

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
Strategic Principle 1: Designing Services Around Patients								
1.1	Failure to engage with and identify the needs of the population	External assurance						
		4b	NHS England - South (Wessex) Assurance Review (also known as Wessex Assurance checkpoint meeting)	Chief Officer	Evidence supplied to NHS England - South (Wessex) and attendance at Checkpoint meeting on a quarterly basis	Letter to CCG Chief Officer following checkpoint meeting with Area Team . Meeting took place on 13.06.2016. Letter awaited as of 17.06.2016	None	The revised NHS England Assurance process has commenced. Following the Assurance meeting on 19.04.2016 the CCG has all five domains assured as 'good'. A new framework is in place from April 2016.
		Committee Assurance						
		4a	NHS England - South (Wessex) Assurance Review (also known as Wessex Assurance checkpoint meeting)	Chief Officer	Receipt of update to Governing Body meeting as Part of Chief Officers Paper	Date: 20.07.2016 GB paper 7. Chief Officers Update	None	None
		8	Engagement Plan updates	Director of Engagement and Development	Receipt of paper to Governing Body meeting on engagement	Date: 16.03.2016 GB Paper 8.2 and Appendix 1: Update report on Engagement and Communications	None	None;
		10	CCG Involvement Network	Director of Engagement and Development	Receipt of paper to Governing Body on Engagement	Date: 16.03.2016 GB Paper 8.2 and Appendix 1: Update report on Engagement and Communications	None	None
12	360 stakeholder feedback - involvement in planning, prioritising and commissioning high quality care	Director of Service Delivery, Director of Engagement and Development	360 Stakeholder Survey summary	Date: 20.07.2016 Governing Body meeting Paper 9.13 and appendices	None	None; following assurance from the Head of Assurance and Planning, this assurance line has been changed to annual.		

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
		13	Clinical Services Review	Director of Transformation	Reports to Governing Body and Directors Performance	Appropriate updates to TCG - highlight reports from CDGs - Transformation Programme dashboard These reports continue to be reviewed by both the Governing Body and at the Directors Performance meeting.	None identified at present	None - Monitoring continues via both the Governing Body and at the Performance meeting in the absence of the TCG
		1	NHS Constitution Assurance	Director of Quality	Receipt of update paper to Governing Body on NHS Constitution	Governing Body paper 9.8 and Appendix 1: NHS Constitution Annual Report	None	None
		5	CCG 5 year Strategy submitted to NHS England	Director of Engagement and Development	Receipt of update to Governing Body meeting on submission of 5 year strategy to NHS England	Governing Body Paper 7 Chief Officers Update	None	None
		6	CCG 2 year Delivery Plan submitted to NHS England. Now incorporated in to Transformation Update	Director of Engagement and Development	Receipt of Transformation update to Governing Body meeting previously report on 2 year delivery plan to NHS England	Governing Body Paper 9.4 2 year Delivery Plan	None	None
		9	CCG Complaints Process/policies	Director of Quality	Receipt of paper to Governing Body on complaints	Annual Complaints report 9.8	None	None
		11	CCG Engagement Events	Director of Engagement and Development	Receipt of paper on Strategy Refresh to Governing Body meeting informed by engagement event feedback	These reports continue to be reviewed by both the Governing Body (last 18.05.2016 and at the Performance meeting.	None	None
		3	NHS Dorset CCG Constitution	Secretary and General Counsel	Receipt of paper to Shadow Governing Body on CCG Constitution	Date: 15.08.2012 CCG constitution approved by Shadow Governing Body, Area Team and Membership	None	None

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
		14	NHS Dorset CCG Constitution	Secretary and General Counsel	Receipt of paper to Governing Body on NHS Constitution	Date: 18.03.2015 Governing Body paper 9.8 Revised	None	None.
Operational/Management Assurance								
		2	NHS Constitution Assurance	Director of Quality	Receipt of update paper to Quality Group on NHS Constitution	Date: 17.06.2016 Paper 4.14 Enc Z	None	None
Strategic Principle 2: Preventing Ill Health and Reducing Inequalities								
2.1	Failure to achieve strategic and operational outcomes	External assurance						
		4b	NHS England - South (Wessex) Assurance Review (also known as	Chief Officer	SEE No. 4b ABOVE	SEE ABOVE	None	SEE ABOVE
Committee Assurance								
		20	CCG Risk Register	Director of Quality	Receipt of paper on Risk Register by Governing Body NB/ Risk Register also goes to the Quality Group & Audit and Quality Committee	Evidence of assurance confirmed via viewing of agenda for 20.07.2016 meeting (Part 2; Paper 22)	None	None
		22	CCG Governing Body Assurance Framework	Director of Quality	Receipt of paper on Governing Body Assurance Framework by Governing Body meeting (Part 1)	Date: 20.07.2016 Assurance Framework 9.4 and Appendix 1	None	None
		24a	KPIs	Chief Financial Officer	CCG contracting processes	Date: 20.07.2016 GB paper 9.2 Performance Report	None	None
		24b	Quality Indicators	Director of Quality	CCG contracting processes	Date: 20.07.2016 GB paper 9.1 Quality Report	None	None
		27	Executive scrutiny	Chief Officer	Receipt of Quality, Performance and Reports to Governing Body meeting	Date: 20.07.2016 GB paper 9.1 Quality Report and GB paper and 9.2 Performance Report	None	None
		32	Systems Resilience Group Work Programme	Director of Service Delivery	System Resilience Group update paper submitted to every Governing Body meeting	Date: 20.07.2016 Systems Resilience Update 10.1	None	None
		4a	NHS England - South (Wessex) Assurance Review (also known as	Chief Officer	SEE No. 4a ABOVE	SEE ABOVE	None	None

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
		23	Health and Well-being Boards Work Programme	Chief Officer	Evidence of partnership working relationships in place reported through Chief Officers report to Governing Body	Date: 20.07.2016 GB paper 7 Chief Officer's update	None	None
		1	NHS Constitution Assurance	Director of Quality	SEE No. 1 ABOVE	SEE ABOVE	None	None
		15	Clinical Commissioning Improvement Plan	Director of Service Delivery	Receipt of paper to Governing Body on Clinical Commissioning Improvement Plan (CCIP). NOW DELEGATED TO Primary Care Commissioning Committee	Date: 01.06.2016 Clinical Commissioning Local Improvement Plan and Appendix 1	None	None; the identified gap was closed following presentation of the CCIP at the Governing Body on 20.05.2015
		71	Audit and Quality Terms of Reference	Secretary and General Counsel	Approval of Audit and Quality Terms of Reference by Governing Body	Date: 16.03.2016 GB paper 9.5 Appendix 2	None	None
		77	Primary Care Commissioning Committee	Director of Service Delivery	Approval of PCCC Terms of Reference by Governing Body	Date: 16.03.2016 GB Paper 9.5 Appendix 1	None	None
		17	Clinical Commissioning Committee (CCC) Terms of Reference	Secretary and General Counsel	Approval of CCC Terms of Reference by Governing Body	Date: 16.09.2015 Governing Body - Revised Governance arrangements 9.6	None	None
		25	Financial envelope agreed by Governing Body	Chief Financial Officer	Opening budget and budget reports received	Date: 16.03.2016 GB paper 20 - Opening budget and budget reports	None	None
		26	Report on Commissioning Support Services KPI	Director of Engagement and Development	Receipt by Governing Body of a paper detailing Commissioning Support Services KPIs NB/ Relates to failure of in-house support)	Date: 15.07.2015 GB Paper 9.12 Commissioning Support Services Annual Report	None	None
		5	CCG 5 year Strategy submitted to	Director of	SEE No. 5 ABOVE	SEE ABOVE	None	None

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
		6	CCG 2 year Delivery Plan	Director of	SEE No. 6 ABOVE	SEE ABOVE	None	None
		3	NHS Dorset CCG Constitution	Secretary and General	SEE No. 3 ABOVE	SEE ABOVE	None	None
		14	NHS Dorset CCG Constitution	Secretary and General Counsel	SEE No. 14 ABOVE	SEE ABOVE	None	None.
		16	Governing Body Clinical Membership and leadership	Chief Officer	Confirmation of Governing Body Terms of Reference	Approved by Shadow CCG prior to CCG commencing in April 2013	None	None
		19	CCG Risk Register	Director of Quality	Receipt of paper on Risk Register by Audit and Quality Committee (also to Quality Group)	Audit and Quality Committee paper - Risk Register plus appendices	None	None
		21	CCG Governing Body Assurance Framework	Director of Quality	Receipt of paper on Governing Body Assurance Framework by Audit and Quality Committee	Audit and Quality Committee paper Assurance Framework and appendices	None	None
		28	Executive scrutiny	Chief Officer	Executive scrutiny of organisational Risk Register via Audit and Quality Committee	Audit and Quality Committee paper Risk Register	None	None
		30	Scrutiny by Audit and Quality Committee	Director of Quality	Receipt of report on Quality Group proceedings	Audit and Quality Committee paper Quality Group report	None	None
		31	Executive scrutiny	Chief Officer	Receipt by Audit and Quality Committee of report on internal audit work undertaken during the year	Audit and Quality Committee papers	None	Individual internal audits have highlighted gaps in assurance; action plans in place.
		29	Executive scrutiny	Chief Officer	Audit and Quality Committee overview and scrutiny	Audit and Quality Committee	None	None
		18	Clinical Delivery Group (CDGs) Terms of Reference (formally CCP Terms of Reference)	Secretary and General Counsel	Approval of CDG Terms of Reference by Clinical Commissioning Committee	Terms of Reference approved at CCC meeting 15.06.2016. Item 9.5 and appendices (5)	None	None
		34	CCG Annual Report	Director of Engagement and Development	Publication of Annual Report	Publication of Annual Report onto CCG website 01.07.2016	None	None

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process		
		35	Working arrangements with Healthwatch	Chief Officer	Evidence of partnership working relationships in place evident via attendance by Healthwatch at Joint Primary Care Commissioning Committee	Regular meetings are arranged between Healthwatch and Director of Communications and Engagement (bimonthly), and the Healthwatch CEO meets with the CCG Chief Officer and Chair when requested to do so. Healthwatch representatives regularly attend JPCCC meetings.	None	None		
		36	Public Sector Equality Duty	Director of Engagement and Development	Receipt of Equality Duty progress report	Governing Body 20.01.2016 Paper 9.5 and Appendix 1 Public Sector Equality Duty Annual Report 2015	None	None		
		37	CCG Governance Structure	Secretary and General Counsel	Receipt of paper to Governing Body on Governance Documents and Changes to Delegated Authority	Date: 16.03.2016 GB paper 9.5 Annual Review of Governance and Appendices 1, 2 and 3	None	None.		
		38	CCG Commissioning Support Structure	Chief Officer	Receipt of paper to Governing Body on Commissioning Support Services	Date: 20.07.2016 GB Paper 9.12 Commissioning Support Services Annual Report	None	None		
		Operational/Management Assurance								
		33	Executive scrutiny	Chief Officer	Receipt of Quality, Performance and Risk papers to Directors Meeting	Directors Performance meeting papers 22.08.2016	None	None		
		2	NHS Constitution Assurance	Director of Quality	SEE No. 2 ABOVE	SEE ABOVE	None	None		
2.2	Failure of a significant provider	Committee Assurance								
		20	CCG Risk Register	Director of Quality	SEE No. 20 ABOVE	SEE ABOVE	None	None		

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
		22	CCG Governing Body Assurance Framework	Director of Quality	SEE No. 22 ABOVE	SEE ABOVE	None	None
		24a	KPIs	Chief Financial Officer	SEE No. 24a ABOVE ABOVE	SEE ABOVE	None	None
		24b	Quality Indicators	Director of Quality	SEE No. 24b ABOVE	SEE ABOVE	None	None
		32	Systems Resilience Group Work Programme	Director of Service Delivery	SEE No. 32 ABOVE	SEE ABOVE	None	None
		39	Scrutiny of Audit and Quality Committee	Director of Quality	Receipt of papers of Audit and Quality Committee work received by Governing Body meeting	Date: 20.07.2016 GB (Part 2) 26.2	None	None
		41	Report to Governing Body on Quality	Director of Quality	Receipt of paper for Governing Body meeting on quality	Date: 20.07.2016 GB paper 9.1 Quality report	None	None
		42	Monitoring by CQC and Monitor of Providers	Director of Quality	Receipt by Governing Body of a paper on Quality (including CQC and Monitor concerns re: Providers)	Date: 20.07.2016 GB paper 9.1 Quality report	None	None
		25	Financial envelope agreed by Governing Body	Chief Financial Officer	SEE No. 25 ABOVE	SEE ABOVE	None	None
		26	Report on Commissioning Support Services KPI	Director of Engagement and	SEE No. 26 ABOVE	SEE ABOVE	None	None
		40	Executive scrutiny	Chief Officer	Receipt of paper to Governing Body on Internal Audit report	GB paper 4.5 Annual Internal Audit Report - 25.05.2016	None	None
		19	CCG Risk Register	Director of Quality	SEE No. 19 ABOVE	SEE ABOVE	None	None
		21	CCG Governing Body Assurance Framework	Director of Quality	SEE No. 21 ABOVE	SEE ABOVE	None	None
		30	Scrutiny by Audit and Quality Committee	Director of Quality	SEE No. 30 ABOVE	SEE ABOVE	None	None
		72	Contract Monitoring	Chief Officer	Receipt of Scorecard and exception reports against performance and quality indicators	Suite of papers to Contract Monitoring meetings	None	No new contract queries were issued during Q4 and Q1, although some historic queries remain open but are being managed contractually.
Operational/Management Assurance								
		33	Executive scrutiny	Chief Officer	SEE No. 33 ABOVE	SEE ABOVE	None	None

Strategic Principle 3: Ensuring Sustainable Healthcare Services

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
3.1	Failure to implement Clinical Services Review	External assurance						
		4b	NHS England - South (Wessex) Assurance Review (also known as	Chief Officer	SEE No. 4b ABOVE	SEE ABOVE	None	SEE ABOVE
		Committee Assurance						
		32	Systems Resilience Group Work Programme	Director of Service Delivery	SEE No. 32 ABOVE	SEE ABOVE	None	None
		43	Stakeholder Engagement in Clinical Services Review	Director of Transformation	Included in Transformation Update (Dashboard) to Governing Body. Stakeholder engagement is reflected within 'public consultation' section of Dashboard	Date: 20.07.2016 (Part 2 of meeting)	None	None
		44	Involvement of Dorset Provider organisations	Director of Transformation	CEOs update meeting held bi-monthly Chairs and Leaders meeting held bi-monthly	This is an update group rather than a group that feeds assurance to CCG committees/groups which is handled through other mechanisms. The purpose of this group is to ensure partner engagement is maintained.	None	None. There is a set, structured monitoring process for CSR.
45	Involvement of Dorset LA partners including Health and Wellbeing Boards, HOSCs, Patient Representative groups e.g. Healthwatch, media and MPs and partnership Boards	Director of Transformation	Evidence included in Transformation Update to Governing Body, by exception.	Date; 20.07.2016 Transformation Update and Transformation Programme Dashboard	None	None.		

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
		46	Involvement of Clinical Delivery Groups, CCC, GPs and Secondary Care Clinicians (via Clinical Reference Groups)	Director of Transformation	Included in Transformation Update to Governing Body via Transformation Programme Dashboard (CWG and CDG lines) and Clinical Delivery Group Priorities Overview (for CDG detail)	Date: 20.07.2016 Agenda item 22 (Part 2 of meeting)	None	None. There is a set, structured monitoring process for CSR.
		78	Involvement of Clinical Delivery Groups, CCC, GPs and Secondary Care Clinicians (via Clinical Reference Groups)	Director of Transformation	Included in Transformation Update to Clinical Commissioning Committee	Transformation Update 9.6 and appendices (2)	None	None. There is a set, structured monitoring process for CSR.
		73	Involvement of Clinical Delivery Groups, CCC, GPs and Secondary Care Clinicians (via Clinical Reference Groups)	Director of Transformation	Included in Transformation Update to Director's performance meeting	Date: 22.08.2016 Transformation Update 6.1 and Appendices	None	None. There is a set, structured monitoring process for CSR.
		47	Development of a CSR Engagement and Communication Plan	Director of Engagement and Development	Circulation of the CSR Engagement and Communication Plan	Date: 16.03.2016 Included within Transformation Update (Part 2, 24) outlining the three stages of the consultation plan	None	None.
		48	Transformation Programme Plan	Director of Transformation	Transformation Programme Plan updates to Audit and Quality Committee for elements relating to value for money and patient benefit	Audit and Quality Committee paper	None	None
		74	Transformation Programme Plan	Director of Transformation	Transformation Programme Plan updates to Governing Body for elements relating to CDGs, milestones and progress against key workstreams	Date: 20.07.2016 Paper 22 and Appendices	None	None
		75	Transformation Programme Plan	Director of Transformation	Transformation Programme Plan updates to Director's Performance meeting for elements relating to CDGs, milestones and progress against key workstreams		None	None

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
		76	Transformation Programme Plan	Director of Transformation	Transformation Programme Plan updates to CCC for elements relating to CDGs, milestones and progress against key workstreams	Transformation Update 9.6 and appendices (2)	None	None
		54	Adherence to Clinical Service Review implementation timetable	Director of Transformation	Receipt of paper to Governing Body meeting on Clinical Services Review/Transformation progress	Date: 20.07.2016 Agenda item 22 (Part 2 of meeting)	None	None
		4a	NHS England - South (Wessex) Assurance Review (also known as	Chief Officer	SEE No. 4a ABOVE	SEE ABOVE	None	None
		1	NHS Constitution Assurance	Director of Quality	SEE No. 1 ABOVE	SEE ABOVE	None	None
		25	Financial envelope agreed by Governing Body	Chief Financial Officer	SEE No. 25 ABOVE	SEE ABOVE	None	None
		40	Executive scrutiny	Chief Officer	SEE No. 40 ABOVE	SEE ABOVE	None	None
		3	NHS Dorset CCG Constitution	Secretary and General	SEE No. 3 ABOVE	SEE ABOVE	None	None
		14	NHS Dorset CCG Constitution	Secretary and General Counsel	SEE No. 14 ABOVE	SEE ABOVE	None	None.
		30	Scrutiny by Audit and Quality Committee	Director of Quality	SEE No. 30 ABOVE	SEE ABOVE	None	None
		51	Executive scrutiny	Chief Officer	Executive scrutiny of organisational Risk Register via Audit and Quality Committee	Audit and Quality Committee paper - Risk Register and appendices	None	None
		52	Executive scrutiny	Chief Officer	Executive scrutiny of organisational Governing Body Assurance framework via Audit and Quality Committee	Governing Body Assurance Framework	None	None

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
		53	External Scrutiny from NHS England and external clinical experts for Clinical Services Review	Chief Officer	Included in Clinical Services Review Assurance processes	Clinical Senate: update 22.08.2016: As part of the submission to the OGSCR NHS England has confirmed that they have received sufficient assurance of the four key tests, including the clinical element that is the responsibility of the senate. As a result there are no plans for seeking any further clinical senate external independent panel reviews, although the CCG will continue to work with the clinical senate and the strategic clinical networks as the plans proceed through to consultation, decision making business case and on to implementation. The level of assurance necessary post consultation following outcome of consultation is yet to be determined.	None	None.
Operational/Management Assurance								
		33	Executive scrutiny	Chief Officer	SEE No. 33 ABOVE	SEE ABOVE	None	None
		50	Executive scrutiny	Chief Officer	Receipt by Directors of a paper detailing Commissioning Support Services KPIs.	Date: 16.02.2016 Performance meeting paper 5.4	Processes are in place to manage where KPIs are not achieved	None. As agreed at the Audit & Quality and Performance meeting 16.02.2016 this reporting process is no longer required.
		2	NHS Constitution Assurance	Director of Quality	SEE No. 2 ABOVE	SEE ABOVE	None	None
3.2	Failure to achieve the partnership targets for the Better Care Fund	External assurance						
		4b	NHS England - South (Wessex) Assurance Review (also known as	Chief Officer	SEE No. 4b ABOVE	SEE ABOVE	None	SEE ABOVE

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
		7	Better Care Fund targets	Joint Senior Finance and Performance Manager	Receipt of regular updates in relation to Better Care Fund targets. Regular review via the System Resilience Group	Inclusion in papers presented to the Audit and Quality Committee	Unknown	None
Committee Assurance								
		56	System Leadership Team and the Joint Commissioning Boards.	Chief Officer	Report to governing Body on the Better Care Fund and System Leadership Team updates	Date: 20.07.2016. Transformation update 9.14 and appendices.	None	None
		4a	NHS England - South (Wessex) Assurance Review (also known as	Chief Officer	SEE No. 4a ABOVE	SEE ABOVE	None	None
		23	Health and Well-being Boards Work Programme	Chief Officer	SEE No. 23 ABOVE	SEE ABOVE	None	None
		55a	Health Education Wessex partnership working plan	Director of Service Delivery	Attendance at Local Education Training Board (LETB) by GP Education Lead	CCGs participation in meetings (attendance confirmed at meeting on 28.06.2016	None	None
		55b	Health Education Wessex partnership working plan	Director of Service Delivery	Attendance at Local Workforce and Education Group by Workforce and/or Quality representatives	CCGs participation in regional meetings. CCG Professional Practice Lead and Head of Workforce attendance on 13.07.2016 confirmed.	None	External agency assured
		35	Working arrangements with Healthwatch	Chief Officer	SEE No. 35 ABOVE	SEE ABOVE	None	None
		5	CCG 5 year Strategy submitted to	Director of	SEE No. 5 ABOVE	SEE ABOVE	None	None
		6	CCG 2 year Delivery Plan	Director of	SEE No. 6 ABOVE	SEE ABOVE	None	None
3.3	Loss of CCG Authorisation	External assurance						
		4b	NHS England - South (Wessex) Assurance Review (also known as	Chief Officer	SEE No. 4b ABOVE	SEE ABOVE	None	SEE ABOVE
Committee Assurance								
		20	CCG Risk Register	Director of Quality	SEE No. 20 ABOVE	SEE ABOVE	None	None
		22	CCG Governing Body Assurance Framework	Director of Quality	SEE No. 22 ABOVE	SEE ABOVE	None	None
		4a	NHS England - South (Wessex) Assurance Review (also known as	Chief Officer	SEE No. 4a ABOVE	SEE ABOVE	None	None

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
		1	NHS Constitution Assurance	Director of Quality	SEE No. 1 ABOVE	SEE ABOVE	None	None
		58	Changes to Delegated Authority	Chief Financial Officer	Receipt of paper to Governing Body on Changes to Delegated Authority	Date: 16.03.2016 GB paper 9.5 16.03.2016 Annual Review of Governance and Appendices 1-3	None	None.
		59	Compliance with CCG Governance Code	Secretary and General Counsel	Update paper to Governing Body on CCG Governance Code	Date: 19.03.2014 GB paper 8.6 Compliance with CCG Governance Code - 19 March 2014	None	None
		60	CCG Clinical Committees and Groups/ Governance Structure	Secretary and General Counsel	Receipt of paper to Governing Body on Annual Review of Governance Documents	Date: 16.03.2016 GB paper 9.5 Annual Review of Governance and Appendices 1-3	None	None
		62	Clinical Commissioning Committee (CCC) Work Programmes	Director of Service Delivery	Approval of CCC Work Programmes	15.06.2016 CCC paper 9.5 and appendices	None	None
		64	Remuneration Committee Terms of Reference	Secretary and General Counsel	Update to Terms of Reference received by Governing Body	Governing Body meeting 16.09.2015 Item 9.6	None	None
		65	Internal audit plan and reports	Chief Financial Officer	Receipt of internal audit plan	Date: 25.05.2016 GB paper 4.5 Annual Internal Audit Report	None	None
		66	Standards of Business Conduct	Secretary and General Counsel	Receipt of paper to Shadow CCG Governing Body on Standards of Business Conduct	Approved by Shadow CCG prior to CCG commencing in April 2013	None	None
		19	CCG Risk Register	Director of Quality	SEE No. 19 ABOVE	SEE ABOVE	None	None
		21	CCG Governing Body Assurance Framework	Director of Quality	SEE No. 21 ABOVE	SEE ABOVE	None	None
		61	Annual Governance Statement	Director of Quality	Receipt of Audit and Quality paper on Annual Governance Statement	Paper received by Audit and Quality Committee 03.05.2016	None	None
Operational/Management Assurance								
		2	NHS Constitution Assurance	Director of Quality	SEE No. 2 ABOVE	SEE ABOVE	None	None
		57	Governing body overview and scrutiny	Chief Officer	Governing body terms of reference	Approved by Shadow CCG prior to CCG commencing in April 2013	None	None

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
Strategic Principle 4: Enabling Care Closer to Home								
4.1	Failure to work with partners	External assurance						
		4b	NHS England - South (Wessex) Assurance Review (also known as	Chief Officer	SEE No. 4b ABOVE	SEE ABOVE	None	SEE ABOVE
		67	Area Team - Specialist and Primary Care Commissioning contracts	Director of Service Delivery	Responsibility of NHS England for Assurance	n/a	None	None
		Committee Assurance						
		32	Systems Resilience Group Work Programme	Director of Service Delivery	SEE No. 32 ABOVE	SEE ABOVE	None	None
		56	System Leadership Team and the Joint Commissioning Boards.	Chief Officer	SEE No. 56 ABOVE	SEE ABOVE	None	None
		69a	Adults Safeguarding Board	Director of Quality	Receipt of update from Adult Safeguarding Board and Serious Case Reviews to Governing Body (as part of Quality Report)	Date: 20.07.2016 GB paper 9.1 Quality report	None	None
		70a	Children's Safeguarding Board	Director of Quality	Receipt of update from Children's Safeguarding Board and Serious Case Reviews to Governing Body (as part of	Date: 16.03.2016 GB paper 9.1 Quality report	None	None
		4a	NHS England - South (Wessex) Assurance Review (also known as	Chief Officer	SEE No. 4a ABOVE	SEE ABOVE	None	None
		23	Health and Well-being Boards Work Programme	Chief Officer	SEE No. 23 ABOVE	SEE ABOVE	None	None
55a	Health Education Wessex partnership working plan	Director of Engagement and	SEE No. 55a ABOVE	SEE ABOVE	None	None		
55b	Health Education Wessex partnership working plan	Director of Service Delivery	SEE No. 55b ABOVE	SEE ABOVE	None	External agency assured		

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
		69b	Adults Safeguarding Board	Director of Quality	Receipt of update from Adult Safeguarding Nurse Specialist on all aspects of Adult Safeguarding to Governing Body	Date:18.05.2016 Governing Body paper 9.9	None	None
		70b	Children's Safeguarding Board	Director of Quality	Receipt of update from Designated Nurse on all aspects of Child Safeguarding to Governing Body	Date: 18.05.2016 Governing Body paper 9.10	None	None
		1	NHS Constitution Assurance	Director of Quality	SEE No. 1 ABOVE	SEE ABOVE	None	None
		35	Working arrangements with Healthwatch	Chief Officer	SEE No. 35 ABOVE	SEE ABOVE	None	None
		5	CCG 5 year Strategy submitted to	Director of	SEE No. 5 ABOVE	SEE ABOVE	None	None
		3	NHS Dorset CCG Constitution	Secretary and General	SEE No. 3 ABOVE	SEE ABOVE	None	None
		14	NHS Dorset CCG Constitution	Secretary and General Counsel	SEE No. 14 ABOVE	SEE ABOVE	None	None.
		68	Clinical Senates	Director of Service Delivery	Evidence of partnership working	The specific topics of the Clinical Senates feed into the relevant CDG (formally CCP) programmes. To date, reviews have been on vascular (fed into the former Cardio, Stroke, Renal and Diabetes CCP) and maternity (fed into the Maternity, Reproduction and Family Health CCP). The CDGs report accordingly through to the Clinical Commissioning Committee and onwards to the Governing Body if required. Informal meetings and contact with Senate Chair and Manager continue. The Operational Delivery Network (ODN) chairs have invited CSR representation at their next meeting for an update.	None	None
		12	360 stakeholder feedback - involvement in planning,	Director of Service Delivery, Director of	SEE No. 12 ABOVE	SEE ABOVE	None	None

GBAF ID	Risk Title	No	Key Controls	Control Owner	Sources of Assurance	Positive Assurances Received	Gaps In Controls	Gaps in Assurance Process
		Operational/Managment Assurance						
		2	NHS Constitution Assurance	Director of Quality	SEE No. 2 ABOVE	SEE ABOVE	None	None