

Meeting	Risk ID	Date recorded	Description of risk (if... then... resulting in...)	Likelihood	Consequence	Initial	Strategic objective	Theme	BAF ref	Operational lead & clinical lead	Likelihood	Consequence	Appetite	Date last updated	Controls currently in place (the 'as is')	Mitigating actions still required (to achieve desired control)	Risk ID	Brent CCG (contextual narrative)	Likelihood	Consequence	Current
PCCC BRE007			<p>If outstanding rent and rates reviews exceed CCG allocated delegated budget then this would impact of funding available for commissioning and development of primary medical services</p> <p>Housing development in Brent requires CCG to ensure suitable primary care facilities are available to new residents.</p> <p>Improvement grant applications agreed in previous years are likely to hold revenue implications on delegated budget</p>	4	5	20	<p>Finance: to achieve our shared financial control total for the eight CCGs for 2018/19.</p>	Primary Care		Fana Hussain	1	1	1	04/03/20	<p>At the time the service transferred from NHS England there was an inherited backlog of rent reviews. Over the past two year the focus has been to complete those reviews and to ensure, where possible rent reviews have been instigated to bring records up to the present date. Progress has been limited by :</p> <ul style="list-style-type: none"> the rate that practices have responded to requests, limited DV resources <p>Finance and Operational Group (FOG) continues to provide oversight on rent and rates reviews across the 8 CCGs.</p> <p>As at January 2020 of the 52 practices in Brent and 63 premises (some practices have more than one premises). In total for Brent there are 138 rent reviews on the tracker. this includes practices coming up for their next rent review even if it is a future date.</p> <ul style="list-style-type: none"> 43 have not yet reached the due date (this is where the increase from 88 has occurred as we have ensured for each practice undergoing rent reviews there is a next rent review due recorded) 24 are completed. 30 premises have 56 rent reviews outstanding where <ul style="list-style-type: none"> 35 are awaiting documentation to be completed and the DV has not yet been instructed, 8 are with the DV for valuation and 13 are awaiting agreement / negotiation of the valuation. 15 premise have no rent reviews as NHSPS / CHP / Trust premises <p>Regular monthly reports received from Premises team to map on-going reviews and outcomes.</p> <p>Currently no additional funding set aside for current years cost pressures.</p> <p>Additional three premises offered by Local Authority in areas of housing growth have been deemed as unaffordable and negotiations are on-going to agree reasonable rent and rates. CCG are currently awaiting written proposal from Local Authority.</p> <p>Where Improving Grant applications are agreed in the past where there is a possible impact on rent/rates, these have been conditionally agreed subject to District Valuer assessment. The DV report is assessed in relation to rent increases against affordability, prior to final support being given.</p>	<p>NWL Finance and Operational bi-weekly meeting to review outstanding rents between CCG, NHSE and Premises team</p> <p>Monthly reports from Premises Review team to assess risks, appeals, outstanding reviews</p> <p>Finance and Primary care monthly meeting to review delegated budget and on-going risks. CCG Executive Committee receives monthly update on Delegated budget risks and cost pressures.</p> <p>Primary Care Commissioning Committee holds oversight on outstanding reviews and delegated budget spend.</p> <p>Mitigation actions include:</p> <ul style="list-style-type: none"> reduction in GP premises as result of mergers, generating savings on premises budget review of void costs in NHS PS/ LIFT sites and assess suitability of re-location of local practices additional premises requests reviewed in line with Premises Guidance and clause on 'due regards to CCG financial commitments' IG fund application reviewed in line with DV reports and cost implication on delegated budget increase in on-line access to primary care will support reduction in footfall at GP surgeries and seek to reduce premises foot print 	BRE007	<p>Risks and pressure on delegated budget from rent increases is causing cost pressure. The reasonable increases in rent noted across the CCG area, the mergers and re-location of premises has aim to reduce spend on GP premises. As historical issues are resolved the premises budget is starting to reflect the true costs of rent and rates for GP premises.</p> <p>Time and motion studies being conducted on NHS PS sites to ascertain utilisation prior to request for additional space requests being reviewed. New requests for premises expansion/ development are reviewed in line with available infrastructure within the local area.</p>	4	3	12
PCCC BRE008			<p>If we do not address the sustainability issues in primary care then it means that we are less able to deliver quality primary care services at scale in order to meet patient's needs.</p>	3	4	12	Clinical strategy	Primary Care		Isha Coombes	2	3	6	04/03/20	<ol style="list-style-type: none"> All local areas have at scale organisations All local areas have submitted a plan for developing at scale working in general practice. NWL Workforce Strategy is in place to support at scale provider development Enhanced GP contracts are in place across all eight CCGs PCN development funding available to support OD / training needs. 	<p>PCNs have completed their development plans. The plans have been endorsed by the Brent ICP Board and the NW London Health and Care Partnership.</p> <p>As part of their development plans, PCNs have considered the priority areas they wish to work on as well as the development gaps that might stop them achieving their goals. The CCG continues to engage with the PCN CDs on the HCP priority areas to determine how best to support them to achieve their goals.</p> <p>Monthly checkpoint meetings with PCN Leads in place to monitor and support progress against plan. Monthly engagement meetings with PCN Clinical Directors. Agreement to set up PCN Council to develop infrastructure for a cohesive primary care voice and to promote standardisation across primary care.</p> <p>The CCG continues to provide support to PCNs with the delivery of their development plans.</p>	BRE008	<p>Brent-wide PCN coverage. The 5 PCN draft specifications have been released for review and comment by PCNs. PCNs expected to begin delivery of specifications in 2020.</p> <p>PCNs have identified their development needs through submission of their plans and continue to work on their clinical priority focus areas. The development funding has been disseminated to the Harness & K&W PCNs. Invoices are outstanding from the Kilburn PCNs.</p> <p>Each PCN has a named clinical and managerial lead, who is engaged in the process. The PCNs continue to meet regularly to ensure continued development.</p> <p>Monthly CCG / PCN Clinical Directors meetings and PCN managerial leads meetings are on-going to ensure alignment with PCN and ICP development. The CCG held an ICP Development Workshop with the PCN Clinical Directors. The purpose of the event was to provide the CDs with an in-depth overview of the ICP programme being developed and implemented in Brent and to give the CDs an opportunity to share their vision as to how they see the ICP becoming aligned to PCNs. The meeting was extremely positive and concluded with attendees agreeing actions and next steps.</p> <p>A workshop is being planned with primary and acute colleagues to continue to develop a shared vision and priorities for a Brent-wide ICP.</p>	3	3	9