

Appendix E - BCF Programme Risk Register

Likelihood	Consequences				
	1 (Insignificant)	2 (Minor)	3 (Moderate)	4 (Major)	5 (Catastrophic)
1 (Rare)	1	2	3	4	5
2 (Unlikely)	2	4	6	8	10
3 (Possible)	3	6	9	12	15
4 (Likely)	4	8	12	16	20
5 (Almost certain)	5	10	15	20	25

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BCF1	If Health and Care partners fail to deliver an integrated care programme, within the national guidance, financial envelope and key milestones of the agreed BCF plan, then it could lead to the non-achievement of a number of national conditions and performance thresholds which could result in elements of the BCF funding being withheld.	3	3	9	High	Sep-14	Well established multiagency governance structure since 2014. Monthly reporting, including rigorous performance reporting, on overall progress into governance structure at operational and strategic level. Consolidation of reporting into STP PMO for LLR-wide assurance. Section 75 agreement refreshed at least annually and reviewed on a quarterly basis by the IFPG. Quarterly reporting via NHSE on national template for BCF assurance. Detailed programme plan - reviewed monthly. Evaluation of BCF schemes. Proactive comms plan in place with dedicated microsite for Health and Care Integration. Wide ranging engagement plan undertaken for the BCF plan across all partners. Alignment of the key risk(s) into LCC and NHS partners risk registers.	Cheryl Davenport	2	3	6		Open
BCF2	If BCF delivery costs are greater than estimated, or reviews of schemes do not identify sufficient financial benefits, then the programme will not achieve the cost improvement plan required.	3	3	9	High	Apr-17	£1m efficiency target set for 2017/18 BCF Plan. Agreement reached during refresh as to where the saving should be made. Maximise use of the ASC allocation in support of financial pressures. Good level of confirm and challenge into financial assumptions across partners, review of Business Cases and investment proposals on a multiagency basis. Proactive financial management across BCF schemes monthly, and report progress to the IFPG quarterly including performance against efficiency target. Monthly summary provided via Programme Highlight Report to Operational Group and IE. Liaise with Project Leads regarding progress on programme reviews (e.g. Home First Project Lead on the baseline review of all current reablement spend, activity and outcomes). Annual refresh of BCF plan with strong focus spending plan. Re-profile spending plan where applicable within service lines to better match milestones if any significant variances occur. Agreement in section 75 to be able to off-set an overspend in one scheme against underspends in other schemes. Engagement as needed in internal/external audit processes and reviews to test controls and improve processes based on recommendations where applicable.	Cheryl Davenport	2	3	6		Open
BCF3	If national policy changes to the BCF source/type/amount of funds then the BCF plan may need to be significantly amended, e.g. the Improved BCF and Disabled Facilities Grants (DFG) allocations, etc.	3	2	6	Medium	Feb-16	Close monitoring of national policy and allocations. Engagement and reporting via LCC Cabinet and other partners. Early & regular engagement with Districts on planning assumptions from 2017, and quarterly monitoring of spend implemented from April 2017. Early engagement/agreement with NHS partners on the new ASC allocation to ensure maximum effect. Mitigation via LCC for the DFG 2016/17 financial pressures for 2017/18 affecting the BCF plan. This mitigation has been applied on a non-recurrent basis. Recurrent solution is part of the BCF efficiency target. Development of the Lightbulb business case and service roll-out targets greater efficiencies from DFG processes/allocations across Leicestershire. Proactive management of political and reputational impact of DFG allocations across officers & members in two tier system. Approval of Lightbulb business case via LCC and Districts.	Cheryl Davenport/ Jon Wilson	3	2	6		

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BCF4	If ASC protection levels are not sufficient or demand outstrips assumptions then it could impact delivery against the BCF national conditions and metrics.	2	3	6	Medium	Sep-14	Annual refresh, and review with partners, of ASC protection allocation to meet BCF guidance and stakeholder requirements. Ensure elements for ASC protection map clearly to the conditions/metrics in the BCF and STP workstreams and that the components have clear, measurable benefits. Ongoing analysis between ASC MTFS assumptions and the BCF Plan. Any residual risk/shortfall identified to be addressed in the wider County Council MTFS planning process through review of growth and savings requirements. Using ASC allocation to maximum effect to support the ASC strategy based on prevent, delay, reduce & demand. ASC Transformation Board in place to govern delivery of MTFS savings and transformation work linked to the strategy. LCC risk pool for HTLAH savings assumptions linked to the MTFS. Capacity and demand modelling within STP to improve service and financial planning assumptions for ASC. LLR Urgent Care action plan & dashboard in place which is tracking the impact on ASC against key metrics. New workstream of STP focused on discharge, recovery and reablement (Home First). Application of the PI tool and simulation modelling to key ASC activities. New LCC BI strategy focuses on providing improved analytical tools and outputs to support costing, activity modelling, and performance management in ASC.	Cheryl Davenport/ Jon Wilson	2	3	6		Open
BCF5	If schemes in place aimed towards achieving the four BCF outcome metrics (non-elective admissions, delayed transfer of care, permanent admissions to care homes, reablement 91 days post discharge) do not have the level of impact expected then this could result in: * CCGs being unable to release the planned level of funding during the financial year * providers not being able to extract the required level of capacity from the system. * ASC being unable to deliver transformation and savings plan. * Leicestershire BCF Plan being escalated upwards to NHSE.	3	3	9	High	Sep-14	Set realistic stretch projections on outcome metrics in consultation with key partners. KPIs beneath the main metrics to seek further assurance on delivery/impact of specific interventions with dedicated analyst time to support data capture, analysis and reporting. Ongoing review of the impact of individual BCF schemes against BCF metrics and trajectories, and an evaluation programme. New performance dashboard (April 2017) to provide further insight for decision making purposes. Challenge given to provide assurance on progress. Annual process for reviewing the addition/exclusion of BCF schemes as part of BCF refresh process. Evidence base/analysis for proof of concept/business case development to be linked more clearly to trajectory assumptions. Clear line of sight from BCF plan to acute contract activity and financial assumptions/STP capacity planning. Scenarios addressed in risk sharing agreements where applicable. (Commissioner only) IFPG in place to govern delivery of s75 pooled budget and performance management on quarterly basis locally, and in support of NHSE quarterly returns. Alignment with STP reporting dashboards, e.g. logic models for Home First and Integrated Teams, new DTOC dashboard. Refresh LLR DTOC assessment (high impact changes tool). Oversight of performance quarterly to HWBB and other key partners.	Cheryl Davenport	3	2	6		Open

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BCF6	If the BCF plan is not aligned with the LLR-wide strategic programmes (including the STP programme) then it could potentially result in duplication or an uncoordinated programme across partners.	2	3	6	Medium	Sep-14	As part of the BCF refresh, complete mapping exercise to ensure that key components are mapped and governed within the STP programme where appropriate. Clear programme plan and project roles for delivering service lines within the BCF, which includes matrix working with STP workstream programme leads where applicable. Representation from the LA on the LLR SLT and STP workstreams (where appropriate). STP updates included in All Member Briefings on a regular basis. HWBB has a 'confirm and challenge' role for two themes of the STP (Integrated Teams and Community Hospitals), and receive six-monthly updates on the STP programme as a whole. LCC Cabinet engaged in the development of the STP 5 year plan. Ensuring that the Integrated Points of Access Programme is formally adopted into the STP.	Cheryl Davenport	1	3	3		Open
BCF7	If the overall BCF plan and individual BCF schemes within it, are not sufficiently or robustly planned, and risks are not effectively managed, then the programme may result in: * overspend on the BCF spending plan, and non-achievement of saving targets. * delays/slippage on delivering the BCF programme. * commissioning decisions not supporting the integration programme objectives. * lack of contingency plan/effective alternative schemes if parts of the BCF plan is failing. * inadequate change control process in place.	3	2	6	Medium	Mar-17	Structured approach to annual refresh of the BCF Plan. High level & detailed programme plans. Expenditure realistically profiled to plan. Contingency agreement per the pooled budget. Governance via Integration Programme governance. Operational Group will ensure challenge is applied to all phasing of the schemes to ensure that implementation happens in the right order. Monthly highlight report monitor progress of the overall programme. Proactive integration/BCF team, working at pace, maintaining excellent relationship management with all agencies, chasing delivery of actions and managing the BCF budget on a daily/weekly/monthly basis - all delivered via matrix working across the health and care system. Dependencies being mapped with STP delivery plans e.g. digital roadmap, Urgent Care, Integrated Locality Teams and Home First workstreams. Process in place for tracking efficiency programme. Process in place for new funding requests which requires detailed information on scheme. Full business case development for significant schemes, to be signed-off through relevant governance routes. Annual development session of the HWBB to check alignment of commissioning intentions across partners. Joint commissioning priorities identified via the integration work programme.	Cheryl Davenport	2	3	6		Open
BCF8	Lack of visibility/engagement across wider stakeholders including the public and VCS.	2	2	4	Medium	Sep-14	Comms & engagement plan in place. Annual refresh and reviewed quarterly. Extensive engagement during BCF refresh - evidenced in annual submissions. Regular stakeholder bulletins, All Member briefings & engagement with partner organisations including LCC, Districts, CCGs, UHL, LPT, Healthwatch etc. BCF Plan public summary, plan on a page. Dedicated comms resource for the BCF. Also same comms resource for STP programmes (e.g. comms resource for Home First, Integrated Teams and Integrated Points of Access). Microsite in place for online presence. Leading communications and engagement for key elements of the STP – e.g. integrated locality teams. More targeted engagement planned with front-line staff for 2017/18. Dissemination programme for showcasing local practice regionally and nationally e.g. via ADASS, BCF national channels and webinar/conference/academic channels e.g. cascade of SIMTEGR8 outputs.	Cheryl Davenport	1	2	2		Open

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BCF9	If there is insufficient capacity or expertise available within the Integration Programme Team, then it could impact on the delivery of the BCF programme.	2	2	4	Medium	Sep-14	<p>BCF programme plan in place.</p> <p>Operational Group meet monthly to ensure detailed oversight & remedial action where necessary.</p> <p>Project Managers assigned to individual schemes where applicable with matrix working into STP workstreams.</p> <p>Refresh of staff resource plan factored into the BCF refresh process annually.</p> <p>Interim resource supporting the delivery of key areas of work where necessary (e.g. falls)</p> <p>STP workstreams are being populated with programme resources, STP PMO resourcing TBC in early 2017/18.</p> <p>Reviewed business continuity arrangements of BCF/Integration team based at LCC.</p> <p>Weekly team meetings to manage resource and delivery within the integration team.</p> <p>6 month planning sessions for the integration/BCF programme plan to ensure forward resource planning and remedial action as needed.</p> <p>Link in with STP enabling workstreams, e.g. OD, IM&T, etc.</p> <p>LCC hosted programme team is well supported by LCC corporate departments and technical expertise (e.g. procumbent).</p>	Cheryl Davenport	2	2	4		Open