

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 (30) including 3 RED (HIGH)				
	PCC001	SI001	SI006	PCC008
	PCC002	SI002	SI007	NQ004
	PCC004	SI003		NQ006
	PCC005	SI004		FBI002
	PCC007	SI005		FBI003
	PCC009	SI009		FBI004
	NQ002	SI011		FBI005
	NQ003			FBI006
	NQ005			ED001
				ED002
				SI010
				SI012

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 representatives from 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 (2018 meeting dates known: 28.03.2018 and 27.06.2018)	Members include representatives from 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	2017/18: IAF revised Nov 2017. Q1 ratings: In-year financial performance 'Amber', Quality of CCG leadership 'Green'. 2016/17 year end assessment: overall headline 'Good'; Well-led: 'Good'; Sustainability: 'Good'; Better Care: - Cancer 'Outstanding'; - Dementia 'Good'; - Mental Health 'requires improvement' which the CCG will be focusing on for 2017/18. CCG year-end assessments were regionally considered on 18 April, following which they will undergo national moderation. No date has been given as to when the information will be released.
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	Poole Hospital is rated as 'Good', all other local NHS Provider Trusts 'require improvement'. A number of care homes 'require improvement' or are rated 'inadequate'; All these care homes are 'blocked' from receiving new placements. A GP Practice was declared 'inadequate' on 21.11.2017 and is now in special measures.
5	1, 2, 3 & 5	2, 3 & 5	Poole 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 Poole 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), PREVENT and domestic abuse. The CCG is well represented on the Safeguarding Adults Boards. 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), PREVENT and domestic abuse. The CCG is well represented on the Safeguarding Adults Boards. 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 Ofsted. The CCG is well represented on the LSCBs 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 Ofsted. The CCG is well represented on the LSCBs. 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 review	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	The annual report was presented to the January 2018 Governing Body Meeting. This was subject to approval by both the Accountable Emergency Officer and Non-Executive Director for EPRR
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	

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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	
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	Part 2
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. Key issues are C Difficile targets and E Coli
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, particularly within the DCC area. 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. Some constitutional standards not being met eg RTT
34	All	All	Governing Body meeting	NHS England Assurance meeting feedback (in Chief Officer report)	Bi-monthly	None identified	
35	All	1, 2 & 3	Governing Body meeting	Opening budget	Annual	None identified	Part 2
36	All	All	Governing Body meeting	Integrated Care System (ICS) Operating Plan update (<i>formally known as the Operational Plan</i>)	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: Ophthalmology service at DCHFT, Never Events and dermatology services at RBCH, surgical safety at PHFT, Pain service-DHUFT, ambulance delays-SWASFT, Care Home CQC ratings, IAPT and CAMHS capacity. 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	

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43	All	1 & 3	Governing Body meeting	Integrated Care System (ICS) delivery update (formally System and Transformation update)	Bi-monthly	None identified	
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	Key risk, particularly in Dorset Health and Wellbeing area, to the Improved Better Care Fund investment into the Council if Delayed Transfers of Care targets not achieved.
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	Links to RightCare/Demand Management programme
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	Majority of complaints relate to CHC.
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	

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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	
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	One GP practice is currently rated by the CQC as inadequate
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 (<i>note changes to Constitution will require membership approval</i>) (Annual Review of Governance Documents)	Annual	None identified	
83	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.
84	All	1 & 3	Audit and Quality Committee	Transformation Programme Assurance Report (including minutes from the Quality Assurance Group)	Quarterly	None identified	
85	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	
86	1, 2, 4 & 5	1, 2 & 5	Audit and Quality Committee	Clinical Commissioning Committee minutes	As available	None identified	
87	1, 2, 4 & 5	1, 2 & 5	Audit and Quality Committee	Primary Care Commissioning Committee minutes	As available	None identified	One CQC inadequate rated GP Practice
DIRECTOR'S PERFORMANCE MEETING							
88	1, 2, 4 & 5	1, 2 & 5	Director's Performance Meeting	Continuing HealthCare briefing on Adults and Children	Quarterly	None identified	Predicted overspend, not achieving Quality Premium for 28 day assessment target
89	1, 2 & 3	1 & 2	Director's Performance Meeting	Medicines Management report	Quarterly	None identified	Predicted overspend on Primary Care prescribing budget
90	5	5	Director's Performance Meeting	Organisation workforce scorecard	Monthly	None identified	
91	1, 2, 4 & 5	1, 2 & 5	Director's Performance Meeting	Primary Care report	Monthly	None identified	Key risks; One GP practice is rated by the CQC as inadequate; financial pressure on delegated budget, particularly for 18/19; workforce and resilience in practices.

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92	2, 3, 4 & 5	All	Director's Performance Meeting	Resilience report (verbal update)	Monthly	None identified	An overarching system wide Winter plan for Dorset was submitted to NHS England on 01.12.2017. The plan will consider our pressures, capacity and what is in place that is different to last year. It also considers where the gaps are which will support any bids for winter monies. 'Perfect Week' ran across Dorset w/c 04.12.2017.
93	All	2 & 5	Director's Performance Meeting	RightCare Performance reports	Monthly	None identified	
94	All	1 & 3	Director's Performance Meeting	Transformation update	Monthly	None identified	
PRIMARY CARE COMMISSIONING COMMITTEE (PCCC)							
95	1, 2 & 3	1 & 2	Primary Care Commissioning Committee	Medicines Optimisation Group Report	Bi-monthly	None identified	
96	2 & 5	5	Primary Care Commissioning Committee	GP Satisfaction survey	Annual	None identified	
97	1 & 2	1, 2 & 5	Primary Care Commissioning Committee	Primary Care commissioning intentions	Annual	None identified	
98	1, 2 & 5	5	Primary Care Commissioning Committee	Workforce support to vulnerable practices	Bi-monthly	None identified	Part 2.
99	1, 2 & 5	4 & 5	Primary Care Commissioning Committee	Primary Care Quality and Practice Profiling update	Bi-monthly	None identified	Part 2. Key risks; One GP practice is rated by the CQC as inadequate; links to RightCare/Demand Management Programme
100	2, 4 & 5	1, 2 & 5	Primary Care Commissioning Committee	Primary Care Risk Register	Bi-monthly	None identified	Part 2
101	1, 2, 4 & 5	2 & 5	Primary Care Commissioning Committee	Primary Care Update paper, to include: - Contract and performance of primary care - Horizon scanning (as and when) - Primary Care Clinical Commissioning Local Improvement Plan - Primary Care Strategy update - Review of Enhanced Frailty Initiatives - Estates and Technology Transformation Fund update - Primary Care Quality and Profiling update - Primary Care Finance update	Bi-monthly	None identified	Progress being managed by Primary Care Operational Group, and monitored via PCCC
102	1	2	Primary Care Commissioning Committee	Public Health update	Bi-monthly	None identified	Public health expertise is being strengthened at locality level to inform transformation plans
CLINICAL COMMISSIONING COMMITTEE							
103	1, 2 & 3	1 & 2	Clinical Commissioning Committee	Dorset Medicines Advisory Group report	Bi-monthly	None identified	
104	All	2 & 5	Clinical Commissioning Committee	RightCare Performance reports	Bi-monthly	None identified	
REMUNERATION COMMITTEE							
105	All	All	Remuneration Committee	Agree Chief Officer objectives to recommend to Governing Body	Annually	None identified	In March 2017, the Chief Officer objectives were agreed for 2017-18 and 2018-19
106	All	All	Remuneration Committee	Half year performance review/changes to objectives to recommend to Governing Body	Annually	None identified	

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107	All	All	Remuneration Committee	Year end reviews/performance reviews	Bi-annually	None identified	
SYSTEM LEADERSHIP TEAM MEETING (SLT)							
108	All	All	System Leadership Team Meeting	Involvement of Dorset Provider organisations	Monthly	None identified	
OPERATIONS AND FINANCE REFERENCE GROUP (OFRG)							
109	All	All	Operations and Finance Reference Group	System Update on Finance and Cost Improvement Programme (CIP) progress (within SLT paper)	Monthly	None identified (the March 2018 meeting was cancelled)	Monthly templates completed by all providers and discussed at meeting noting concerns, risks and issues.
110	All	All	Operations and Finance Reference Group	System Quality Update (within SLT paper)	Monthly	None identified (the March 2018 meeting was cancelled)	Summary of System Quality paper discussed. Directors of Nursing from all providers attend meeting.
111	All	All	Operations and Finance Reference Group	System Update on Performance and Activity Growth	Monthly	None identified (the March 2018 meeting was cancelled)	Key performance and activity growth data is presented as a system. COO's from all providers are present to discuss concerns raised.
112	All	All	Operations and Finance Reference Group	System Leadership Team - Paper for approval	Monthly	None identified (the March 2018 meeting was cancelled)	OFRG members agree the Collaborative Agreement Implementation Progress Report before submitted to SLT
113	All	All	Operations and Finance Reference Group	Dorset Health System Collaborative Agreement Highlight Report and plans	Monthly	None identified (the March 2018 meeting was cancelled)	Workstream leads produce assurance templates which update on areas relating to demand management
114	All	All	Operations and Finance Reference Group	OFRG - Risk Register	Monthly	None identified (the March 2018 meeting was cancelled)	OFRG members decide if any risks need to be escalated to SLT.
115	All	All	Operations and Finance Reference Group	Local Authority/Vanguard Updates	Quarterly	None identified (the March 2018 meeting was cancelled)	LA's and Vanguard reps invited quarterly to give update and discuss relevant issues. Attendance by the Local Authorities is to be discussed at the next meeting
116	All	All	Operations and Finance Reference Group	Dorset Health System Collaborative Agreement (Two year plan)	Biennially	None identified	To be updatedd in 2019/20
NHS ENGLAND (WESSEX) QUALITY SURVEILLANCE GROUP (QSG)							
117	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 05.02.2018)
ASSURANCE SURVEY							
118	All	All	Assurance survey	Receipt of a completed survey from the Chairs of Governing Body, Audit and Quality Committee, Clinical Commissioning Committee, Primary Care Commissioning Committee and Remuneration Committee.	Six monthly	None	An assurance survey is sent to the committee chairs to ascertain compliance with terms of reference and receipt of adequate assurances. The assurance survey for 01.04.2017 - 30.09.2017 identified no gaps in assurance. The survey for 01.10.2017 - 31.03.2018 is sent during April 2018.