

Risk ID	Risk Area	Risk Owner (Executive)	Main responsible committee	Risk Manager	Title	Risk Description	Actions with timescales	Comments on risk appetite
SD0002	Operational	Chief Operating Officer	Executive Committee	Head of Corporate Business and Governing Body Secretary	Business continuity and major incident preparedness	Risk that Surrey Downs CCG will be unable to discharge its responsibilities as a Category 2 responder in the event of a Major Incident, and will not have generally robust on-call arrangements	By 31 st October – Develop a business continuity plan; By 31 st October - develop a response plan specific to Category 2 responsibilities. CCG is taking part in South of England Training and scenario planning during September and October.	This risk is being actively managed
SD0003	Strategic	Chief Officer	Governing Body	BSBV Programme Manager	Better Services Better Value programme	Risk that work programmes relating to the Better Services Better value Programme and Epsom General Hospital and services in south west London are not aligned and that quality of services for patients in all settings (in-patient / community / elective / urgent) is affected.	15 Aug - Surrey wide collaborative meeting to discuss BSBV and quality standards. The aim of this will be to explore achieving consistency of standards across Surrey and the BSBV programme. 22 Aug – Next BSBV programme Board 3rd Sept Exec 6th Sept – Discussed at Governing Body Seminar 12th OR 18th September – proposed dates for Local Committee of CCGs. 27th September – CCG Governing Body End Sept – proposed start of consultation.	This risk is being actively managed, however alternative options are being explored should it be felt that BSBV did not offer the best solution.
SD0007	Financial	Chief Finance Officer	Audit, Corporate Governance and Risk Committee	Head of Finance	Financial balance in 2013-14	Risk that SDCCG inherits an unforeseen deficit as a result of the under-accrual for CHC retrospective claims	The CCG has been actively seeking oversight of accruals to understand position. However, the final position is still not known and remains a risk until concluded. There are no further actions the CCG can take at this time.	This risk is being actively managed and should be concluded August 2013 but is contingent on closure from the Department of Health.
SD0008	Operational	Chief Operating Officer	Executive Committee	Head of Performance	EDICS - Over Performance	There is a risk that it will not be possible to agree closing activity figures with this now terminated contract	The CCG now has much more effective oversight of this contract and this has been prioritised by the contracting team.	This risk is being actively managed
SD0013	Operational	Chief Operating Officer	Executive Committee	Transition Manager	Recruitment and talent management	Unable to recruit to full CCG structure which could limit ability of CCG to deliver key work streams and core functions.	Remaining posts being recruited to during August and September. For review at REMCOM on the 27th September	This risk is being actively managed
SD0014	Financial	Chief Finance Officer	Audit, Corporate Governance and Risk Committee	Head of Finance	Financial Control 2013-14	CCG is unable to meet its financial control target 2013_2014	The appointment of finance and locality leads ensures more resource available to directly help support the delivery of financial control. Formal monitoring of key milestones as part of Financial recovery Plan being developed.	This risk is being actively managed
SD0016	Financial	Chief Operating Officer	Executive Committee	Head of Service Redesign	QIPP Programme Delivery	The CCG is unable to implement sufficient schemes to deliver QIPP targets in 2013-2014 and / or the CCG fails to deliver anticipated savings from QIPP programme.	Developing Out of Hospital Strategy to meet QIPP gap of approximately £4m (this was presented to Executive Committee on 2/7/2013 and the 19/7/2013 Governing Body); Engagement process in September with all stakeholders.	This risk is being actively managed

Jul-13		
3	3	9
4	3	12
4	3	12
4	2	8
2	2	4
4	3	12
4	3	12

Sep-13		
3	4	12
4	3	12
4	3	12
3	3	9
2	2	4
4	3	12
4	3	12

Trend
Deteriorating
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Static

Risk ID	Risk Area	Risk Owner (Executive)	Main responsible committee	Risk Manager	Title	Risk Description	Actions with timescales	Comments on risk appetite
SD0017	Operational	Chief Operating Officer	Executive Committee	Head of Contracting	Contract Management 2013-14	Contract Management for 2013_2014 is not sufficiently robust and significant numbers of contracts are late being signed	The CCG is working with CSU South to ensure adequate resources in place to meet contract planning requirements for 2013_2014. Also working to ensure that project plans from CSU South mean delivery of signed SLAs early enough to avoid significant risks occurring.	This risk is being actively managed
SD0022	Financial	Chief Finance Officer	Audit, Corporate Governance and Risk Committee	Head of Finance	Allocation Process for 2013_2014	Impact of allocation changes on financial control	Negotiation as a group of CCGs with NHS England.	This risk is being actively managed
SD0023	Financial	Chief Finance Officer	Audit, Corporate Governance and Risk Committee	Head of Finance	CCG allocations	Uncertainty over CCG expenditure levels in relation to allocations for 2013-2014.	Unclear what the CCG will be spending next year. Specialist Commissioning adjustments made against allocations. Impact of others service transfers and budgets splits that informed baseline data collection exercise. Need to undertake detailed work to understand shifts of activity/finance for all services including specialised commissioning, public health, NCB to understand risk areas.	This risk is being actively managed
SD0025	Clinical	Chief Operating Officer	Clinical Governance, Clinical Quality and Safety Committee	Head of Clinical Quality	Safeguarding Adults	As host commissioner and Surrey lead for the Adult Safeguarding, the CCG is not assured that the current level of training in Safeguarding Adults within member practices and provider services meets that required by the regulators of primary care, the Care Quality Commission (CQC)	August – write to all Surrey CCG Governing Body Chairs to seek assurance that all members of their governing body have received level 2 training. By mid September - Put in place a live database of Safeguarding Adults Leads in member practices, recording training requirements. By March 2014, Collaborative working with NHS England Area Team to ensure that local requirements are met.	This risk is being actively managed. Longer term plan required for level 2 and 3 training.
SD0026	Clinical	Chief Operating Officer	Clinical Governance, Clinical Quality and Safety Committee	Head of Clinical Quality	Safeguarding Children	Issues with capacity and uncertainty around roles places child safeguarding arrangements for Surrey Downs at Risk	Recommendations from the capacity review will be taken forward by Surrey CCG Quality and Safeguarding Leads. First meeting is in September 2013 where an action plan and timelines will be discussed.	This risk is being actively managed.
SD0039	Clinical	Chief Operating Officer	Clinical Governance, Clinical Quality and Safety Committee	Head of Clinical Quality	Specialist Equipment in the Community	The CCG is not assured that certain specialist equipment being used by healthcare staff in the community is fit for purpose.	Working initially with the CHC team to identify patients with equipment. Liaison with Milbrook re: their processes when issuing equipment. Mapping exercise to be carried out to identify specialist equipment being used in the community to enable a register to be created and maintained.	This risk is being actively managed
SD0042	Clinical	Chief Operating Officer	Clinical Governance, Clinical Quality and Safety Committee	Head of Clinical Quality	CCG quality premium – national and local	Risk that the CCG will not receive national and local Quality premium reward payments associated with improving specific health outcomes and reducing inequalities.	Where failure against specific indicators is identified, providers will be expected to have improvement plans in place. The CCG will monitor these and a separate risk raised as necessary.	The indicator associated with Domain 5 of the Outcomes Framework has been breached resulting in the loss of one reward payment. Further risk is being actively managed

Jul-13		
3	2	6
4	3	12
4	3	12
4	2	8
4	3	12
3	3	9
3	3	9

Sep-13		
3	2	6
4	4	16
4	3	12
4	3	12
4	3	12
3	3	9
4	3	12

Trend
Static
Deteriorating
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Risk ID	Risk Area	Risk Owner (Executive)	Main responsible committee	Risk Manager	Title	Risk Description	Actions with timescales	Comments on risk appetite
SD0043	Clinical	Chief Operating Officer	Clinical Governance, Clinical Quality and Safety Committee	Head of Clinical Quality	Catastrophic supply failure	Risk of an unexpected clinical failure of a supplier that reveals and is attributable to either a lack of early warning systems or cultural issues within the organisation that conceal significant quality issues.	Surrey wide patient safety monitoring of serious incidents, trends and other early warnings. Work with e.g. public health observatories and regulators to identify potential signals of failure. Site visitors and direct interaction with suppliers to test organisational culture.	This risk is being actively managed
SD0044	Clinical	Chief Operating Officer	Executive Committee	Clinical Lead for NHS 111	NHS 111	111 fails to deliver a robust, safe service particularly at peak times	The clinical lead on the Executive Committee is engaged with the host commissioner and working with lead commissioners to manage this including activity levels at peak times such as Bank Holidays. Remedial action plans agreed with SECAM.	This risk is being actively managed
SD0046	Clinical	Chief Operating Officer	Clinical Governance, Clinical Quality and Safety Committee	Head of Continuing Care	Continuing Care Retrospective Reviews	Risk that the nature and scale of retrospective applications will lead to backlogs and financial pressures	The criteria for these applications is largely out of the CCG's control but every effort is made to ensure that only appropriate claims are met	This risk is being actively managed
SD0047	Clinical	Chief Operating Officer	Clinical Governance, Clinical Quality and Safety Committee	Head of Continuing Care	Continuing Care levels of claims	Risk that the nature and scale of normal continuing care applications cannot be managed	CHC External review taking place, will report in October	This risk is being actively managed
SD0052	Clinical	Chief Operating Officer	Clinical Governance, Clinical Quality and Safety Committee	Head of Clinical Quality	Standards for Healthcare Acquired Infection	Failure to meet infection control standards	The CCG continues to apply pressures to providers to meet the required standards, however in some cases the targets for the years have already been breached.	This risk is being actively managed
SD0053	Delivery	Chief Operating Officer	Clinical Governance, Clinical Quality and Safety Committee	Head of Contracting	Quality of Estate	Risk of a disruption to commissioned services due to a rapid deterioration in the estate at New Epsom and Ewell Cottage Hospital and / or The Poplars at West Park	There is currently no indication that this risk will become real and no further action is planned at this stage	Pending development of a strategic solution with partners, this risk is accepted.
SD054	Operational	Chief Operating Officer	Executive Committee	Medlinc and Mid Surrey locality chairs	Epsom hub capacity and surge planning	There is a risk of potential failures of service quality, financial stability, or business continuity that impact on patients and may cause harm if periods when there is a surge in demand (such as winter, heatwaves or during a pandemic) are not adequately planned for.	Aug 2013 – work with GP localities to ensure take up of 'flu LESs (issued by NHS England 1st Aug) Sep 2013 - Development and implementation of winter capacity and escalation plan with key suppliers Oct 2013 - Implementation of flu plan	This risk is being actively managed to achieve as low a score as possible

Jul-13		
4	3	12
4	3	12
4	4	16
4	4	16
New risk		
4	2	8
New risk		

Sep-13		
4	3	12
4	2	8
4	4	16
4	4	16
4	4	16
4	2	8
4	4	16

Trend
Static
Improving
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Static

Risk ID	Risk Area	Risk Owner (Executive)	Main responsible committee	Risk Manager	Title	Risk Description	Actions with timescales	Comments on risk appetite
SD055	Operational	Chief Operating Officer	Executive Committee	East Elmbridge Locality Chair	Kingston hub capacity and surge planning	There is a risk of potential failures of service quality, financial stability, or business continuity that impact on patients and may cause harm if periods when there is a surge in demand (such as winter, heatwaves or during a pandemic) are not adequately planned for.	Aug 2013 – work with GP localities to ensure take up of 'flu LESs (issued by NHS England 1st Aug) Sep 2013 - Establishment of winter operational group Sep 2013 - Development and implementation of winter capacity and escalation plan with key suppliers Oct 2013 - Implementation of flu plan	This risk is being actively managed to achieve as low a score as possible
SD056	Operational	Chief Operating Officer	Executive Committee	Dorking Locality Chair	SASH hub capacity and surge planning	There is a risk of potential failures of service quality, financial stability, or business continuity that impact on patients and may cause harm if periods when there is a surge in demand (such as winter, heatwaves or during a pandemic) are not adequately planned for.	Aug 2013 – work with GP localities to ensure take up of 'flu LESs (issued by NHS England 1st Aug) Sep 2013 - Establishment of winter operational group Sep 2013 - Development and implementation of winter capacity and escalation plan with key suppliers Oct 2013 - Implementation of flu plan	This risk is being actively managed to achieve as low a score as possible
SD057	Operational	Chief Operating Officer	Executive Committee	Service redesign Manager	EDICs- handover process (electronic and paper)	EDICs operated clinics out of Tattenham, Tadworth and Shadbolt practices and out of hubs at the Ebbisham Centre, Medwyn Centre, Leatherhead Hospital and the Old Cottage hospital. All of the sites have paper based patient records and electronic records & appointments booked accessible only via PPS (a system which EDICs own and have a licence for). All patient notes, records and appointments need to be transferred securely over to the new locations and host providers. All external agencies need to be informed of the transfer and all diagnostic results and tests currently with external companies need to be identified and transferred with the patient records. All archived files need to be transferred to new providers/storage facilities.	Assurance teleconferences and meetings weekly.	This risk is being actively managed

Jul-13
New risk
New risk
New risk

Sep-13		
4	4	16
4	4	16
5	3	15

Trend
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