

STRATEGIC OBJECTIVES				
1. PREVENTION AT SCALE	2. INTEGRATED COMMUNITY AND PRIMARY CARE SERVICES	3. ONE ACUTE NETWORK	4. DIGITALLY ENABLED DORSET	5. LEADING AND WORKING DIFFERENTLY
STRATEGIC RISKS				
<i>Achievement of the CCG's strategic objectives is at risk if:</i>				
1) inadequate funding is available to deliver the required services and the transformation programme				
2) unprecedented rise in demand on services occurs				
3) the Accountable Care Partnership breaks down				
4) there is significant, sustained failure of a major provider				
5) there are insufficient skilled and qualified staff within the system				
CORPORATE OBJECTIVES (11)				
Prevention at System Wide Level	CSR- Integrated Community Services	CSR – Acute Reconfiguration	Digital Dorset	Leading and Working Differently
	Acute Mental Health Care Pathway			Financial sustainability
	Primary Care Commissioning Strategy			System Structures
	Patient and Public Engagement			
	Continuing Healthcare			
CORPORATE RISKS (28) including 7 RED (HIGH)				
MH006	MFH002	MFH005	O035	O025
	MH001	PSC002	S006	O036
	MH005	PSC003		Q020
	O032	UEC006		Q022
	PC011	UEC007		S007
	PC013	O031		SD007
	PC015			FIN022
	Q021			PSC006
	Q037			

NO	STRATEGIC OBJECTIVE	STRATEGIC RISK	KEY CONTROLS	SOURCES OF ASSURANCE	ASSURANCE FREQUENCY	GAPS IN CONTROLS AND/OR ASSURANCE	NARRATIVE
EXTERNAL ASSURANCES							
1	1, 2, 3 & 5	2, 3 & 5	Bournemouth and Poole Health and Wellbeing Board	Receipt of minutes by the CCG, from the Bournemouth and Poole Health and Wellbeing Board	As available	None identified	Members include experts in public health, local authorities, health providers and lay members. The following Boards feed into the HWB: Safeguarding Adults, Safeguarding Children, Children's Trust and Better Care Fund.
2	1, 2, 3 & 5	2, 3 & 5	Dorset Health and Wellbeing Board	Receipt of minutes by the CCG, from the Dorset Health and Wellbeing Board	As available	None identified	Members include experts in public health, local authorities, health providers and lay members. The following Boards feed into the HWB: Safeguarding Adults, Safeguarding Children, Children's Trust and Better Care Fund.
3	All	All	NHS England South Assurance Review	Evidence supplied to NHS England and attendance at assurance meeting	Quarterly	No gaps - overall 'good' rating	2016/17 Year end assessment: Overall headline 'Good' Well-led: 'Good' Sustainability 'Good' Better Care: - Cancer assessed as 'Outstanding' - Dementia 'Good' - Mental Health 'requires improvement' which the CCG will be focusing on for 2017/18. In year assessment (2017/18) Well-led: 'Green' Sustainability 'Amber' Better Care: - Cancer 'needs improvement' - Mental health 'top performing' - Learning disability 'needs improvement' - Maternity 'performing well' - Dementia 'needs improvement' Better Health: - Diabetes 'needs improvement'
4	1, 2 & 3	4	CQC Inspections	CQC published reports, CQC enforcement actions, oversight meetings for practices/Providers in special measures NHS Providers report quarterly to the CCG on their CQC status	As per CQC schedule	None identified	All local NHS Providers 'require improvement' and a number of GP practices and care homes 'require improvement'. There is one inadequate GP practice which is closing on 1st Oct 17
5	1, 2, 3 & 5	2, 3 & 5	Pooler Health Overview and Scrutiny Panel	Reports are submitted from the CCG on request/as per schedule	Monthly	None identified	The panel is made up of selected Councillors, representing Pooler Borough Council. There are CCG executive and clinical leads nominated representatives.
6	1, 2, 3 & 5	2, 3 & 5	Bournemouth Health Overview and Scrutiny Panel	Reports are submitted from the CCG on request/as per schedule	Monthly	None identified	The panel is made up of selected Councillors, representing Bournemouth Borough Council. There are CCG executive and clinical lead nominated representatives.
7	1, 2, 3 & 5	2, 3 & 5	Dorset Health Overview and Scrutiny Panel	Reports are submitted from the CCG on request/as per schedule	Quarterly	None identified	The panel is made up of selected Councillors, representing Dorset County Council. There are CCG executive and clinical lead nominated representatives.
8	1, 2, 3 & 5	2, 3 & 5	Joint Health Overview and Scrutiny Panel	Reports are submitted from the CCG on request/as per schedule	Ad hoc	None identified	The Joint Panel is set up on an ad hoc basis when there is a Consultation which affects all Dorset residents (e.g. CSR).
GOVERNING BODY MEETING							
9	1 & 2	All	Governing Body meeting	Adult Safeguarding: Annual report	Annual	None identified	Key issues: Mandatory training, Mental Capacity Act (MCA), Deprivation of Liberty Safeguards (DOLS) Report is also submitted to the Audit and Quality Committee

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10	1 & 2	All	Governing Body meeting	Adult Safeguarding: Update report	Annual	None identified	Key issues: Mandatory training, Mental Capacity Act (MCA), Deprivation of Liberty Safeguards (DOLS) Report is also submitted to the Audit and Quality Committee
11	All	1 & 3	Governing Body meeting	Approving Annual Accounts	Annual	None identified	Approval of the Annual Accounts is also a standing item at the Audit and Quality Committee special meeting, annually.
12	All	All	Governing Body meeting	Approving Annual Report (including Annual Governance Statement)	Annual	None identified	None identified; the Annual report was upload to the CCG public website in July 2017 The report is also submitted to the annual special Audit and Quality Committee.
13	All	All	Governing Body meeting	Governing Body Assurance Framework	Bi-monthly	None identified	Framework is also submitted to Audit and Quality Committee (quarterly) and Director's Performance meeting (monthly)
14	All	All	Governing Body meeting	Chief Officers update	Bi-monthly	None identified	Includes link to Health and Wellbeing Board papers (which includes Better Care Fund updates)
15	1 & 2	All	Governing Body meeting	Children's Safeguarding: Annual report	Annual	None identified	Key issues: Special Education Needs and Disabilities (SEND) - Written Statement of Action required by CQC and Ofstead Report is also submitted annually to Audit and Quality Committee
16	1 & 2	All	Governing Body meeting	Child Safeguarding: Update report	Annual	None identified	Key issues: Special Education Needs and Disabilities (SEND) - Written Statement of Action required by CQC and Ofstead Report is also submitted annually to Audit and Quality Committee
17	1 & 2	All	Governing Body meeting	Children's and Adult's Safeguarding report - Serious Case Reviews (inc Domestic Homicide Reviews)	Biannual	None identified	Report is also submitted to Audit and Quality Committee (Biannually)
18	All	All	Governing Body meeting	Commissioning Support Services: Annual report	Annual	None identified	
19	All	All	Governing Body meeting	Corporate Risk Register	Bi-monthly	None identified	The Corporate Risk Register is submitted to Part 2 of the Governing Body meeting. The Register is also submitted to Audit and Quality Committee (quarterly) and Director's Performance Meeting (monthly)
20	All	All	Governing Body meeting	Customer Care: Annual report	Annual	None identified	Report is also submitted annually to Audit and Quality Committee
21	All	3	Governing Body meeting	Declarations of Interest	Annual	None identified	All Governing Body members up to date with Conflict of Interest training (Sept 17)
22	1, 2, 3 & 5	2, 3 & 5	Governing Body meeting	Dorset Health and Wellbeing Board and Bournemouth and Poole Health and Wellbeing Board updates (included in Chief Officer's report)	Bi-monthly	None identified	
23	2, 3, 4 & 5	All	Governing Body meeting	Emergency Preparedness Resilience and Response (EPRR) Assurance Report	Annual	None identified	
24	All	All	Governing Body meeting	Engagement and Communications Framework: Annual Report	Annual	None identified	
25	All	All	Governing Body meeting	Engagement and Communications Framework: update	Annual	None identified	
26	All	1 & 3	Governing Body meeting	External Audit: Interim and Final report on Annual Accounts and Annual Report by Grant Thornton	Annual	None identified	

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27	All	1 & 3	Governing Body meeting	Finance report	Bi-monthly	None identified	The finance report is submitted to Part 2 of the Governing Body meeting. The report is also submitted to the Audit and Quality Committee (quarterly) and the Director's Performance meeting (monthly)
28	All	All	Governing Body meeting	Governance Documents: Annual review	Annual	None identified	Governance review of the Accountable Care System is currently being undertaken which may impact on CCG governance
29	All	All	Governing Body meeting	Governing Body self-assessment report	Annual	None identified	
30	1, 2, 3 & 4	4	Governing Body meeting	Infection control: Annual report	Annual	None identified	Report is also submitted annually to Audit and Quality Committee
31	4	3 & 4	Governing Body meeting	Information Governance toolkit: Annual review	Annual	None identified	New European Union Data Protection Regulations become applicable in May 2018 Report is also submitted annually to Audit and Quality Committee
32	1, 2, 4 & 5	1 & 2	Governing Body meeting	Looked After Children: Annual report	Annual	None identified	Key issues: Timeliness of Initial Health Assessments Report is also submitted annually to Audit and Quality Committee
33	All	All	Governing Body meeting	NHS Constitution: Annual update	Annual	None identified	Report is also submitted annually to Audit and Quality Committee
34	All	All	Governing Body meeting	NHS England Assurance meeting feedback (in Chief Officer report)	Bi-monthly	None identified	For narrative, see no 3, page 2.
35	All	1, 2 & 3	Governing Body meeting	Opening budget	Annual	None identified	
36	All	All	Governing Body meeting	Operational plan	Annual	None identified	
37	5	3 & 5	Governing Body meeting	Organisational Development Framework: Annual report	Annual	None identified	
38	5	3 & 5	Governing Body meeting	Organisational Development Framework: progress update	Annual (mid-year)	None identified	
39	All	All	Governing Body meeting	Performance report	Bi-monthly	None identified	Includes Better Care Fund, Delayed Transfers of Care, Quality Premium, Contract Queries and Four Hour Emergency Department waits. The report is also submitted to the Director's Performance meeting (monthly).
40	5	4 & 5	Governing Body meeting	Public Participation: Annual report	Annual	None identified	
41	All	4 & 5	Governing Body meeting	Quality report	Bi-monthly	None identified	Key issues: Mortality rates at DHCFT, Ophthalmology service at DCHFT, Never Events at RBCH, Stroke performance at PHFT, Pressure Ulcer at PHFT, Pain service. Child and Adolescent Mental Health Services themed CQC inspection being undertaken in Sept/Oct 2017 The report is also submitted to the Director's Performance meeting (monthly)
42	5	4 & 5	Governing Body meeting	Staff Survey: Annual report	Annual	None identified	
43	All	1 & 3	Governing Body meeting	Sustainability and Transformation Update	Bi-monthly	None identified	

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44	All	All	Governing Body meeting	Urgent and Emergency Care Delivery Board: Report	Bi-monthly	None identified	The Board comprises of NHS England, CCG and provider experts from the wider Acute network Key issues: Service capacity and procurement of new services
45	5	5	Governing Body meeting	Workforce Race Equality Standard Report	Annual	None identified	
46	All	All	Governing Body meeting	360° stakeholder survey	Annual	None identified	
47	All		Governing Body meeting	Audit & Quality Committee minutes	As available	None identified	
48	All		Governing Body meeting	Clinical Commissioning Committee minutes	As available	None identified	
49	All		Governing Body meeting	Primary Care Commissioning Committee minutes	As available	None identified	
50	All		Governing Body meeting	Remuneration Committee minutes	As available	None identified	
51	All		Governing Body meeting	System Leadership Team (SLT) minutes, to include updates from: Prevention at Scale Board Integrated Community and Primary Care Services Board One Adult Network Board Digitally Enabled Board Leading and Working Differently Board Reference Groups Right Care	As available	None identified	
52	All		Governing Body meeting	System Partnership Board (SPB) minutes	As available	None identified	
AUDIT AND QUALITY COMMITTEE							
53	All	All	Audit and Quality Committee	Annual Audit letter (for noting)	Annual	None identified	
54	All	All	Audit and Quality Committee	Annual Governance Statement: update/progress	Quarterly	None identified	
55	All	All	Audit and Quality Committee	Annual Report preparation: Progress update	Biannual	None identified	
56	All	3	Audit and Quality Committee	Award of contracts without competition	Quarterly	None identified	
57	1, 2, 4 & 5	1 & 3	Audit and Quality Committee	Better Care Fund update report	Quarterly	None identified	
58	All	All	Audit and Quality Committee	Biannual meeting without management present: Internal audit, external audit and local counter fraud service	Biannual	None identified	October and May (special) meetings
59	All	1 & 3	Audit and Quality Committee	CCG Standards of Business Conduct: Annual approval	Annual	None identified	
60	All	All	Audit and Quality Committee	Clinical Commissioning Local Improvement Plan (LIP) - feedback report at year end	Annual	None identified	
61	All	All	Audit and Quality Committee	Corporate Risk Register: annual approval	Annual	None identified	
62	All	1, 3, 4 & 5	Audit and Quality Committee	Counter Fraud workplan approval	Annual	None identified	
63	All	1, 3, 4 & 5	Audit and Quality Committee	Counter Fraud Interim report	Quarterly	None identified	
64	All	All	Audit and Quality Committee	Customer Care: Quarterly report	Quarterly	None identified	
65	All	3	Audit and Quality Committee	Declarations of Interest (with particular reference to Primary Care Commissioning Committee) - review	Quarterly	None identified	
66	All	All	Audit and Quality Committee	Deep Dive into selected risk issue (for noting)	Quarterly	None identified	The last item on part 1 of the agenda
67	All	1 & 3	Audit and Quality Committee	External Audit plan approval	Annual	None identified	
68	All	1 & 3	Audit and Quality Committee	External Audit update	Quarterly	None identified	
69	All	1 & 3	Audit and Quality Committee	External Audit Governance report	Annual	None identified	
70	All	1 & 3	Audit and Quality Committee	External Audit effectiveness - Annual Review	Annual	None identified	
71	All	All	Audit and Quality Committee	Follow up from any Special A&Q meetings that have taken place	Quarterly	None identified	
72	All	All	Audit and Quality Committee	Governing Body Assurance Framework report: annual approval	Annual	None identified	

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73	4	3 & 4	Audit and Quality Committee	Information Governance Group report	Quarterly	None identified	
74	All	All	Audit and Quality Committee	Internal Audit: Annual opinion/annual report	Annual	None identified	
75	All	All	Audit and Quality Committee	Internal Audit update report	Quarterly	None identified	
76	All	All	Audit and Quality Committee	Internal Audit - note and review audit recommendations	Quarterly	None identified	
77	All	All	Audit and Quality Committee	Internal Audit effectiveness - Annual Review	Annual	None identified	
78	All	1 & 3	Audit and Quality Committee	Note Register of Losses, Compensation Payments and Implementation of Standards of Business Conduct Policy by members of staff (Inspection of Registers)	Annual	None identified	
79	All	All	Audit and Quality Committee	Note and review the effectiveness of the committee	Annual	None identified	
80	1, 2, 4 & 5	2 & 5	Audit and Quality Committee	Primary Care Commissioning Committee report	Quarterly	None identified	
81	2, 3, 4 & 5	4 & 5	Audit and Quality Committee	Quality Group paper	Quarterly	None identified	
82	All	All	Audit and Quality Committee	Review and Recommend for Approval Changes in Constitution, Standing Orders and Standing Financial Instructions and Terms of Reference for Committees (note changes to Constitution will require membership approval) (Annual Review of Governance Documents)	Annual	None identified	
83	All	All	Audit and Quality Committee	Significant Provider Contracts: Note and review	Annual	None identified	
84	2	1, 2 & 5	Audit and Quality Committee	Special Educational Needs and Disabilities (SEND) reforms – Children's and Families Act 2014: Update of CCG compliance	Quarterly	None identified	The CCG is working through a detailed action plan to address the issues identified in relation to CCG compliance with SEND reforms.
85	All	1 & 3	Audit and Quality Committee	Transformation Programme Assurance Report (including minutes from the Quality Assurance Group)	Quarterly	None identified	
86	2, 3 & 5	3, 4 & 5	Audit and Quality Committee	Whistleblowing Policy - note of review (including investigations following instigation of the policy)	Annual	None identified	
87	1, 2, 4 & 5	1, 2 & 5	Audit and Quality Committee	Clinical Commissioning Committee minutes	As available	None identified	
88	1, 2, 4 & 5	1, 2 & 5	Audit and Quality Committee	Primary Care Commissioning Committee minutes	As available	None identified	
DIRECTOR'S PERFORMANCE MEETING							
89	1, 2, 4 & 5	1, 2 & 5	Director's Performance Meeting	Continuing HealthCare briefing on Adults and Children	Quarterly	None identified	
90	1, 2 & 3	1 & 2	Director's Performance Meeting	Medicines Management report	Quarterly	None identified	
91	5	5	Director's Performance Meeting	Organisation workforce scorecard	Monthly	None identified	
92	1, 2, 4 & 5	1, 2 & 5	Director's Performance Meeting	Primary Care report	Monthly	None identified	
93	2, 3, 4 & 5	All	Director's Performance Meeting	Resilience report (verbal update)	Monthly	None identified	
94	All	2 & 5	Director's Performance Meeting	RightCare Performance reports	Monthly	None identified	
95	All	1 & 3	Director's Performance Meeting	Transformation update	Monthly	None identified	
PRIMARY CARE COMMISSIONING COMMITTEE (PCCC)							
96	1, 2 & 3	1 & 2	Primary Care Commissioning Committee	Medicines Optimisation Group Report	Bi-monthly	None identified	

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97	1, 2 & 5	4 & 5	Primary Care Commissioning Committee	Primary Care Quality and Practice Profiling update	Bi-monthly	None identified	
98	2, 4 & 5	1, 2 & 5	Primary Care Commissioning Committee	Primary Care Risk Register	Bi-monthly	None identified	
99	1, 2, 4 & 5	2 & 5	Primary Care Commissioning Committee	Primary Care Strategy Update	Bi-monthly	None identified	Progress being managed by Primary Care Operational Group, and monitored via PCCC
100	1	2	Primary Care Commissioning Committee	Public Health update	Bi-monthly	None identified	
CLINICAL COMMISSIONING COMMITTEE							
101	1, 2 & 3	1 & 2	Clinical Commissioning Committee	Dorset Medicines Advisory Group report	Bi-monthly	None identified	
102	All	2 & 5	Clinical Commissioning Committee	RightCare Performance reports	Bi-monthly	None identified	
REMUNERATION COMMITTEE							
103	All	All	Remuneration Committee	Agree Chief Officer objectives to recommend to Governing Body	Annually	None identified	
104	All	All	Remuneration Committee	Half year performance review/changes to objectives to recommend to Governing Body	Annually	None identified	
105	All	All	Remuneration Committee	Year end reviews/performance reviews	Bi-annually	None identified	
SYSTEM LEADERSHIP TEAM MEETING (SLT)							
106	All	All	System Leadership Team Meeting	Involvement of Dorset Provider organisations	Monthly	None identified	
OPERATIONS AND FINANCE REFERENCE GROUP (OFRG)							
107	All	All	Operations and Finance Reference Group	System Update on Finance and Cost Improvement Programme (CIP) progress	Monthly	None identified	Monthly templates completed by all providers and discussed at meeting noting concerns, risks and issues.
108	All	All	Operations and Finance Reference Group	System Quality Update	Monthly	None identified	Summary of System Quality paper discussed. Directors of Nursing from all providers attend meeting.
109	All	All	Operations and Finance Reference Group	System Update on Performance and Activity Growth	Monthly	None identified	Key performance and activity growth data is presented as a system. COO's from all providers are present to discuss concerns raised.
110	All	All	Operations and Finance Reference Group	System Leadership Team - Paper for approval	Monthly	None identified	OFRG members agree the Collaborative Agreement Implementation Progress Report before submitted to SLT
111	All	All	Operations and Finance Reference Group	Dorset Health System Collaborative Agreement Highlight Report and plans	Monthly	None identified	Workstream leads produce assurance templates which update on areas relating to demand management
112	All	All	Operations and Finance Reference Group	OFRG - Risk Register	Monthly	None identified	OFRG members decide if any risks need to be escalated to SLT.
113	All	All	Operations and Finance Reference Group	Local Authority/Vanguard Updates	Quarterly	None identified	LA's and Vanguard reps invited quarterly to give update and discuss relevant issues.
114	All	All	Operations and Finance Reference Group	Dorset Health System Collaborative Agreement	Annually	None identified	
NHS ENGLAND (WESSEX) QUALITY SURVEILLANCE GROUP (QSG)							
115	All	4 & 5	NHS England Quality Surveillance Group	Regular reporting, enhanced reporting and themed reporting as per meeting agenda	Quarterly	None identified	There are currently no Providers on 'enhanced surveillance' within Dorset (at 27.09.17)
DORSET WORKFORCE ACTION BOARD (DWAB)							

116				<i>To be completed during November 2017</i>			
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