








5.1 Fragmentation of patient pathways leading to poor quality care through non-delivery of transformation programmes and loss of ownership / partnership working with county councils.

Non-delivery of transformation programmes and loss of partnership working could result in:

- Failure to deliver financial plans
- Failure to deliver integrated joined up care to our patients
- Failure to see improvements patient outcomes and experience


Risk Owner	Lead Committee	Next Review Date	Status	Direction of travel
Chief Officer and Director of Transformation	Executive Health and Care Commissioning Committee	January 2020	 <p>Effectiveness of controls overall = partial at 68%, 75% required to reflect full effectiveness.</p>	





Original Risk			Current Risk				Target Risk			
Impact	likelihood	Rating	Impact	likelihood	Rating	Movement	Impact	likelihood	Rating	Target date
4	1	4	4	1	4	↔	4	1	4	April 2015 (achieved)



Control	Description	Assurances	Status	
5.1a Cross-sector participation in key decision making groups. <i>Responsible Director: TC</i>	Cross system providers informing whole pathway redesign	Internal: Minutes of key decision making groups. Adoption of Right Care principles across system; ICP Memorandum of Understanding agreed.		Fully effective
5.1b Membership of programme boards. <i>Responsible Director: TC</i>	System membership and ownership of decision making. Patient informing service redesign. (Governance sign off of new programme board structure by ICP.)	Internal: Minutes of programme boards. External: Evaluation of transformation programmes including patient/carer experiences.		Partially effective
5.1c Executive Team.	Strategic alignment of transformation programmes and managing operational and financial risks.	Internal: Governance structure including Board sub-committees Terms of Reference.		Fully effective
5.1d System leadership.	Alignment of transformation to achieve system strategy for integration	External: System Leadership Group. Meeting minutes.		Fully effective
5.1e Better Care Fund (BCF) – Older people.	Pooled budget with Essex County Council (ECC) for the commissioning of health and care services.	Internal: Finance and Performance Committee Strategic Commissioning Partnership. Quarterly Better Care Fund Reporting Committee.		Fully effective

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5.1f Older People Neighbourhood Board (replacing Partnership Board established 2015)	The West Essex Neighbourhood Board is being established to support the delivery of integrated health and care delivery across the 3 west Essex localities with a focus on older people.	External: Programme Board. Internal: Executive Health and Care Commissioning Committee		Partially effective
5.1g Adult Pathway Board established May 2015 10/18 Agreed shadow from November for full adoption 04/19.	For the West Essex health and Care system. New ICP governance framework agreed by System Partnership Board replaces this Board with Expert Oversight Groups and Transformation Board.	External: Programme Board Internal: Executive Health and Care Commissioning Committee		Fully effective
5.1h Community Mobilisation: (Claire Cowdery)	CCG has confirmed delivery of a co-produced Participatory Budgeting Grants Programme to enable local people to directly influence decision making in local service provision	External appointment of UCVS to deliver programme		Fully effective
5.1j Smartlife Social Prescription Model. (Claire Cowdery)	Targeted at areas with most need, by ensuring that the services available in the community and voluntary sector (from befriending services to benefits and financial advice) are available to the most vulnerable patients identified by our GP practices.	Internal Smartlife Programme and Social Prescription Monitoring		Fully effective
5.1o Chief Officer meets regularly with district councils.	Forum and one-to-one meetings held with district leads.	External: Meeting minutes.		Fully effective
5.1r Business items on agendas for GP shutdowns, stakeholder meetings.	Business items are determined through Executive Committee and Executive Health & Care Commissioning Committee meetings.	Internal: Meeting notes.		Fully effective
5.1t Accountable Care Partnership Board	Taking forward Integrated Care Programme with ECC and CCG.	Internal: Minutes of meetings. Terms of Reference.		Fully effective

Control	Description	Assurances	Status	
5.1u Through membership of a range of strategic partnership meetings, the CCG is actively promoting working together to achieve the collective partnership potential. <i>Responsible Director: PW</i>	Member of LSP Uttlesford Futures – Board and Health and Wellbeing Sub-committee, Safer Harlow Partnership RAG Meeting, One Epping Forest – Board (under review), Epping Forest Health and Wellbeing Partnership sub-committee, West Essex Programme Older People Group (being replaced by Older Peoples Integrated Partnership Board) and a range of Community Safety Partnership meetings. Neighbourhood development – Harlow and Epping Forest District Council attending.	External: Terms of Reference and meeting minutes.		Fully effective
5.1v Systems Development Board in place.	Provides oversight of integrated care business case and work programmes.	External: Terms of Reference and meeting minutes.		Fully effective
5.1w West Essex CCG/ECC have a specific reablement specification <i>Responsible Director: TC</i>	As part of the county wide reablement contract this supports the delivery of integrated community health and care teams to reduce duplication of assessment and provision for west Essex residents. New contract with Alliance live from May 2016.	External: Local Delivery Board, part of the Emergency Department implementation plan.		Fully effective
5.1x Operational plan <i>Responsible Director: TC</i>	Integrated Care Partnership (ICP) meets routinely and delivers agreed work programmes. 3 phase integration timeline process in place. PMO monitors implementation of 5 year plan.	Internal: System Operating model Framework for 2016-17 and 2017-18 approved by CCG Board. Finance & Performance Committee monitoring new Local Delivery Board (approval February 2017.)		Fully effective
5.1y Frontline staff engagement.	Work now mainstreamed with partners. We are sharing communication and supporting each other's comms.	External: ICP has agreed draft comms and engagement plan		Partially effective

Control	Description	Assurances	Status	
5.1z CCG project to understand how we work with specialist commissioning <i>Responsible director: C Moss</i>	No new services moving to co-commissioning, WECCG now attend combined provider / commissioner meetings run by specialist commissioners for East of England. Developing around place based commissioning, co-commissioning between ccgs and specialist commissioning are planned.	Plan is for specialist commissioning to work in STP footprints using place of care commissioning model. A strategic group with NHS E, STP and provider representation is now meeting. 09/18 – Ad hoc problem specific meetings take place, although further emphasis on prioritising these is considered necessary.	 Partially effective	
5.1za Joint procurement with ECC – Essex wide nursing home procurement.	Contracts issued for 5 of the 16 homes (which is the full extent of the procurement).	External: contract documents	<i>Not yet effective as a control as the contract does not provide sufficient capacity in west Essex or offer any different way of working with partners.</i>	

Action	Due Date	Assigned To	Expected Outcome		Latest Update	Status	
New programme governance arrangements.	Mid-September 2019	James Roach		In progress	01/19 ICP Assurance Framework and contracting priorities now being implemented in line with April 1 st Contractual Transaction. <i>(09/19 JR advises no further update at present.)</i>		In progress
Review governance structure to align with ICP including Expert Oversight Groups.	Mid-September 2019	James Roach		In progress	09/18 ICP Board will have delegated authority to act on behalf of the system. (This is subject to individual Board Approval.) This model will launch on the 1 st March 2019. <i>(09/19 JR advises no further update at present.)</i>		In progress

Action	Due Date	Assigned To	Expected Outcome		Latest Update	Status	
Agree a collaborative approach for commissioning of voluntary sector services from 2019/20.	2018/19	Peter Wightman / Jess Steele		Action complete	07/19 Grant funding rounds rolled out for Uttlesford and Epping Forest. Harlow due to go live in July.		Action complete

Rationale for current score:

Until fully integrated commissioning and provision of patient pathways with pooled resources, shared outcomes, priorities and incentives there remains a risk of fragmentation of patient pathways.