appropriate.</td>
</tr>
<tr>
<td>EQUALITY IMPACT ASSESSMENT (EIA) COMPLETED &amp; OUTCOME OF ASSESSMENT:</td>
<td>This standard report relates to risks identified by the CCG and has been considered against the criteria of EIA. EIAs may be necessary for some objectives/risks and these will be considered on an individual basis</td>
</tr>
</tbody>
</table>
1. Executive Summary

1.1 The CCG strategic objectives 2016/17 and the BAF Dashboard for Q4 are outlined below.

## Bolton CCG Objectives

<table>
<thead>
<tr>
<th>Our 5 year Aims are:</th>
<th>Improve quality of care and experience of care</th>
<th>Best value for money through shifting care closer to home</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improve Health Outcomes through reducing gap in life expectancy</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### CCG Objectives 2016/17 to support the 5 year aims are:

1. **Deliver Year 1 of the Bolton Locality Plan**
   - Delivering priority projects to improve health outcomes and reduce health and social care costs

2. **Show that Bolton is truly working together**
   - New type of contract with Bolton FT by April 2016
   - Jointly commission more services with Bolton Council
   - Encourage new models of provision by April 2017

3. **Support more people in their home and communities**

4. **Enable shared health and care records across Bolton**
## Bolton CCG Board Assurance Framework Dashboard - March 2017

<table>
<thead>
<tr>
<th>Strategic Objective</th>
<th>Milestones and Key Performance Indicators</th>
<th>Apr-16</th>
<th>May-16</th>
<th>Jun-16</th>
<th>Jul-16</th>
<th>Aug-16</th>
<th>Sep-16</th>
<th>Oct-16</th>
<th>Nov-16</th>
<th>Dec-16</th>
<th>Jan-17</th>
<th>Feb-17</th>
<th>Mar-17</th>
<th>Comment/ Current Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Deliver Year 1 of Bolton Locality Plan</td>
<td>Appraisal of locality plan (and supporting of CBAs) by all organisations and sign off by H&amp;W</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>HWBB signed off 9.12.16</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Transformation Fund proposal approval</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>£28.8m approved for Bolton March 17. Exec meeting with GM/R &amp; Chief Execs confirmed 6.3.17</td>
</tr>
<tr>
<td></td>
<td>Receipt of Transformation Funding</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<td></td>
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<td></td>
<td></td>
<td>16/17 funding received March 2017</td>
</tr>
<tr>
<td></td>
<td>Implementation of identified work programme milestones for 16/17</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Implementation of all 16/17 schemes achieved</td>
</tr>
<tr>
<td>2. Show that Bolton is truly working together: New type of contract with Bolton FT,</td>
<td>Aligned Incentive Contract in place and monthly monitoring</td>
<td></td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td>17/18 contract signed</td>
</tr>
<tr>
<td>jointly develop with Bolton Council new commissioning models</td>
<td>Agreement of LCO model for phased implementation from 17/18</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>LCO model to be developed around the 9 agreed organisations</td>
</tr>
<tr>
<td></td>
<td>Development of integrated commissioning models for implementation from 17/18</td>
<td></td>
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<td></td>
<td>CCG &amp; Council commissioning leads are working collaboratively across a number of programme areas - with lead roles in place. Discussions about more formal arrangements are taking place with PAB Exec</td>
</tr>
<tr>
<td>3. Support more people in their own homes and communities, improve patient safety</td>
<td>Establish 7 day GP access</td>
<td></td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td>15/16: 70.1% (excl.Mental Health or Intermediate Care), Historic performance including MH and IC is in region of 87%. target set for 16/17: 88.6%</td>
</tr>
<tr>
<td>through better GP access, community services, INT, etc.</td>
<td>People still in own home 91 days post discharge from reablement</td>
<td>78.80%</td>
<td></td>
<td>79.00%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Data for Quarter 3 due June 2017</td>
</tr>
<tr>
<td></td>
<td>INT Activity meeting Plan</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Ongoing work to strengthen INTs working in primary care</td>
</tr>
<tr>
<td></td>
<td>Reduced admissions to permanent placements in residential/nursing homes</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
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<td></td>
<td>15/16: 827 admissions per 100,000. Target set for 16/17:768.1 admissions per 100,000. Position improved from Q3 onwards</td>
</tr>
<tr>
<td></td>
<td>Hospital Activity Reduction (non elective)</td>
<td></td>
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<td></td>
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<td></td>
<td></td>
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<td></td>
<td></td>
<td>Target set: 2.1% reduction for non elective admissions compared to 15/16 outturn. Full year position: 0.6% reduction. Position improved from Q3 onwards</td>
</tr>
<tr>
<td>4. Enable shared health &amp; social care records across Bolton</td>
<td>Partners engaged and signed up to information sharing</td>
<td></td>
<td></td>
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<td></td>
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<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>14 of 50 GP Practices signed up by March 2017. Info Sharing Protocol signed by Partner organisations</td>
</tr>
<tr>
<td></td>
<td>Communications messages developed and shared with staff, professionals and patients</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Engagement ongoing from Aug 2016 - website now live</td>
</tr>
<tr>
<td></td>
<td>System live in early adopter practices</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td>3 Early Adopter practices covering 30% population signed Info Sharing Agreement but delayed implementation of live system due to a number of technical issues. These are being worked through and revised timeline being identified</td>
</tr>
<tr>
<td></td>
<td>System in use in A&amp;E and Out of Hours</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**KEY**
- Green: Achieved
- Yellow: On Track
- Red: Off Track

*Data source for this measure still being updated since migration to liquid logic by Bolton Council Sept 2016

**ICS&P Group agreed original target for this measure was unachievable due to baseline year activity changes. Therefore, plan will be amended for 2017/18*
2 CCG corporate High risks Quarter 4 2016/17

2.1 There was one high operational risk on the corporate risk register in Q4 relating to IM&T support to CCG and member practices Risk No OR2. This is included in the table below, together with other significant risks previously reported to the Board throughout 2016/17. Further details of Risk No OR2 can be found on the last page of this report.

<table>
<thead>
<tr>
<th>Risk No</th>
<th>Description</th>
<th>Qtr 4 15/16</th>
<th>Qtr 1</th>
<th>Qtr 2</th>
<th>Qtr 3</th>
<th>Qtr 4 16/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>SOR6</td>
<td>Shift Resources – Failure of stakeholders to engage in QIPP and failure to deliver Financial Plan in year</td>
<td>15</td>
<td>15</td>
<td>15</td>
<td>15</td>
<td>12</td>
</tr>
<tr>
<td>FR5</td>
<td>Cost shifting between health and social care budgets</td>
<td>15</td>
<td>15</td>
<td>15</td>
<td>15</td>
<td>12</td>
</tr>
<tr>
<td>FR6</td>
<td>Failure to deliver strategic financial balance across health economy, inability to deliver commissioning plans, strategic objectives and risk to CCG authorisation.</td>
<td>15</td>
<td>15</td>
<td>15</td>
<td>15</td>
<td>0</td>
</tr>
<tr>
<td>OR2</td>
<td>Failure of GMSS to deliver IM&amp;T support to CCG and Member Practices and help drive strategic direction of GMH&amp;SC Partnership, risk to business continuity.</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>16</td>
</tr>
<tr>
<td>OR6</td>
<td>Poor Performance and failure of GMSS to deliver SLAs and provide VFM</td>
<td>6</td>
<td>6</td>
<td>6</td>
<td>16</td>
<td>6</td>
</tr>
<tr>
<td>OR15</td>
<td>Loss of control due to establishment of lead arrangements with other partner organisations</td>
<td>16</td>
<td>16</td>
<td>16</td>
<td>16</td>
<td>12</td>
</tr>
</tbody>
</table>

3 Other key issues from corporate risk register Quarter 4 2016/17

3.1 No new risks were added in Q4. There were a number of reductions and 3 risks were closed, including risks relating to QIPP delivery and savings and meeting the 2016/17 Financial Plan.

3.3 Risks/hazards relating to other stakeholders that scored 15 or above in Q4 include:

- SOR3.3 Potential closure or suspension of care or nursing homes due to regulator concerns or financial sustainability (16)
- SOR3.8 A&E clinical staffing resilience and difficulties in recruitment (16)
- SOR4.1 A&E 4 hour target (15)
- SOR4.11 NWAS response times (20)
- SOR4.16 Ambulance Handovers (20)

4 BAF and Risk Register from April 2017

4.1 Strategic objectives for 2017/18 have been agreed by Board members and key risks discussed at a recent Board Development meeting, linked to the delivery of Year 2 of the Bolton Locality Plan.
4.2 It was agreed at the Audit Committee held on 19 April to change the format of
the BAF and CCG Risk Register from 1 April 2017. The BI Team are supporting this
piece of work and will help to improve the presentation of the BAF to the governing
body from Q1 onwards.

5 Recommendations

5.1 NHS Bolton Clinical Commissioning Group Governing Body is asked to
accept the Board Assurance Framework for Q4 and High risks (15 or above)
from the corporate risk register.

Name of person presenting report: Su Long
Title: Chief Officer
Date: 26 May 2017
## STRATEGIC OBJECTIVE

Deliver Year 1 of the Bolton Locality Plan - Delivering priority projects 2016/17 to improve health outcomes and reduce health and social care costs

## RISK DESCRIPTION

- Fail to deliver improvement in population health outcomes.
- Fail to deliver a financially and sustainable care system across the locality.
- Fail to recruit to appropriate workforce.

### Risk Management Plan

<table>
<thead>
<tr>
<th>Risk Owner</th>
<th>Board Risk Sponsor</th>
<th>Responsible Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Melissa Laskey</td>
<td>Su Long</td>
<td>Governing Body</td>
</tr>
</tbody>
</table>

### Risk Appetite

- High

### Risk Impact and Likelihood

<table>
<thead>
<tr>
<th>Gross Risk (without mitigations in place)</th>
<th>Current Risk</th>
<th>Target Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Impact</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>Likelihood</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>Risk Score</td>
<td>25</td>
<td>12</td>
</tr>
<tr>
<td>Date</td>
<td>01 April 2016</td>
<td>31 March 2017</td>
</tr>
</tbody>
</table>

### Risk Movement

- Risk reduced to 12 in Q4 due to formal approval of Transformation Fund proposal and receipt of monies in March for 2016/17.

### Last Reviewed

- 30.04.17

### Next Review Date

- n/a

### Existing Controls

- System governance infrastructure in place, engaging with all key health and social care partners within the locality:
  - Health & Wellbeing Board
  - Health & Wellbeing Executive
  - System Sustainability and Transformation Board (SSTB)
  - Strategy and Planning Groups for each work programme area, reporting into the SSTB
  - Joint Leadership Group
  - Commissioning Partnership Board

- CCG governance in place:
  - CCG Governing Body and Executive
  - Primary Care Joint Commissioning Committee

- Key documentation:
  - Bolton Health & Care 5 Year Locality Plan - agreed by Health & Wellbeing Board Oct 2016
  - Transformation Fund Investment Agreement - agreed by Health and Wellbeing Board
  - PMO documentation, including highlight reporting and dashboards, with remedial Bolton Quality Contract
  - Signed two year contracts with Bolton FT and GMW

### Assurances to Board

- System assurance:
  - Monthly highlight reports and dashboards to SSTB
  - Health and Wellbeing Board and Executive oversight
  - Multi-agency quarterly milestone delivery submissions to GM Health & Social Care Partnership (GMHSCP)

- CCG assurance:
  - Programme specific reports to Governing Body and Executive
  - Senior CCG representation at system and GM groups

### Gaps in assurance

- Full completion of PMO documentation by work programme leads (high level plans in place)

### Actions Required

- Completion of detailed implementation plans for every locality plan work programme area monitored
- Review of locality plan milestones following delay in formal approval of Transformation Fund monies
- GMHSCP to provide assurance and mobilisation of GM programmes of work key to delivery of Bolton Locality Plan - raised at joint session with GMHSCP in December 2016, ongoing
- GM decision on funding for IT requirements - key enabler for Bolton Locality Plan
| Identification of resource to support workforce enabler programme |
STRATEGIC OBJECTIVE

Show that Bolton is truly working together:
New type of contract with Bolton FT from 2016
Jointly develop with Bolton Council new commissioning models for fully integrated local based services and secondary care across GM footprint or NW sector

RISK DESCRIPTION

Lack of transformation and resistance to change, disengagement from Providers resulting in relationship breakdown. Lack of collaborative governance structures and unintended consequences as a result of new contracts e.g. financial impact or impact on quality or patient experience

<table>
<thead>
<tr>
<th>Risk Owner</th>
<th>Board Risk Sponsor</th>
<th>Responsible Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Melissa Laskey</td>
<td>Annette Walker</td>
<td>Governing Body</td>
</tr>
</tbody>
</table>

Risk Appetite

<table>
<thead>
<tr>
<th>Impact</th>
<th>Likelihood</th>
<th>Risk Score</th>
<th>Date</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>4</td>
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<td></td>
<td>4</td>
<td>3</td>
</tr>
</tbody>
</table>

Existing Controls

- System Sustainability and Transformation Board (SSTB)
- Strategy and Planning Groups for each work programme area, reporting into the SSTB
- Health & Wellbeing Executive
- Health & Wellbeing Board
- CCG Executive Committee
- Commissioning Partnership Board (Integration)
- Integrated Commissioning Groups
- Joint Leadership Group
- Finance & QIPP Committee
- Bolton Health & Care 5 Year Locality Plan, Financial Plan
- Bolton Quality Contract inc GP Incident Reporting (Early Warning System)
- Contracts for 2017/19 signed by Bolton FT, GMW and BMI Nov 2016

Assurances to Board

- Monthly reports to Executive Committee
- Reports to Health & Wellbeing Executive and Board
- Monthly Finance, QIPP and Corporate Performance Reports to Governing body
- Contracting Progress report to CCG Board 27 Jan 2016
- Aligned Incentive Contracting approach implemented with Bolton FT and year 2 mobilisation plan now in delivery

Gaps in assurance

- GM commissioning review underway: outcome of programme to help to inform local commissioning integration - outputs due May 2017

Actions Required

- Continued Executive oversight and regular updates to Board
- Workforce resilience and skill mix programme
- Kings Fund to continue to work with leadership across the locality to support the design of integrated commissioning and the Local Care Organisational (LCO) model
### Strategic Objective

Support more people in their own homes and communities and improve patient safety through better access to GP primary care and community services including INTs.

### Risk Description

Capacity and skills gaps within primary and community workforce. Lack of appropriate estates and facilities. Lack of engagement by service users to embrace the shift from secondary care to care provided at home.

<table>
<thead>
<tr>
<th>Risk Owner</th>
<th>Board Risk Sponsor</th>
<th>Responsible Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lynda Helsby</td>
<td>Stephen Liversedge</td>
<td>Governing Body</td>
</tr>
</tbody>
</table>

#### Risk Appetite

<table>
<thead>
<tr>
<th></th>
<th>Impact</th>
<th>Likelihood</th>
<th>Risk Score</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross Risk</td>
<td>5</td>
<td>4</td>
<td>20</td>
<td>01 April 2016</td>
</tr>
<tr>
<td>Current Risk</td>
<td>4</td>
<td>4</td>
<td>16</td>
<td>31 March 2017</td>
</tr>
<tr>
<td>Target Risk</td>
<td>4</td>
<td>3</td>
<td>12</td>
<td>31 March 2017</td>
</tr>
</tbody>
</table>

#### Risk Movement

No change from Quarter 4

<table>
<thead>
<tr>
<th>Last Reviewed</th>
<th>Next Review Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>30.04.17</td>
<td>n/a</td>
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</tbody>
</table>

#### Existing Controls

- System Sustainability and Transformation Board (SSTB)
- Health & Wellbeing Executive
- CCG Executive Committee
- Primary Care Joint Commissioning Committee
- Conflicts of Interest Committee
- Commissioning Partnership Board (Integration)
- Strategic Estates Group
- Communications & Engagement Strategy
- Bolton Health & Care 5 Year Locality Plan, Financial Plan
- Bolton Quality Contract
- Primary Care Strategy Group
- Strategic IT Group
- Workforce Strategy Group

#### Assurances to Board

- Quarterly/Monthly reports to Executive Committee and Governing body
- Reports to Health & Wellbeing Board
- Ongoing monitoring of Bolton Quality Contract
- Contract Monitoring established Q2 for BQC Std 20 INT (primary care & community services)
- Contract meeting Nov 2016

#### Gaps in assurance

none identified

#### Actions Required

- Continued Executive oversight and regular updates to Board
- Evaluation of GP Federation and seven day service (weekend and OOH)
- Shared care records programme - through Health and Social Care Informatics Group
- Workforce programme
## STRATEGIC OBJECTIVE

**Enable shared health & social care records across Bolton**

## RISK DESCRIPTION

Lack of governance structures, engagement, joint information governance framework and IG issues with partner organisations

Failure to implement will delay joint working and impact on quality of care provided to patients

## Risk Description Table

<table>
<thead>
<tr>
<th>Risk Description</th>
<th>Impact</th>
<th>Likelihood</th>
<th>Risk Score</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross Risk</td>
<td>4</td>
<td>4</td>
<td>16</td>
<td>01 April 2016</td>
</tr>
<tr>
<td>Current Risk</td>
<td>4</td>
<td>4</td>
<td>16</td>
<td>31 December 2016</td>
</tr>
<tr>
<td>Target Risk</td>
<td>4</td>
<td>3</td>
<td>12</td>
<td>31 March 2017</td>
</tr>
</tbody>
</table>

## Risk Movement

No change from Quarter 3

## Last Reviewed

30.04.17

## Next Review Date

n/a

## Existing Controls

- BCR Programme Board
- Bolton Partners Informatics Strategy Delivery Group
- CCG Executive Committee
- Health & Wellbeing Executive
- Commissioning Partnership Board (Integration)
- Communications & Engagement Strategy
- Bolton Health & Care 5 Year Locality Plan, Financial Plan
- Professional (Clinical & Social Care) Reference Group - meeting monthly
- Technical instance of CareCentric now up and running

## Assurances to Board

- Monthly updates to Executive Committee and Governing body
- Reports to Health & Wellbeing Board
- Update report to July Board meeting

## Gaps in assurance

None identified

## Actions Required

- Continued Executive oversight
- Public and GP Member Practices engagement events ongoing
- Information Sharing Agreements have been signed off by all early adopter practices and local organisations
- Work ongoing with NHS Digital to release patient data to populate BCR
- Delayed progress due to number of technical issues
### OBJECTIVE 5 - COMPLIANCE WITH OPERATIONAL AND STATUTORY RESPONSIBILITIES - Bolton CCG Operational Risks

<table>
<thead>
<tr>
<th>Ref</th>
<th>Priorities and CCG Land</th>
<th>Principal Risks</th>
<th>Gross Risk</th>
<th>Workstream</th>
<th>Measurement</th>
<th>Existing Controls</th>
<th>Gaps in Controls</th>
<th>Current Risk Rating</th>
<th>Positive Assurances to Board</th>
<th>Gaps in Assurances</th>
<th>Further Action needed?</th>
<th>Target Risk Score</th>
<th>Review Date</th>
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<td>OR2</td>
<td>Maintain an effective and secure IM&amp;T infrastructure via CSU to support the CCG and member practices. A Walker &amp; Birch</td>
<td>Failure of GMSS to deliver IM&amp;T support to CCG and Member Practices. Lack of local skilled and technical expertise to drive IM&amp;T agenda forward and strategic direction of GMPHSC Partnership making business continuity</td>
<td>20</td>
<td>Service specifications in place with GMSS. Local IM&amp;T Operational Board. GP IT priority work programmes being reviewed and prioritised.</td>
<td>Regular monitoring of GMSS delivery of service support, overseen by CCG Executive.</td>
<td>CCG Exec and IM&amp;T Operational Board. GM IM&amp;T Operations board and programme board maintain oversight of performance. GM IM&amp;T Assurance group maintain oversight of both groups and of the finances.</td>
<td>None identified</td>
<td>4</td>
<td>Minutes from GMSS Ops Board &amp; Programme Board submitted to the Bolton IM&amp;T Ops Board. Detailed review of services to be undertaken</td>
<td>Lack of Senior leadership and assurance with implementation of new GP IT Operating Model</td>
<td>CCG is closely involved in redrafting of the service specifications in line with the new GP IT Operating model 2017/18 service model to be agreed. Agreement to GMSS Transformation Plan. CCG decision to continue with GMSS or deliver local arrangements. RISK INCREASE FROM 9 TO 16 Q4.</td>
<td>4</td>
<td>Jun-17</td>
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