Risk ID CRR0005 Risk Title Development of ICS/ICP in Kent and Medway NHS system					
Source / Cause of Risk  The Kent & Medway NHS system is under significant pressure with increasing levels of demand driving across financial deficits across commissioner and provider budgets, placing pressure on the Kent & Medway NHS system control total.  In response the NHS in Kent and Medway forming an Integrated Care System (ICS) with 8 CCGs merging to form the basis of the System Commissioner, above four ICPs (Integrated Care Partnerships) and 42 PCN's (Primary Care Networks).  The policy intent of structural reform is to deliver better strategic planning and delivery of health and social care services at place-	Risk Event  Failure to develop more partnership and aligned health & social care services and commissioning at both ICS and ICP level places pressure on system finances and hinders highest possible quality of care  Development of four ICP generates additional demand/work on strategic leadership of KCC, particularly in ASCH and Public Health which has significant opportunity costs, including impact on business as usual activity.  Multiple ICP's leads to differences in form, function and relationships between	Consequence Further deterioration in the financial and service sustainability of health and social care services in Kent and Medway.  Additional budget pressures transferred to social care as system monies are used to close acute and primary care service gaps.  Legal challenge/judicial review of decisions and decision-making framework for joint decisions.  Social care and public	Risk Owner Penny Southern, Corporate Director Adult Social Care & Health (ASCH) Vincent Godfrey, Strategic Commissioner Andrew Scott- Clark, Director Public Health  Responsible Cabinet Member(s):  Roger Gough, Leader of the Council	Current Likelihood Possible (3) Target Residual Likelihood Unlikely (2)	Current Impact Serious (4)  Target Residual Impact  Serious (4)
based community level and shift from acute to primary and community level services.  The relative roles and responsibilities between the proposed ICS and the emerging ICPs in Kent is still under development. The final legal structure and functional responsibilities of ICPs is still	ICPs and the ICS and/or KCC which increases system complexity and leads to variation which increase costs/risks.  System complexity leads to failure to meet statutory duties around the sufficiency of the care market, care quality and safeguarding.	Social care and public health priorities not sufficiently factored into/shaping emerging ICS/ICP plans and priorities, weakening integrated approach.  Focus on structural changes workstreams prevents more agile improvements/joint	Clair Bell, Adult Social Care and Public Health		

under development and may require primary legislative change.

Regulators (CQC / Ofsted) increasing review health and care services and the commissioning/performance of those services and 'system' level.

Lack of understanding within KCC of NHS policy and regulatory environment; and vice versa, lack of understanding of local authority legislative, policy and democratic environment in NHS.

working being undertaken.

Reputational damage to either KCC or NHS or both in Kent.

Adverse outcome from CQC local system review.

Control Title	Control Owner	
Health Reform and Public Health Cabinet Committee provides non-executive member oversight and input of KCC involvement in the STP	Ben Watts, General Counsel	
Senior KCC political and officer representation on the System Transformation Executive Board and System Commissioner Steering Group	Penny Southern, Corporate Director ASCH	
	Andrew Scott-Clark, Director Public Health	
	Vincent Godfrey, Strategic Commissioner	
Senior KCC level officer representation on the East Kent, West, North and Medway & Swale ICP Development Boards	Penny Southern, Corporate Director ASCH	
County Council agreed framework for KCC engagement within the STP	Penny Southern, Corporate Director ASCH	
A joint KCC and Medway Health and Wellbeing Board for STP related matters/issues has been established	David Whittle, Director SPRCA	
Public Health Leadership for the STP Prevention workstream	Andrew Scott-Clark, Director Public Health	
Working through KCC Public Health partnership with the Kent Community Healthcare Foundation Trust (KCHFT) to ensure Public Health improvement programmes are linked and delivered alongside Local Care through Primary Care Networks and other primary care providers (e.g. community pharmacy)	Andrew Scott-Clark, Director Public Health	

Action Title	Action Owner	Planned Completion Date
Review appropriate level of KCC representation at subject specific ICP boards once the governance has been finalised in each ICP.	Penny Southern, Corporate Director ASCH	April 2020 (review)
Implementation of Adult Social Care and Health whole system Programme of change to deliver social care outcomes in a more efficient and sustainable way.	Penny Southern, Corporate Director ASCH	May 2020 (review)