

Risk Description	Which ICS strategic goal does this impact?	What is the impact?	Target risk score and date	Current risk score	Initial risk score & Date entered	Risk Movement	Movement rationale	Controls taken	Further Controls needed	Assurances & Gaps in Assurance	Update	Risk Owner(s)	Risk ID/Committee/	Board
		What is the potential harm or hazard or delay?	Consequence x likelihood	Consequence x likelihood	Consequence x likelihood	Risk movement since last update	Why has the risk score increased/ decreased/ not changed?	What are we doing about the risk?	What more do we need to be doing about the risk to mitigate its potential impact?	How will we know the mitigations are having an impact and where are we failing to gain that assurance?	Date last updated		Ref no. Overseeing Committee	H&C/ Partnership
The Operating Plan and Development Plan will not be delivered according to plan, outcomes and timescales, which could result in system planning and programmes of work being negatively affected.	Create a system of opportunity	<ul style="list-style-type: none"> Non compliance will result in reputation impact for the ICS Inability to effectively plan for system delivery, therefore goals will not be met. 	8 30/06/2021	8	16 24/03/2021	↔	Op plan submitted and Devel Plan in progress.	<ul style="list-style-type: none"> First draft of Devel Plan submitted to SL and region for comment, with positive feedback. Second draft to be submitted to region by 30 June. Work has been undertaken throughout April on the Op Plan. First draft was submitted 6 May. Final draft was submitted 28 May. Feedback received on Op & Development Plan at ICS Stocktake 7th July H2 Planning guidance received and being acted upon 	<ul style="list-style-type: none"> Engagement events with system colleagues to ensure there is buy-in. Gather feedback on current versions of plans, continue to refine and develop to ensure they meet the need of the system. Ongoing discussions underway with national team re financial plan for C&P 	<ul style="list-style-type: none"> Delivery of robust plans that set out the system plans objectives are delivered on time. Plans are ratified by system partners, approved by region and support the operational running for 2021/22 and ICS delivery. There is a risk to delivery of the development plan and operating plan due to capacity constraints 	01/09/2021	Louis Kamfer, DoF, Kit Connick, DoS&P	01 FPPG System Leaders	P
Change in Governance models and the introduction of new leadership across the system could create a period of reduced knowledge and understanding.	Deliver world class services, standards and evidence-based practices	<ul style="list-style-type: none"> Operating without due diligence. Operating outside the constitutional and statutory requirements of the law Reputational Risk Negative impact on Patient Safety Negative impact on Quality of Care 	6 03/09/2021	12	16 01/04/2021	↔	No change to the situation	<ul style="list-style-type: none"> Mapping current Governance Structure and information flows. Understanding and planning for shadow period of new Governance structure prior to full implementation. Comprehensive WP for new leadership to be delivered. Risk escalated to regional colleagues Interim ICS Governance Lead commence in July to support governance development work. Detailed diagnostic undertaken and work 	<ul style="list-style-type: none"> Engagement and a system wide approach to the mapping of current governance structures and the development of new structures will increase system wide knowledge and understanding, suitability and 'buy in' and encourage review of effectiveness and suitability To ensure that the new governance, supporting structures and processes build on the existing levels of oversight and assurance 	<ul style="list-style-type: none"> Feedback from groups across the system, and the monitoring of any new governance structure for a shadow period will allow the system to 'test and adjust' to the new structure whilst oversight is maintained 	06.09.21	Sharon Fox, System Leaders	05 System Leaders	P
Increasing change and uncertainty as the ICS continues to develop and operate whilst adjusting to its new structure will add challenges for new and developing relationships across the system and will test established and well understood historic ones.	Deliver world class services, standards and evidence-based practices	<ul style="list-style-type: none"> Loss of system understanding and working practices. Lack of trust and a diminishing of relationships. Friction in working practices and a reluctance to collaborate. 	6 01/04/2022	12	15 01/04/2021	↔	No change to the situation	<ul style="list-style-type: none"> Delivery of the Communications and Stakeholder engagement plan ICS Newsletter and website in development Ongoing system engagement on future options via briefing paper from JT to System Leaders. OD review session planned for Oct. with view to recommence once ICB Chair and CEO appointments are made 	<ul style="list-style-type: none"> Establishment of feedback loops (including survey) and forums to check understanding and a lead by example culture of respectful challenge to be implemented throughout. The delivery of the leadership development programme. Team building activities. Ongoing OD support for development of system leadership behaviours 	<ul style="list-style-type: none"> Feedback from forums Anecdotal evidence and survey results. 	06.09.21	Laura Halstead, Head of Comms	07 Comms & Engagement Group System	P
Whilst conducting change management and moving towards a new planning and operational delivery model, it is possible that the ability and capacity to maintain a learning and adaptive culture will significantly reduce.	Deliver world class services, standards and evidence-based practices	<ul style="list-style-type: none"> The ability to seize opportunity, understand potential efficiencies and collaborative opportunities could be missed. If we lose sight of the opportunity to create a culture based on trust, respect and support for each other and the system we will significantly impact our ability to optimise working practices, relationships, efficiencies, and a baseline from which it is safe to respectfully challenge our operating model for the benefit of the population for which we have responsibility. 	4 01/06/2022	12	16 01/04/2021	↔	No change to the situation	<ul style="list-style-type: none"> Development of ICS Values and vision Development of ICS principles and ways of working Investment in OD for Senior Leaders and Clinical Leadership Recruitment commenced for the Director of Workforce Transformation & Culture to aid the leadership of system culture 	<ul style="list-style-type: none"> To maintain focus and investment in system leadership behaviours and values To develop a transformation and commissioning strategy that is aligned to our strategic aims Development of a system-wide culture and talent strategy 	<ul style="list-style-type: none"> Feedback from forums Anecdotal evidence and survey results System delivery results and outputs Staff retention and recruitment data 	08.09.21	System Leaders	08 System Leaders	P
Maintenance of clinically led and informed decision making will be lost if they are not at the core of system decision making.	Address inequality	<ul style="list-style-type: none"> Undermines aims of the ICS. Prioritisation of patient care will be lost. Population Health Management will not be achieved. Reduced understanding of clinical need across the system could adversely affect the deficit. Proactive identification of clinical requirements and the ability to plan and support with appropriate resources will be undermined. 	5 01/04/2022	15	20 01/04/2021	↔	No change to the situation	<ul style="list-style-type: none"> Agreement in the ICS documentation, process and governance that clinical leadership needs to be at the heart of the ICS Development of ICS Clinical Strategy and Clinical & Professional Group OD programme in development for Clinical Leadership - Proposal being finalised Discussion on going with region about Regional support Clinical Advice Cell recommended to give short term operational clinical recommendations. Commitment that all our ICS priorities, workstreams and enabling functions will have a Clinical Lead. JCG has re-started and considered the development issues MD group has restarted. DON and Chief Pharmacist Group already in existence 	<ul style="list-style-type: none"> Updates the clinical strategy Relaunch the Clinical & Professional Leadership Group Stronger inclusion of healthcare scientists and AHPs 	<ul style="list-style-type: none"> Leadership model in place. Clinical Representation across the system appropriate and informed at all levels. System Leaders review clinical representation. Improved decision making, with patient care at the heart of all decisions Join up of operational and financial and clinical decision making over transition to shadow structures ongoing 	18/08/21	Fiona Head, CD	10 Clinical & Professional Forum	P
The inability of the system to capture and capitalise on the lessons learnt during the COVID 19 Pandemic could slow the transformation agenda and impact the ICS's ability to harness the opportunities and dispel the threats that have been brought about under the		<ul style="list-style-type: none"> Undermines aims of the ICS. Stifles transformation agenda and impacts ability to deliver ICS within national timescales. Increased uncertainty of job security and role 	8 30/12/2021	8	16 01/04/2021			<ul style="list-style-type: none"> Director of System Delivery appointed on interim basis to co-ordinate work Clinical and operational groups will maintain focus on Covid learning Identifying key groups to take responsibility for and implement the 21/22 operation plan 	<ul style="list-style-type: none"> Development of Operational Plan that will build on Covid learning and recovery COO/DAS group established to oversee performance and recovery, mainly focused on flow and UEC pathways. Acute Provider Collaborative Plus established 	<ul style="list-style-type: none"> Impact on patient care Reduction in health inequalities Recovery monitored at SOAG 				

<p>Issues that have been brought about under the new ways of working.</p>	<p>Give people more control over their health and wellbeing</p>	<p>and ICS.</p> <ul style="list-style-type: none"> • Opportunities to address the deficit may be lost • Opportunities to establish streamlined activity and a reduction of duplication could be lost. • Has a negative effect on our aspiration to adopt a learning organisational culture. • Multi-disciplinary approach to care and the benefits to both the patient and clinicians could be compromised. • Waiting List timeframes remain unchanged or are slow to recover - directly affecting patient care and health outcomes. 	4	2	4	2	4	4	↓	Reduced Risk	<p>and implementation of the 2022 operating plan ensuring enough capacity is retained to deliver the recovery plan.</p>	<ul style="list-style-type: none"> • Ensure sufficient resources are available to oversee performance and Elective and Diagnostic recovery. • Both groups aware of and embedding the learning from the COVID pandemic so far. 	31.08.21	Graham Wilde, DoSD	13 SD&T Group	P
<p>Without a regional way of working that is flexible and takes account of our local issues, the ability to influence change for the population of Cambridgeshire and Peterborough will be limited.</p>	<p>Deliver world class services, standards and evidence-based practices</p>	<ul style="list-style-type: none"> • Inability to adapt guidance and approach to ways that benefit C&P population and strategic aims of our ICS 	4	6			8		↔	No change to the situation	<ul style="list-style-type: none"> • Development Plan sets out the approach and timelines for C&P ICS • Regular and open dialogue with regional colleagues • Adaptation of national and regional guidance to system needs • Key risks for C&P were escalated to the region at ICS Stocktake on 7th July 	<ul style="list-style-type: none"> • Clarity on regional/national expectations re guidance and processes • Ongoing pursuit of place-based development based on patient need, using data to drive changes • Balance risk of delivery against financial control needed 	08.09.21	System Leaders	14 System Leaders	P
<p>The ability to deliver strategic commissioning (and delegated commissioning) at a system level and to hold contracting arrangements at Place will be limited by the workforce skill set and capacity available, combined with the transfer of appropriate budgets.</p>	<p>Create a system of opportunity</p>	<ul style="list-style-type: none"> • Undermines the aims and objectives of the ICS. • Induces conflict over ensuring best use of financial resources. • Overburdens the workforce • Has the potential to negatively impact workforce well being. • Could impact volume, quality and provision of care. • Responsibility but no additional resource or 'lever' to implement appropriate data informed commissioning of these services. • There is a finite number of specialists in these areas, access may be limited. 	8	12			16		↔	No change to the situation	<ul style="list-style-type: none"> • Lead Director identified for this workstream • Engagement with NHSE/I has commenced • Risks identified and escalated • A series of workshops has commenced to consider options for future commissioning, which the CCG leads are fully engaged in 	<ul style="list-style-type: none"> • Ensure attendance at all NHSE meetings • Ensure Transition committee receiving regular updates • Phased implementation supported by Regional board. 	09/01/2021	Jane Webster, DoC	15 System Leaders	P
<p>If we are unable to secure additional engagement resources within the desired timeframe, the ability to draw the wider ICS system together, deliver a cohesive and well communicated and understood plan will be directly affected.</p>	<p>Deliver world class services, standards and evidence-based practices</p>	<ul style="list-style-type: none"> • Delay in the delivery of the engagement programme. • Negative impact on the ability of the system to deliver change management and support it's people and wellbeing • Could impact on staff morale and wellbeing • Additional 'ask' of already stretched workforce 	4	12			16		↔	No change to the situation	<ul style="list-style-type: none"> • Utilising CCG Comms and Engagement resource plus support from the wider comms cell. • Recruitment of additional Comms and engagement workforce • No appointment after the first round of recruitment, but have gone back to advertisement with shortlisting being undertaken on 7th September 21 	<ul style="list-style-type: none"> • Commence recruitment process for roles • Maintain ICS communications and engagement via existing resourced • Commence work on Engagement Strategy, working with system partners 	06/09/2021	Laura Halstead, Head of Comms	16 Comms & Engagement Group	P
<p>The alignment of emerging national guidance direction with the local narrative could affect current direction of travel and impact timelines.</p>	<p>Deliver world class services, standards and evidence-based practices</p>	<ul style="list-style-type: none"> • Delays associated with a required change to 'in place' plans 	6	9			12		↔	No change to the situation	<ul style="list-style-type: none"> • In our Development Plan narrative we are clear that there is guidance and information coming from NHSE/I that we will need to adapt to our ICS programme of work • Engaging in all national and regional development programmes e.g. Test Site, Governance & Policy workstream • Reviewed 20/7/21 and no change 	<ul style="list-style-type: none"> • Guidance is reviewed regularly for potential impacts. • Iteration of the Development Plan and activity to reflect the guidance and how it impacts on C&P ICS 	06/09/2021	Laura Halstead, Head of Comms	17 Comms & Engagement Group	P
<p>The voluntary and community sector is not at the heart of ICS planning, infrastructure and service developments, which would result in a reduced offer to our system and the community it serves.</p>	<p>Create a system of opportunity</p>	<ul style="list-style-type: none"> • Undermines the aims and objectives of the ICS. • Has the potential to negatively impact on the VCSE sector • Could impact on the volume, quality and provision of care. 	6	9			12		↔	new risk	<ul style="list-style-type: none"> • In our Development Plan narrative we are clear that the VCSE play a strategic and operational role in our ICS • Working with the sector to ensure they are engaged at the right levels and part of the ICS governance • Using national guidance and applying it locally • Involvement in key system decisions 	<ul style="list-style-type: none"> • Guidance to be reviewed regularly for potential impacts and an understanding of how we apply it to C&P • That we involve the VCSE in development of the ICS - governance and functions 	06/09/2021	Laura Halstead, Head of Comms/ Julie Farrow, CX Hunts Forum	32 Comms & Engagement Group	P