

# BNSSG ICB Board Meeting

**Date:** Thursday 4<sup>th</sup> May 2023

**Time:** 12:30 – 15:15

**Location:** Somerset Hall, the Precinct, High Street, Portishead, BS20 6AH

<b>Agenda Number :</b>	6.3	
<b>Title:</b>	BNSSG Integrated Care Board (ICB) Corporate Risk Register	
<b>Confidential Papers</b>	<b>Commercially Sensitive</b>	No
	<b>Legally Sensitive</b>	No
	<b>Contains Patient Identifiable data</b>	No
	<b>Financially Sensitive</b>	No
	<b>Time Sensitive – not for public release at this time</b>	No
	<b>Other (Please state)</b>	N/A
<b>Purpose: Decision</b>		
<b>Key Points for Discussion:</b>		
The intention of this paper is to provide a brief summary of the processes undertaken to update the BNSSG Integrated Care Boards (ICBs) Corporate Risk Register (CRR).		
<b>Recommendations:</b>	To note the work progressed to update the BNSSG ICB CRR and review the risks escalated.	
<b>Previously Considered By and feedback :</b>	The ICB Board approved the BNSSG ICS Risk-Management Framework in March 2023.	
<b>Management of Declared Interest:</b>	There are no declared interests in the development of the proposed SRR.	
<b>Risk and Assurance:</b>	The purpose of the CRR is to provide assurance to the ICB Board that the organisation is appropriately managing any risks to it fulfilling its statutory functions.	
<b>Financial / Resource Implications:</b>	The monitoring and active management of the CRR will need to be resourced by all directorates in the ICB.	
<b>Legal, Policy and Regulatory Requirements:</b>	It is a regulatory requirement that ICBs have a robust plan for the management of corporate risk.	
<b>How does this reduce Health Inequalities:</b>	The CRR provides the infrastructure and mechanisms to ensure that the causes of risks to the ICB delivering its statutory functions – these include tackling inequalities and improving outcomes. The CRR will be an important mechanism to seek assurance that the activity of the ICB contributes to reducing health inequalities, but also to ensure that risks to health inequalities widening are being appropriately managed.	

<b>How does this impact on Equality &amp; diversity</b>	As above. The CRR will be an important mechanism to seek assurance that the activity of the ICB does not adversely impact any populations or widens gaps in equal access to health and care services.
<b>Patient and Public Involvement:</b>	There has been no patient or public involvement in the production of the updated CRR.
<b>Communications and Engagement:</b>	The CRR is a key component of the ICBs Risk-Management Framework and Risk-Management Policy. Both of these documents are/will be published on the ICBs website.
<b>Author(s):</b>	Ellie Wetz, ICS Development Programme Manager
<b>Sponsoring Director / Clinical Lead / Lay Member:</b>	Sarah Truelove, Deputy Chief Executive and Director of Finance

## Agenda item: 6.3

# Report title: BNSSG ICB Corporate Risk Register

### 1. Background

When the ICB was established, the BNSSG CCG Governing Body's Corporate Risk Register (CRR) was novated and adopted by the ICB Board. The Health & Care Act 2022 established ICBs as statutory NHS organisations responsible for developing a plan for meeting the health needs of the population, managing the NHS budget and arranging for the provision of health services in the Integrated Care System (ICS) area. Therefore, the ICB has multiple functions in the management of risk:

- As a statutory NHS organisation: the management of **corporate risk** on a **Corporate Risk Register**.
- As the accountable body for provision of all health services in the ICS: the management of **system risks** on an **ICS/System Risk Register**.
- As a delivery partner (see **Appendix A**) of the Integrated Care Strategy: the management of **strategic risk** on a **Strategic Risk Register**.

The ICB Executives have been working with their teams in line with the ICB Risk Management Policy<sup>1</sup> to review the current CRR and disaggregate the corporate risks from the system risks. A workshop was held with the ICB Executive Team and the ICB Senior Development Forum to support them with this exercise.

The development of the Strategic Risk Register is covered in a separate paper to the ICB Board on 04 May 2023.

The ICS/System Risk Register will be prepared for the ICB Board to review at the meeting on the 02 June 2023.

### 2. The BNSSG Corporate Risk Register

See **Appendix B**. All risks presented to the ICB Board have scored 15 or above and are included with the approval of the lead ICB Executive for that risk. The ICB Board needs to be assured that the risks escalate on the CRR are being appropriately managed.

### 3. Limitations

This paper does not include a recommendation for a shared IT platform to record and monitor system risks such as Datix. However, the ICB has procured a module on Datix for the recording and management of corporate and system risk. The Chief Medical Officer and Chief Nursing Officers are using this Datix module to record and manage the corporate and system risks identified by their teams. A report can be generated from this module which can export the relevant data into the CRR template. This is a test of change for the potential future management of the ICB CRR; learning will be shared before it is adopted by other directorates noting the human resource required to manage this system has not been identified.

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<sup>1</sup> <https://bnssg.icb.nhs.uk/about-us/governance/governance-handbook/#module-10> – to be updated to reflect the ICBs Risk-Management Framework

Any future requirements for Datix to be utilised to automate the recording and management of ICS/System risk will need to be considered with system partners. It is currently proposed that the Strategic Risk Register, the CRR and ICS/System Risk Registers are recorded on excel spreadsheets noting the resource requirement to keep these accurately updated and the potential risk of version control.

#### **4. Financial resource implications**

The monitoring and active management of the CRR will need to be resourced by all directorates in the ICB.

The activity required to mitigate or control corporate risk may have a financial impact. These will be managed in accordance with the agreed architecture of the Decision-Making Framework.

#### **5. Legal implications**

It is a regulatory requirement that ICBs have a robust plan for the management of corporate risk.

#### **6. Risk implications**

The purpose of the CRR is to provide assurance to the ICB Board that the organisation is appropriately managing any risks to it fulfilling its statutory functions.

#### **7. How does this reduce health inequalities?**

The CRR provides the infrastructure and mechanisms to ensure that the causes of risks to the ICB delivering its statutory functions – these include tackling inequalities and improving outcomes. The CRR will be an important mechanism to seek assurance that the activity of the ICB contributes to reducing health inequalities, but also to ensure that risks to health inequalities widening are being appropriately managed.

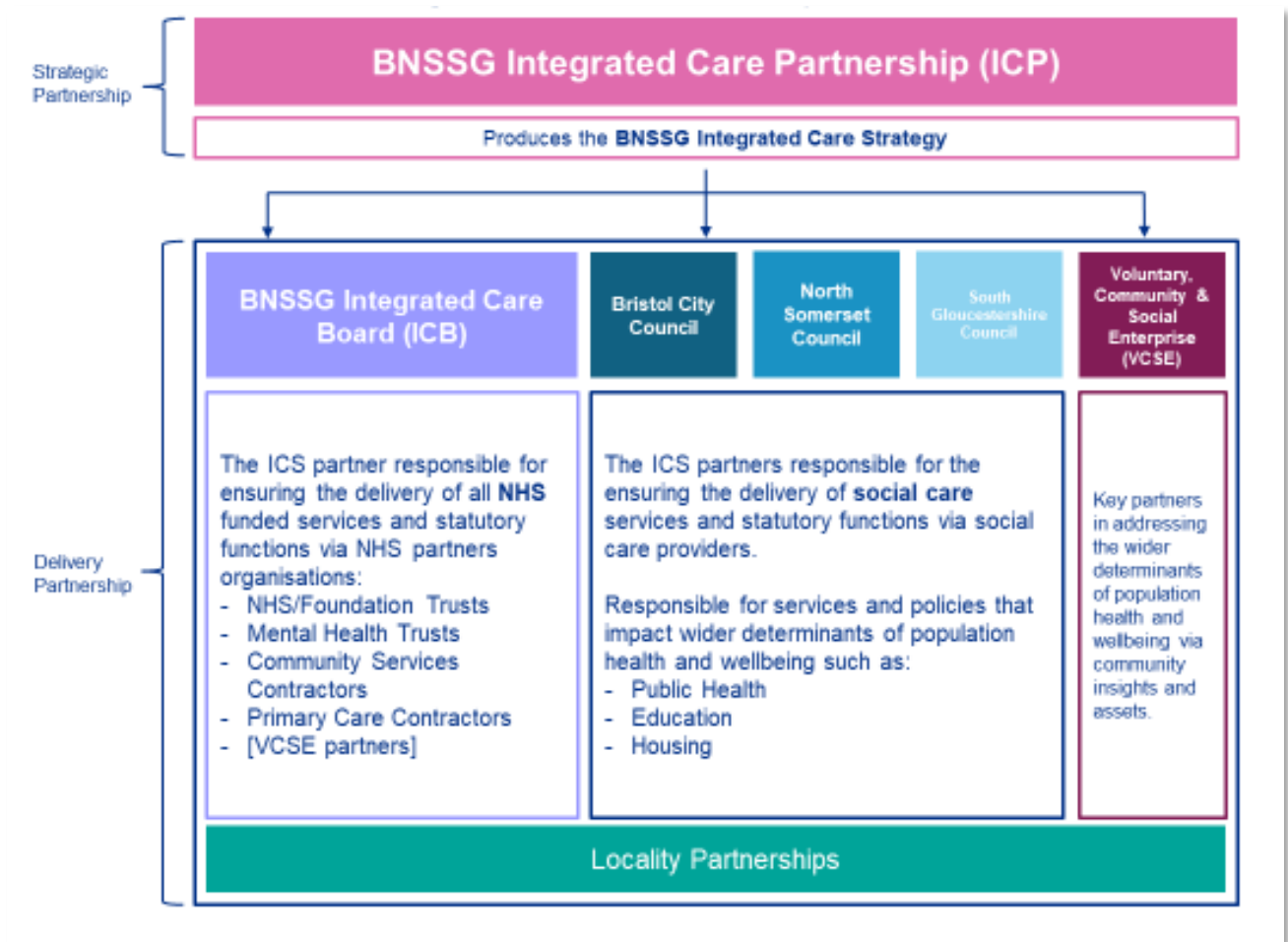
#### **8. How does this impact on Equality and Diversity?**

The CRR is an important mechanism to seek assurance that the activity of ICB does not adversely impact any populations or widens gaps in equal access to health and care services and does not overtly or covertly promote activity that disadvantages minority groups.

#### **9. Consultation and Communication including Public Involvement**

There has been no patient or public involvement in the production of the updated CRR.

### **Appendix A: BNSSG ICS**



## Appendix B: Corporate Risk Register

The Corporate Risk Register features risks assessed as over the risk threshold (15) to the delivery of the ICB's strategic objectives, statutory duties and plans. It sets out the controls (actions) that have been put in place to manage the risks and planned actions to further reduce the risks and an assessment of current performance. The Corporate Risk Register is reviewed by the ICB Board quarterly and reviewed by Committees monthly. Risk is assessed by multiplying the likelihood of a risk materialising by the impact of a materialising using the risk assessment matrix set out in the ICB Risk Management Framework. Risks are mapped against the ICB risk appetite to provide an indicative acceptable risk level. Where a risk maps to more than one principal objective the lowest level of risk appetite is given.

Risk ICB System or Both	MSD PM	Risk Description (if cause than likelihood) resulting in (effect/impact)	Principal objective	Control or mitigation	Lead (Lead name)	Risk Owner	Current performance	Target performance	Score for performance	Management actions already in place to mitigate risk (current controls)	Progress (Action)	Current status	Score for current status	Target score with all actions in place	Score for current status with all actions in place	Change of controls	Actions to be taken (once these are completed they should be moved to actions in place)	Comment on progress	Is this risk a critical risk to the ICB?	Risk appetite	Risk ownership	Impact on the ICB	Start date	End date
<b>Primary and Intensive Care</b>																								
ICB	Primary Care Development - Delegation PCC48	There is a significant risk that there is not sufficient capacity in the Commissioning Hub to integrate effectively with the ICB. This could impact the Hub's ability to deliver system and place-based benefits and subject ICB ways of working, resulting in no change to the commissioning approach for pharmacy, optometry and dentistry.	N/A	29.11.22	David Jarrett	Dave Jarrett/Jenny Booker	5	4	21	<ul style="list-style-type: none"> <li>22.11.22 Commissioning Hub MOU developed and agreed with BNSG setting out expectations</li> <li>26.10.22 BNSG ICB has cross-directorate planning group that will look to build local capacity and capability to undertake local contractor integration, service quality and transformation programme areas working with the NHSE regional team.</li> </ul>	5	3	10	6	1	PCC	<ul style="list-style-type: none"> <li>22.11.22 Independent evaluation of Commissioning Hub.</li> <li>26.10.22 Confirm core hub purpose and priorities.</li> <li>26.10.22 Develop ICB capacity and capability to support delegation</li> <li>25.09.22 Develop relationship between Commissioning Hub and local primary care teams to support integration with ICB ways of working</li> <li>25.09.22 The running cost controls in place will mean that BNSG ICB will have to review its current resource allocations in order to support this work.</li> <li>22.12.22 NHSE asked by ICB the impact this will have, awaiting national feedback.</li> </ul>	<ul style="list-style-type: none"> <li>24.01 - Commissioning Hub MOU agreed with NHSE for transition plan for 'recovery' during self commissioning under a risk of work. Workship held with Commissioning Hub staff on 11.03.23 to develop working relationships with ICBs.</li> <li>28.02.23 NHSE South West team have provided ICBs with the list of Commissioning Hub functions from April. Work to develop an MOU is in progress.</li> <li>22.01.23 Letter received from NHSE confirming NHSE staff to transfer to ICB hosted arrangement by July 2023 and that these staff will not be subject to NHSE organisational change. Risk score reduced to reflect this new assurance</li> </ul>			Open	Mar-22	Mar-23	
Both	MO33	There is a risk that there will be an overpend on the allocated budget for primary care prescribing for 20-23. This is due to uncertainty around the volatility of NCSO & Category M price fluctuation. The degree of inflation that may occur on drug prices and the degree of growth in prescribing in certain areas such as subcutaneous may be higher than predicted with new drug indications and technologies.	ICB	20/02/2023	John Mather	John Mather	5	4	20	Prescribing quality scheme includes financial savings scheme has been agreed and modified with practices. Reports in place to monitor spend across different therapeutic areas for any growth in prescribing.	5	3	10	6	1		<ul style="list-style-type: none"> <li>20/02/23. Healthcare continues to increase</li> <li>21/02/23. As per previous month, Region have indicated that money will be coming down to support the overpend from NCSO &amp; Category M increases. (all back to reduce costs when confirmed)</li> <li>26/02/23 continues to increase further, being monitored and discussed with finance colleagues.</li> <li>26/02/23. NCSO costs continue to decrease</li> <li>21/12/22. Confirms to be a problem and anticipate increased costs over next few months.</li> <li>26/02/23. Confirms to be a problem, further cost reductions. Can M also covered from the OTC.</li> </ul>			Open	May-23	Mar-23		
<b>Transformation, Data and Digital</b>																								
	Cyber Security/attack	There is a risk that without significant focus on Cyber Security measures the ICB are open to cyber attack.			Deborah El-Sayed	Andy Carpenter	4	5	20	<ul style="list-style-type: none"> <li>Our cyber risks are monitored as part of the Data Protection toolkit</li> <li>Internal Audit plans are focused on monitoring our progress</li> <li>Our cyber security plans include social engineering and Technical components.</li> <li>The ICB is fully compliant with DTAC</li> <li>Improved training plans are in development</li> <li>System wide ICB cyber group plans are being developed</li> <li>From the completion of the initial phase of cyber risk we plan to continue under ongoing review for improvements in light of new threats</li> </ul>	3	5	10			<ul style="list-style-type: none"> <li>All identified actions are in place and under constant review.</li> <li>Future additional investment into Cyber for both the ICB and the system has been agreed by the ICB Board to be covered as a priority as part of the development of the Digital Strategic Outline Business Cases</li> </ul>	<ul style="list-style-type: none"> <li>ICB Board Development session is planned for June 2023</li> <li>ICB Cyber Panel has commenced April 2023 building on and formalising the work of the previous BNSG Cyber Group</li> </ul>			Open		Apr-23		
<b>People</b>																								
Both		There is a risk that the ICB will start to lose its talented people due to the uncertainty caused by the recent communication which set out a requirement to reduce running costs by 20% in 24/25, increasing to 30% in 25/26. This will reduce the ability of the ICB to support the delivery of the ICB Strategy.		05/04/2023	Jo Hicks	Jo Hicks	5	5	20	Regular meeting held with the Strategic Development Forum (Senior leaders) to develop a plan for the approach to be taken. ICB organisation development plan in development with a communication plan alongside.	4	5	20	5	2	None	<ul style="list-style-type: none"> <li>18/05/23 - Discussion at ICB about the requirement</li> <li>18/05/23 - discussion at system Senior Leadership engagement event focused on deliverables for 23/24 about the requirement and agreeing next steps.</li> <li>24/05/23 - engagement with organisation commences at HMGMPY</li> </ul>			Open	01/03/2024	Apr-23		