

07/01/2025

Risk category Strategic aim	Risk ref	Date identified	Directorate Level of control Committee	Description	Initial			Controls	Gaps in control	Internal assurances	External assurances	Gaps in assurance	Actions Action owner Details Progress	Residual			Reviews			Target		
					C	L	Score							C	L	Score	C	L	Score			

Key risk: The ICB fails to commission services in a way that tackles the wider causes of ill health, and life expectancy of people within the North East and North Cumbria is not improving.

04 System Recovery	NENC/0025	19/10/2022	NENC Chief Nurse And AHP	Significant workforce pressures in maternity services across the system If maternity services do not have adequate staff to provide safe services there is a risk to patient safety and patient experience. Inadequate workforce will also mean that it will be difficult to implement the actions identified in the Ockenden report and could lead to poor CQC inspections. This could lead to the ICB failing to commission safe services with consequent damage to reputation and potential loss of public confidence in wider NHS service delivery.	4	4	16	Workforce steering group with membership from providers and NHS England	None	Terms of reference Meeting notes and action plans	Regional Maternity Transformation Board oversight Regional Perinatal Quality Oversight Board	None	01/04/2024	31/12/2024	4	3	12	(5). Quarterly	4	2	8
		Ann Fox	NENC ICB Partial Control		Local Maternity and Neonatal System (LMNS) Leads and LMNS Coordinators to work with providers to identify alternative ways of working and looking at sharing good practice	No implementation plan or clear measures in place as yet		Workforce vacancy rates received by LMNS team	National tool - Birth Rate Plus in place with providers	Fragmentation within ICB around workforce planning means information not consistently being fed into LMNS	Risk controls and assurances in place - no further actions required at last review	Control description updated.									
		Michael Dunn	3. NENC Quality And Safety Committee		Health Education England and regional maternity transformation team support with workforce LMNS funding allocation for 24/25 has been recieved and confirmed that Ockenden II and III funding is now recurrent	None		Meeting notes and reports	None	n/a	Funding letter is provided by National Maternity Team (NHSE)	n/a									
04 System Recovery	NENC/0009	06/07/2022	NENC Strategy And System Oversight	Primary care services As a result of pressure on general practice services there is a risk that services cannot be provided to patients resulting in patient harm, increased attendance at hospital settings and compromised patient flow. This would mean the ICB cannot fulfil its statutory responsibility to deliver primary medical care services and be damaging to the reputation of the ICB.	4	4	16	Strategic Data Collection Service (SDCS) reporting system to monitor workforce.	None	Monitoring at place-based delivery primary care commissioning groups.	Strategic Data Collection Service (SDCS) reporting	None	01/04/2024	31/03/2025	4	3	12	(5). Quarterly	4	2	8
		Jacqueline Myers	NENC ICB Limited Control		Primary Care Network (PCN) transformation agenda linked to Long Term Plan	None		Single OPEL framework agreed to ensure consistency across the ICB and promote increased reporting of OPEL levels.	NHS Long Term Plan	None	Ongoing actions and initiatives to support PCARP, the fuller and Long Term Workforce Plan (including ARRS workshops, training hubs, retention and recruitment initiatives, improving links with PCNs and community pharmacy, and digital programme of work).										
		Alex Sinclair	3. NENC Quality And Safety Committee		Operational Pressures Escalation Levels (OPEL) status for practices reported via UEC-RAIDR App	None		Monitoring at place-based delivery primary care commissioning groups	None	None	None										
					Primary Care Access Recovery Plan (PCARP)	None		Support from place-based delivery primary care teams to practices	None	None	None										
					System Overview Group	None		Oversight of PCARP and SDF delivery through System Overview Group and Primary Care Transformation team	Strategic Data Collection Service (SDCS) reporting	None	None										
					ICB Primary Care Strategy and Delivery Subcommittee	None		Minutes and reports for the ICB Primary Care Strategy and Delivery Subcommittee.	NHS Long Term Workforce Plan	None	None										
					Placed based delivery primary care teams and Support Level Framework aligned to delivery of PCARP	None		Board and Executive Committee review of PCARP and Primary Care / Secondary Care Interface System Plan.	System workforce retention reporting	None	None										
					Initiatives to support PCARP, the fuller and Long Term Workforce Plan (including ARRS workshops, training hubs, retention and recruitment initiatives, improving links with PCNs and community pharmacy, and digital programme of work).	None		Monitoring at place-based delivery primary care commissioning groups, co-ordinated by an overview group.	Strategic Data Collection Service (SDCS) reporting	None	None										
						None		Oversight of PCARP and SDF delivery through System Overview Group and Primary Care Transformation team	NHS Long Term Plan	None	None										
			None	Minutes and reports for the ICB Primary Care Strategy and Delivery Subcommittee.	NHS Long Term Workforce Plan	None	None														
			None	Board and Executive Committee review of PCARP and Primary Care / Secondary Care Interface	System workforce retention reporting	None	None														

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								GPPC workforce group in place enabling joint practice recruitment and retention initiatives	None	System Plan. Monitoring at place-based delivery primary care commissioning groups, co-ordinated by an overview group. Action logs Governance through GPPC executive	None	None identified										
02 Quality	NENC/0047	06/03/2023	NENC Medical Directorate NENC ICB Partial Control 3. NENC Quality And Safety Committee	High rates of suspected suicides The rates of suicide in the northeast and north cumbria are the highest in the country at 13.4 per 100,000 people. Suicide is the leading cause of death in our region for men aged 15 - 49 and women aged 20-34. The risk to the ICB is that we do not reduce the suicide rate for people in contact with NHS commissioned and health care delivery services, amenable to healthcare preventative efforts.	4	4	16	Quality and accountability of commissioned services. Tackling means and methods of suicide Improving services through listening and learning from individuals and families. Equitable, effective and targeted treatment and support for groups known to be at high risk of suicide. Programme group established. Support and training for NHS staff to increase skills and capability. Providing effective and appropriate crisis support.	None. TEWV footprint for audit cluster and increasing trend response not consistent across local authorities. No consistent mechanism in place. Availability of data and funding for training and post intervention support services, specifically children and young people. Lack of funding - WTE funding proposal submission Jan 24 Lack of funding - added to commissioning intentions	Mental Health, Learning Disability and Autism Sub-committee programme reports, performance reports and minutes. Suicide audit in CNTW footprint initially. ADPH project to update response guidelines Suicide audit missing underway on 1st November for CNTW footprint interface with DoN and Safeguarding to be strengthened Mental Health, Learning Disability and Autism Subcommittee programme reports, performance reports and minutes. CNTW/TEWV peer network and volunteer bank support Population health management. Mental Health Learning Disabilities and Autism Sub-committee reports and minutes. Emergency responders suicide prevention training. Review of post intervention support services. Project outputs to reduce self-harm (prevention and support for near miss.) Emergency services data. Scoping within the programme group of what good support looks like for people impacted by a near miss suicide. Mental health, Learning Disability and Autism Sub-committee reports and minutes. Plans to delivery training. Mental health, learning disability and neurodiversity subcommittee	ICP strategy and NHS England national suicide prevention strategy now available. Working with other agencies such as OHID and NHS England. National suicide prevention strategy - department of health and social care NHS England and suicide prevention strategy Suicide prevention strategy ICP strategy and NHS England	Audit is only available on CNTW footprint. Lack of data to inform decision making and trends. No mechanism in place for near misses and lack of data available None None None	28/06/2023 Catherine Richardson suicide prevention ICB programme plan in development the ICB suicide prevention programme updated in light of new England suicide prevention strategy Date Entered : 15/12/2023 10:56 Entered By : Catherine Richardson	31/03/2025	4	3	12	(5). Quarterly 06/11/2024 Catherine Richardson Risk reopened - risk description to be reviewed by owner.	4	2	8	
02 Quality	NENC/0024	01/07/2022	NENC Chief Nurse And AHP Ann Fox NENC ICB Partial Control 3. NENC Quality And Safety Committee	Quality of commissioned services that fall below the required standards, putting patient health, safety and welfare at risk. As a result of the quality of commissioned services not being assessed and monitored within a structured and coordinated process of assurance (including acute, mental health, learning disability, community and all age continuing care services), there is a risk that the ICB remains unaware of any quality issues or concerns and associated action	5	4	20	All large providers on NHS Standard Contract with clear performance expectations and CQUIN schemes. ICB designated posts to drive quality agenda, with further support from NECS. ICB Quality and Safety Committee and area quality and safety subcommittees	None	Agendas and minutes for ICB Quality and Safety Committee, Area Quality and Safety subcommittees and Provider Quality Committees Incident reports Commissioner assurance reports Agendas and minutes of ICB Board, Audit Committee and Executive Committee	Care Quality Commission inspection reports Healthwatch reports and reviews Information sharing from local authorities - commissioning and safeguarding partnerships	None Risk controls and assurances in place - no further actions required at last review	01/12/2024 Ann Fox	31/12/2025	4	3	12	(5). Quarterly 12/12/2024 Neil Hawkins Risk reviewed and action updated.	4	2	8	

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					C	L	Score							C	L	Score	C	L	Score			
				plans to address them which could result in patient harm and reputational damage.				Provider Quality Committees Care Quality Commission inspections ICB internal audit annual programme Quality Strategy Commissioner quality assurance visits Local authority information sharing														
04 System Recovery	NENC/0001	06/07/2022	NENC Strategy And System Oversight NENC ICB Full Control 1. NENC Executive Committee	System Resilience, Escalation Planning and Management and Business Continuity arrangements There is a risk that a lack of robust planning for surge management, and response to business continuity critical and major incidents, mean that: 1) impacted communities do not receive the required level of care needed during any incident 2) urgent and emergency care pressures increase, resulting in rises in A&E activity and multiple system demands including ambulance, community, acute and primary care services, and an inability to deliver core services.	4	5	20	System-wide surge and escalation plan agreed between all stakeholders NENC ICB Business Continuity Plan Emergency Planning, Resilience and Response (EPRR) compliance Requirement for providers to notify the System Coordination Centre (SCC)/ICB if Operational Pressures Escalation Levels (OPEL) status is escalated Place Based Delivery Urgent and Emergency Care groups	None Outcome of review of the ICB business continuity plan to ensure that it is fit for purpose as a result of the ICB 2:0 Transformation programme. None	Plan reviewed and regularly tested Business continuity policy and plans and review process Annual EPRR self-assessment signed off by ICB	None Annual assurance undertaken by NHSE Audit One - internal audit of business continuity and EPRR 22/23 - reasonable assurance EPRR submission to NHSE/I Audit One - internal audit of business continuity and EPRR 22/23 - reasonable assurance NHS England regional operational centre provide regional scrutiny and challenge.	None ICB business continuity currently being reviewed in line with changes during ICB 2:0 None None	29/06/2023 Marc Hopkinson Action plan in place which is regularly monitored and reviewed following any significant incident	31/03/2025	4	3	12	(6). 6 Monthly 12/12/2024 Neil Hawkins Control description reviewed/amended.	4	2	8	

Key risk: Our health and care services are not delivered in a way in which improves the outcomes of communities who currently have much poorer health outcomes.

01 Finance	NENC/0004	06/07/2022	NENC Finance Directorate NENC ICB Partial Control 2. NENC Finance, Performance And Investment Commit	Delivery of financial position There is a risk that the ICB is unable to deliver its planned financial position, together with a risk around delivery of the wider ICS financial position. For 2024/25, a deficit plan of £49.9m has been agreed for the ICS as a whole, with a surplus of £53.6m planned for the ICB. This included significant potential financial risk to delivery, with unmitigated risk identified in the plan of £161m across the ICS, including in particular the risk to delivery of highly challenging efficiency plans. A breakeven position is now reported following receipt of deficit support funding. The level of unmitigated risk is significantly reduced from plan, however significant potential risks to delivery of the forecast position remain.	4	5	20	Financial plan Efficiency plan in place with financial sustainability group established Financial reporting and monitoring process Financial controls reviewed and strengthened where relevant across the ICS, including vacancy control processes and approval of non-pay spend	None None None	Finance plan in place. Efficiency delivery included in monthly finance reports. Monitored by financial sustainability group with PMO support in place. Audit One - internal audit of key financial controls 22/23 - substantial assurance Monthly finance reports. Audit One - internal audit of key financial controls 22/23 - substantial assurance	Audit One - internal audit of key financial controls 22/23 - substantial assurance Reported to NHSE each month. Review of position with NHSE	Financial plan for 2024/25 to be agreed with NHSE None Underlying financial position work illustrates significant potential financial pressures None	01/06/2024 Richard Henderson Financial plan for 2024/25 to be agreed with NHSE 12/12/2024 Richard Henderson Options to manage remaining net risk in 24/25 in development	31/03/2025	4	4	16	(5). Quarterly 12/12/2024 Richard Henderson 'No change to risk score. Minor update to risk description, one action complete and additional action added	3	3	9
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					C	L	Score							C	L	Score	C	L	Score			
								Monthly forecasting and variance reporting and plan to date	Latest forecasts show a potential net risk across the ICS for 2024/25.	Reported to Finance, Performance and Investment committee. Audit One - internal audit of key financial controls 22/23 - substantial assurance	Monthly review with NHSE regional team and processes in place to highlight variances such as industrial action and prescribing pressures. Additional NR funding received to support industrial action and other pressures which has led to significant reduction in net risk across ICS	None										
								NHS Provider FT efficiency plans and system efficiencies co-ordinated via System Recovery Board	None	System Recovery Board ICB sighted on FT efficiency plans	NHS Provider FT finance committees	None										
								Financial governance arrangements, financial policies and scheme of delegation	None	Scheme of Delegation approved annually Financial policies reviewed and update annually Audit committee review.	Audit One - internal audit of key financial controls 22/23 - substantial assurance	None										
03 Workforce	NENC/0028	21/10/2022	NENC People Directorate NENC ICB Partial Control 3. NENC Quality And Safety Committee	Clinical and social care workforce across the region There are widespread challenges to recruitment nationally and particularly of clinical and social care staff as a result of many factors including EU exit, COVID and post COVID burnout, ageing workforce. This will impact on the delivery of safe services and could lead to lack of access to specific services, drive up waiting times leading to poorer outcomes for patients. This will cause further workload pressures on existing staff which could cause retention issues and potentially lead to staff ill health.	5	4	20	ICS People Partnership Forum. ICS People Strategy Group. NHS England workforce functions emerging (understanding of responsibilities still being explored). People and Culture Strategy.	None None within the ICB control. Funding of NHS long term workforce plan could impact on ability to deliver Strategy.	Terms of reference, meeting notes, action plans. Terms of reference (developed - awaiting sign off). Chief Nurse meetings with counterparts in NHS England. ICB workforce team have regular meetings with counterparts at NHS England. ICB workforce team regular meetings with counterparts at NHS England. Regional meetings on productivity and workforce planning are in place. Development of a system-wide plan to reduce the risk raised. Reporting arrangements on delivery of the plan being finalised. Executive Committee sign-off Developing communications launch after board sign off.	External partners across the health and care system are part of the two groups membership. None Developed in consultation with and co-operation of the wider system with comments incorporated in the strategy. Socialising final draft with system colleagues.	None None. None.	01/04/2024 Leanne Furnell Development of a system-wide NENC People & Culture Strategy NENC People & Culture Strategy completed and signed off by board. Date Entered : 10/09/2024 10:30 Entered By : Jayne Aitken	5	3	15	(5). Quarterly 27/11/2024 Aimee Tunney Updated risk responsible director	5	2	10		
02 Quality	NENC/0086	02/10/2024	NENC People Directorate NENC ICB Limited Control 1. NENC Executive Committee	Failure to prioritise equality, diversity and inclusion The ICB fails to put in place the necessary resources to understand and address the main areas of concern and priority actions in relation to equality, diversity and inclusion within health and care system in the North East and North Cumbria - resulting in a region where access to health and care services is limited; communities do not feel welcome and able to contribute; and differences are not understood, celebrated or valued.	4	4	16	Ringfenced dedicated EDI resource within the ICB. Co-production of a five-year system EDI strategy. ICB Workforce: Board and Executive members have a dedicated EDI objective (as part of Fit and Proper Persons Test (FPPT) domain requirements) within their annual objectives. Mandatory EDI training across all ICB staff. Commissioning Decisions: Equality Impact Assessment (EIA) process embedded across the ICB.	None identified. None. None	Board level race and ethnicity champion (Chief Delivery Officer) with personal objectives. Regular EDI updates and presentations at Executive Committee and Board. Annual appraisal of Exec and Board members EIA documentation and inclusion in policies/business cases.	None at this stage. Publication of the ICBs Gender Pay Gap, Disability Pay Gap and Ethnicity Pay Gap on the ICBs internet. Reporting compliance with WRES/WDES submission None	None identified at this stage. None. None.	02/10/2024 Leanne Furnell Co-production of a five year system EDI strategy - underway. 02/10/2024 Leanne Furnell Board diversity monitoring form being developed for inclusion as part of the Board recruitment process	4	3	12	(5). Quarterly 27/11/2024 Aimee Tunney Updated risk responsible director	4	3	12		

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					C	L	Score							C	L	Score	C	L	Score				
02 Quality	NENC/0052	01/08/2023	NENC Chief Nurse And AHP Ann Fox NENC ICB Limited Control 3. NENC Quality And Safety Committee	British Pregnancy Advisory Service (BPAS) termination of pregnancy pathways receiving 'inadequate' Care Quality Commission (CQC) rating Risk to the ICB not meeting statutory duties and possible reputational impact due to an 'inadequate' Care Quality Commission rating received for BPAS termination of pregnancy pathways. Quality of service, patient safety and service resilience all concerns from inspection.	4	4	16	Termination of pregnancy pathway Contract management process System quality group National ICB Quality reps established group sharing intelligence and co-producing quality metrics for quality reports and supporting Patient Safety Incident Response Framework (PSIRF) deployment alongside BPAS. ICB commissioner assurance visits (CAV) undertaken to all sites in geography including meds optimisation rep	Inequitable access with whole pathway not provided in every locality and depending on gestation, women may need to travel out of area. None None This work will be fed in QIG, and is subject to national approval. Current reporting requirements development. none	Information shared with commissioning and contracting to ensure joined up approach and understanding when meeting with provider Joint contract meetings with BPAS, ICB/NECS Contracting, Quality and Commissioning teams to challenge local action plans and monitor data. Measurement of KPIs, patient surveys at contract meetings Terms or reference and minutes Quality reports received in interim and all patient safety incident investigations reported on StEIS and reviewed with BPAS and quality & contracting colleagues. review of sites and processes by same team for consistency	Care quality Commission (CQC) / NHS England monitoring meetings including oversight of action plan. Quality feedback from Quality Improvement Group (QIG) received. Assurance visits with safeguarding leads. Peer level support from other areas and ICBs (Leeds/Newcastle/Doncaster) South Yorkshire ICB leading on the report for the region. Chaired by NHSE Director of Nursing BPAS engagement with development of quality metrics and reporting. CQC	None New contract lead needs to be identified. None Metrics being developed, current reporting will continue in interim. report being prepared	11/04/2024 31/01/2025 Nicola Jackson ICB Quality leads group established to work with BPAS to develop national metrics reporting into national QIG, and subject to their approval. Contract monitoring continues with joint collaboration between Contracting and Quality and review 3 months.	4	3	12	(5). Quarterly 25/11/2024 Kirstie Hesketh Contract monitoring continues with joint collaboration between Contracting and Quality and review 3 months	3	3	9			
01 Finance	NENC/0087	24/10/2024	NENC Contracting And Procurement David Gallagher Lynne Walton NENC ICB Limited Control 1. NENC Executive Committee	Risk of losing dental underspend for 2025-2026 Risk to 2025-26 Dental budgets as approx 15million of non-recurrent unallocated funds due to contract hand backs and underspend on dental recovery plans. NHSE have been asked ICBs to report on financial position from Month 6 in which dental finances are ring fenced to dental recovery so unable to allocate at other struggling points within the system. Expected Dental forecasts for 2025-26 would be significantly impacted if funding reduced in next financial year.	4	4	16	Financial forecast reports reported into NHSE monthly, Dental plans showing significant underspend (15 Million). Liaising with National team to establish if funds can be used against any reporting lines	2025-2026 Budget Allocations set by National team, under spend identified as non-recurrent underspend.	Non recurrent underspend for this financial year	Linking with NHSE National team to ensure commitment not lost in 2025-2026 forecast.	Allocation of un-used funds	10/12/2024 31/03/2025 Lynne Walton Liaising with National team to establish if funds can be used against any reporting lines	4	3	12	(3). Monthly 09/12/2024 Lynne Walton No Change	4	2	8			
02 Quality	NENC/0006	06/07/2022	NENC Delivery Directorate Levi Buckley NENC ICB Partial Control 3. NENC Quality And Safety Committee	Reputational Risk Due to Poor Access to Adult Mental Health Services There is a risk of reputational damage to the Integrated Care Board (ICB) due to challenges in ensuring timely and effective access to adult mental health services. Contributing factors include limited-service capacity, inconsistent treatment thresholds and inefficient referral processes. Increased demand following the pandemic and workforce pressures exacerbate these issues. This could result in negative perceptions of the ICB's ability to meet population needs, Contract management and	4	4	16	Standard NHS contracts in place with two main providers: Cumbria, Northumberland, Tyne and Wear (CNTW) FT and Tees Esk and Wear Valleys (TEWV) FT, and also with all NHS Talking Therapies anxiety and depression providers. Ensure that the number of people who receive two or more contacts from commissioned community mental health services is compliant.	None	Contract management process Mental health oversight performance group OPEL status Data and digital steering group	NHS England quarterly performance submissions and assurance meeting Workforce planning from NHS England and providers	Review of contract management and performance oversight systems and processes through MH oversight and performance group.	01/04/2024 31/12/2024 Linda Reiling Review of the contract management and performance oversight systems and processes through the Mental Health Oversight and Performance Group. 01/04/2024 31/12/2024 Linda Reiling A review of the outcome of the full system NHS Talking Therapies review to identify any impact for the ICB.	4	3	12	(5). Quarterly 12/12/2024 Neil Hawkins Risk reviewed and owner and Director leads updated. Risk description updated.	4	2	8			

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				diminished stakeholder confidence, and adverse outcomes for patients, including delayed or inadequate care and potential escalation to crisis situations.				performance oversight systems and processes. NHS 111 select 2 was deployed from April 2024. This will change how patients access support and provision across NENC. There is a signed MoU agreement between providers around how they will collectively deliver this provision. Providers are currently undertaking an evaluation which will be presented to the MHLDA subcommittee in December 2024. A full system NHS Talking Therapies review has been concluded. This has set out the clinical, contractual and financial challenges for achieving the access targets.	Risk that ASD population may not utilise this provision.	MH and Ambulance Transformation Group has now been closed down due to the successful implementation and therefore this moves into business as usual. Currently conversations are taking place with the emergency urgent care board who link this work into that remit as part of business as usual.	Evaluation going through subcommittee in December and plans to move business as usual into UEC programme in the new year.	None identified.	01/04/2024 Linda Reiling Review of utilisation to be undertaken and any communications needs identified as a result.	31/12/2024										
03 Workforce	NENC/0091	15/11/2024	NENC Contracting And Procurement NENC ICB Limited Control 3. NENC Quality And Safety Committee	Pharmacy Collective Action Risk ICB will be unable to deliver on its statutory duties due to planned Pharmacy collective action.	3	4	12	Intelligence from Local Pharmaceutical Committees (LPCs) is that essential services will remain intact (meds issued). We are liaising with national team in respect of any updates; any likely action. January - it's likely non regulatory services may be affected e.g. home delivery service.	None identified at last review.	Update reporting to Primary Care subcommittee (and Executive / Quality and Safety Committee by exception).	None identified.	None identified at last review.	06/12/2024 Kenneth Youngman Situation continues to be monitored. Action plan / response in development.	31/03/2025	3	4	12	(3). Monthly 06/12/2024 Kenneth Youngman New risk added.	3	2	6			
02 Quality	NENC/0049	14/06/2023	NENC Chief Nurse And AHP NENC ICB Partial Control 3. NENC Quality And Safety Committee	Continuing Care - variation in practice and compliance within the ICB/ICS As a result of unnecessary variation in how the CHC process is undertaken across the ICB there is a risk that compliance with statutory duties, financial processes, the market and client experience is varied which could result in reputational damage, lack of compliance with statutory duties, inequity and inaccurate/poorly recorded decision making , adverse financial impact and poor financial control within the ICB, negative patient/family experience and adverse impact on the market and workforce.	4	4	16	Development of a Transformation Programme for All Age Continuing Care (AACCC) All Ages Continuing Care Strategic Transformation Group (AACCCSTG) and working groups. ICB internal audit annual programme.	None	Reporting from AACCCSTG to Exec/Quality and Safety Committee and financial sustainability committee. PMO reporting and support in place.	Reporting to NHSE.	None	03/04/2024 Ann Fox Support the delivery of the Transformation Project Plan through an All age CHC service Operating Model for 24/25 and deliver ICB 2.0 new organisational structure	31/03/2025	4	3	12	(5). Quarterly 12/12/2024 Neil Hawkins Risk description and controls updated.	4	2	8			

Key risk: The quality of commissioned health and care services varies across the ICB area and in some places falls below our high expectations for our public and patients.

01 Finance	NENC/0065	07/11/2023	NENC Finance Directorate NENC ICB Partial Control	Medium term financial plan There is a risk that both the ICB and wider ICS are unable to agree a robust, and credible, medium term financial plan which delivers a balanced financial position in future years. There is also a risk that the challenging financial	5	5	25	MTFP development programme agreed across the ICS with external support and agreed governance arrangements. System Recovery Board now established with	None	Updates on progress reported to FPIC, Chief Executives, ICS DoFs, Exec Committee	Regular review meetings with NHSE regional and national team	MTFP highlights significant financial deficit with deliverable opportunities / efficiencies to	08/05/2024 Richard Henderson Plans being developed for each workstream under System Recovery Board Refresh of MTFP underway Sep-Nov-24	31/03/2025	5	4	20	(3). Monthly 12/12/2024 Richard Henderson Minor update to risk description. No	5	2	10			
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					C	L	Score						C	L	Score		C	L	Score	
		Henderson	2. NENC Finance, Performance And Investment Commit	<p>position impacts on the delivery of ICB strategic priorities.</p> <p>The current underlying financial position is a significant deficit across the ICS. Current MTFP do nothing modelling suggests a deficit risk of c.£800m by 2027/28.</p> <p>Delivery of a balanced financial position across the ICS in the short to medium term will require delivery of significant efficiencies and transformational change and presents a huge challenge.</p>				<p>workforce, elective, procurement and UEC agreed as the live opportunities with a pipeline of workstreams being matured. Plans being developed for each live workstream</p> <p>Efficiency plan in place with ICB financial sustainability group established</p> <p>NHS Provider FT efficiency plans</p> <p>Financial governance arrangements, financial policies and scheme of delegation</p> <p>Financial Controls reviewed and strengthened where relevant across the ICS, including vacancy control processes and approval of non-pay spend</p> <p>ICB investment / business case policy to manage ongoing investments / commitments</p> <p>Monthly forecasting and variance reporting and plan to date to manage current and underlying position</p>	<p>None</p> <p>None</p> <p>None</p> <p>None</p> <p>None</p> <p>None</p>	<p>Efficiency delivery included in monthly finance reports. Monitored by financial sustainability group with PMO support in place</p> <p>Reports received from NHS Provider FT finance committees</p> <p>Scheme of Delegation approved annually Financial policies reviewed and updated annually Audit committee review</p> <p>Vacancy control process in place and panel in place for approval of any discretionary non-pay spend</p> <p>Investment / business case policy</p> <p>Monthly finance reports. Reported to Finance, Performance and Investment committee.</p>	<p>Reported to NHSE each month.</p> <p>NHS Provider FT finance committees</p> <p>None</p> <p>Assurances received from each ICS FT provider on review of financial controls. All recurrent investments over £250k shared across system</p> <p>None</p> <p>Monthly review with NHSE regional team and processes in place to highlight variances such as industrial action and prescribing pressures.</p>	<p>be identified</p> <p>Efficiency plan to be developed for 25/26. Under-delivery of recurring efficiency schemes in 24/25</p> <p>Significant risk around delivery of efficiency plans, identified within financial plan</p> <p>None</p> <p>None</p>	<p>07/10/2024</p> <p>30/11/2024</p> <p>Richard Henderson</p> <p>Independent review of financial controls alongside CIP plans and financial plans/risks is being undertaken to identify potential opportunities</p>				change to risk score			
04 System Recovery	NENC/0067	03/04/2023 Ann Fox Kate OBrien	<p>NENC Strategy And System Oversight</p> <p>NENC ICB Partial Control</p> <p>1. NENC Executive Committee</p>	<p>Care, Education and Treatment Reviews (C(e)TRs) and Dynamic support registers (DSRs) compliance</p> <p>There is a risk that the ICB is not fulfilling inpatient C(e)TRs and DSR requirements to identify adults, children and young people with increasing and/or complex health and care needs who may require extra support, care and treatment in the community as a safe and effective alternative to admission to a mental health hospital. This means that the ICB is not compliant with NHS England policy.</p>	4	5	20	<p>Implementation plans.</p> <p>Development of complex care structure.</p>	<p>Not all plans in place as yet.</p> <p>DSR policy compliance and standardisation of process.</p>	<p>Plans to be triangulated and process standardised across the ICB to reduce variation.</p> <p>Complex care structure developed within the nursing directorate as part of the ICB 2.0 programme.</p> <p>Complex care structure developed within the nursing directorate as part of the ICB 2.0 programme.</p>	<p>There is an updated NHS England Dynamic support register and Care (Education) and Treatment Review policy and guidance that has been released, ongoing conversations and oversight within the quarterly programme oversight support meetings with NHS England.</p> <p>There is an updated NHS England Dynamic support register and Care (Education) and Treatment Review policy and guidance that has been released, ongoing conversations and oversight within the quarterly programme oversight support meetings with NHS</p>	<p>Incomplete implementation on plans across the patch</p> <p>None</p>	<p>03/04/2023</p> <p>31/03/2025</p> <p>Kate OBrien</p> <p>Action plan in development.</p>	4	4	16	<p>(5). Quarterly</p> <p>20/12/2024</p> <p>Kate OBrien</p> <p>Risk reviewed and responsible Director updated.</p>	3	3	9

Risk category Strategic aim	Risk ref	Date identified	Directorate Level of control Committee	Description	Initial			Controls	Gaps in control	Internal assurances	External assurances	Gaps in assurance	Actions Action owner Details Progress	Residual			Reviews			Target				
					C	L	Score							C	L	Score	C	L	Score					
04 System Recovery	NENC/0075	18/12/2023	NENC Contracting And Procurement NENC ICB Partial Control 1. NENC Executive Committee	Choice Accreditation There is a risk that the ICB is required under legislation and NHS E policy direction to contract unaffordable levels of independent sector (IS) provider capacity resulting in a risk of achieving financial balance and also an opportunity cost of not being able to prioritise commissioning activities in areas of greatest need.	4	5	20	Established accreditation process in place. Elective service specification and pathway. ICB Executive Committee oversight NENC Contract Group oversight	Workforce capacity to undertake all necessary and higher admissions in some areas of the ICB.	C(e)TRs completed within the required timeframe. Additional support identified to minimise the impact of current staffing capacity. Current staffing capacity will remain in place until completion of ICB 2.0 programme.	England. There is an updated NHS England Dynamic support register and Care (Education) and Treatment Review policy and guidance that has been released, ongoing conversations and oversight within the quarterly programme oversight support meetings with NHS England.	None	02/09/2024 Paul Turner Work underway to maximise use of process to minimise risk. Elective service specification and pathway development being prioritised as far as possible within available resource.	31/03/2025	4	4	16	(5). Quarterly 03/01/2025 Paul Turner Risk reviewed. No changes required.	4	2	8			
01 Finance	NENC/0090	18/11/2024	NENC Medical Directorate NENC ICB Limited Control 1. NENC Executive Committee	Weight loss injections and Right to Choose providers NENC GPs are able to refer to Right to Choose providers for weight management services, including prescribing of weight loss drugs. Long waiting lists for local NHS Tier 3 specialist weight management services increases the likelihood of GPs doing so. As a result there is the risk of significant financial pressures resulting from the charges back to the ICB for consultations and drug costs.	4	5	20	Commissioning policy, ensuring referrals to right to choose providers are in line with locally commissioned service providers	None	NCA activity is scrutinised for eligibility before invoices are paid	N/A	None	21/11/2024 Ewan Maule Commissioning policy drafted and awaiting approval 21/11/2024 Ewan Maule Task and finish group to explore potential mitigations and controls against exponential and unaffordable growth in RTC referrals, reporting in to executive committee. This is to include consideration of commissioning local services to provide urgent waiting list mitigation actions	31/12/2024	3	5	15	(3). Monthly 25/11/2024 Ewan Maule Risk identified and added to register.	2	5	10			
02 Quality	NENC/0084	09/07/2024	NENC Chief Nurse And AHP NENC ICB Limited Control 1. NENC Executive Committee	Local Authority strategy in relation to case management and associated functions As a result of the decisions being taken by some LA's (South Tyneside and Sunderland)with regard to intention to cease to undertake activities on our behalf, i.e., CHC Case management and associated functions (i.e legal, brokerage, financial transactions) there is a risk that ICB teams may become overwhelmed , capacity to deliver the function may not transfer with the responsibility and additional pressure /risk may be incurred (particularly if additional LA's make similar strategic business decisions) which could result in reduced oversight of vulnerable citizens and potential harm, additional pressures within ICB teams and reputational risk/damage to the ICB.	4	5	20	Meetings have taken place with LA in South Tyneside and Sunderland to understand their initial intentions. We have been transparent that we are still in the implementation phase of the ICB 2.0 restructure and need to consider HR/employment implications whilst still securing people in roles. We are committed to work together and ensure that citizens are not put at risk. We will seek to establish an ICB strategy. We will continue to meet with and discuss with the Local Authorities.	The LA's may decide to serve notice on Sec 75 arrangements regardless.	Internal strategy to be set in relation to ICB direction of travel in relation to case management and back office functions ICB Place Directors and Directors of Nursing have been involved in initial meetings. Finance aware and to have continued involvement to measure risk.	We need to understand the activity, funding budget and workforce issues the LA;s describe as otherwise risk of taking back an underfunded function. All cases would need to be up to date in terms of reviews, DoLS, COP DoLS Continued commitment to meeting	LA's may still serve notice on the Section 75	09/07/2024 Ann Fox Chief Nurse, Deputy Chief Nurse will need to liaise with ICB Exec and Director colleagues and establish a direction of travel and strategy and approach to potential transformation of AACC case management functions across the ICB. 13/12/2024 Vicky Playforth Meetings arranged 16/01/25 and 13/02/25 to link in with the Local Authorities DAS's in South Tyneside and Sunderland, ICB LDT's, Directors of Nursing, ICB finance and AACC/complex case management teams to confirm what elements will be considered for handing back to the ICB and how this may be managed operationally and in terms of risk and quality.	31/12/2024	3	4	12	(5). Quarterly 27/12/2024 Vicky Playforth Risk reviewed and actions updated.	3	3	9			

Risk category Strategic aim	Risk ref	Date identified	Directorate Level of control Committee	Description	Initial			Controls	Gaps in control	Internal assurances	External assurances	Gaps in assurance	Actions Action owner Details Progress	Residual			Reviews	Target		
					C	L	Score							C	L	Score		C	L	Score
03 Workforce	NENC/0085	17/07/2024	NENC Strategy And System Oversight NENC ICB Limited Control 1. NENC Executive Committee	In Housing of NECS staff Financial risk due to stranded costs i.e. staff and infrastructure and estates, and potential redundancies. Due to major organisational change there is a risk to high levels of attrition and risk of losing skills and experience of staff who are currently in post.	4	4	16	Budgets, each directorate has been asked to review aligned staff and manage budgets to bring NECS teams in house System Resilience	Managed budgets to include staff, equipment and estates Resilience of system during organisational change	Senior leaders and Directorates managing own teams To develop a resilient workforce to carry out duties during major organisational change	Working with NECS teams and NHSE Work with NECS teams to manage	Staff Attrition, retention and Major organisation change Unknown impacts or retention of experienced staff	17/07/2024 31/03/2025 Gary Charlton Teams already work closely together through named staff and an embedded staff model, with mechanisms for shared learning with NECS and other ICBs in place. Any loss should therefore be negligible. 17/07/2024 31/03/2025 Gary Charlton Internal arrangements and process are in place. Given the size of the ICB and number of people potentially being in-housed, this should be manageable. Business continuity is likely to be improved as a result of the in-housing approach as staff can be redeployed across teams within a single organisation - prioritising deployment to the areas of greatest need within the ICB. 17/07/2024 31/03/2025 Gary Charlton Work is ongoing between ICB and NECS (DoF to DoF) to ensure there is a clear and robust understanding of the potential and realised stranded costs associated with the programme. Contingencies have been identified short term to mitigate this risk including the deployment of non-recurrent slippage and recurrent savings in the short term. The programme and SLA groups continue to review and assess the position. 17/07/2024 31/03/2025 Gary Charlton Principles agreed re staffing. This will be managed across both organisations throughout the process. It is also worth noting that many of these staff are in pastoral positions which means some of this risk will be negated through the in-housing and new line management arrangements. We also, and in agreement with NECS, intend to expedite the in-housing of aligned/embedded HR team/colleagues at the earliest possible opportunity, in order for them to support the TUPE process. ESR support has been outsourced to Northumbria Healthcare NHS Trust, this will support the process of updating ESR records for all impacted staff.	4	3	12	(4). 2 Monthly 09/12/2024 Gary Charlton Risk remains	4	2	8
02 Quality	NENC/0023	06/09/2022	NENC Chief Nurse And AHP NENC ICB Partial Control 3. NENC Quality And Safety Committee	Risk that delayed ambulance handovers impact negatively on patient safety and patient flow As a result of delayed ambulance handovers there is a risk that patient care and safety could be adversely affected which could result in poor outcomes and/or harm to patients. There could also be negative media attention generated which could damage the ICB's reputation and cause the public to lose confidence in the NHS.	4	5	20	Local A&E Delivery Boards at place (LADB) System agreement to no delays over 59 mins (form beginning of Feb 23). Handover work work programme established ICB winter plan and surge plan	Provider not taking direct action for delays. Dynamic risks	Minutes/actions from LADB. Analysis of any serious incidents (SIs) resulting from delay over 59 mins. System resilience framework implemented during system pressures (Direct Policy) System SitReps during surge periods System-wide Surge	NHS England North East and Yorkshire region are also reviewing ambulance delays. System Centre monitoring on a daily basis between	None None	02/12/2024 31/03/2025 Marc Hopkinson Ongoing monitoring at LADB with escalation where required	4	3	12	(5). Quarterly 27/09/2024 Marc Hopkinson Added more system and monitoring controls	4	2	8

Risk category Strategic aim	Risk ref	Date identified	Directorate Level of control Committee	Description	Initial			Controls	Gaps in control	Internal assurances	External assurances	Gaps in assurance	Actions Action owner Details Progress	Residual			Reviews	Target			
					C	L	Score							C	L	Score		C	L	Score	
									exercise	8am to 8pm 17 days co-ordination.											
								System resilience meetings (monthly)	None	System resilience meeting notes/actions.	Scrutiny by NHSE	None									
								Quality and Safety Committee and Area Quality and Safety Committee.	None	Weekly reporting template of % of handovers over 59 mins (by Trust). Quality and Safety Committee and Area Quality and Safety Committee - minutes, papers and actions.	Scrutiny by NHSE	None									
								Urgent and emergency care network. Oversight	None	Minutes and action plans.	NHS England reporting arrangements.	None									
								Ambulance Handover Programme established (Sep 24-March 24)	None	None	NHS England North East and Yorkshire region are also reviewing ambulance delays. ,Scrutiny by NHSE	None									
03 Workforce	NENC/0081	17/05/2024	NENC Strategy And System Oversight	General Practice (GPs) intention to take industrial action after a ballot by the BMA and would be IA short of a strike. This would severely restrict the capacity across the integrated care system for GP appointments and would impact on acute providers.	3	5	15	ICC will be established at Pemberton House for duration of any industrial action.	Numerous unknowns and variables and impacts unknown at this time.	Recent experience of other system impacts from industrial action.	Excellent partner engagement to mitigate industrial action.	Numerous unknowns and variables.	17/05/2024	30/08/2024	3	4	12	(3). Monthly	3	3	9
			Jacqueline Myers										Thomas Knox					12/12/2024			
			Thomas Knox					Twice weekly system meetings with providers and LDTs to highlight any risks or impacts. Regional and national oversight in place.	Variables in impacts in different geographical areas.	Internal robust management plans in place	NHSE scrutiny consistent approach regionally	Different approaches by different GP surgeries and communication issues	11/09/2024	31/10/2024				Neil Hawkins			
								Pathways to be discussed with STSFT and CNTW for referral threshold enhancement	Need long-term solution to resolve issues	None at present	None at present	Discussions still ongoing with STSFT, CNTW, practices and LMC						Risk scores reviewed for consistency.			
								Audits to be undertaken													
								Agree discharge criteria back into primary care													
								Agree patients communications													

Key risk: We fail to deliver health and care services which give children the best start in life.

04 System Recovery	NENC/0066	13/10/2023	NENC Strategy And System Oversight	Ineffective Transformation of ADHD and Autism Pathways. The rising demand for ADHD and autism diagnostic assessments, combined with insufficient service capacity, creates a significant risk of prolonged waiting times, inequitable access, and unmet needs for individuals requiring care. Reliance on self-funded and non-NHS pathways raises concerns about quality, continuity, and integration with NHS services. Additionally, resource constraints, workforce shortages, and challenges in stakeholder coordination may hinder the effective implementation of the proposed all-age neurodivergence group and pathway transformation. Failure to address these issues could result in poorer health outcomes, increased health inequalities, reputational damage to the ICB, and long-term financial pressures on the system.	4	5	20	ICS Autism Statement.	ICS Autism Statement not yet in place.	None	None	None	12/10/2023	31/12/2024	4	4	16	(5). Quarterly	4	3	12
			Levi Buckley					Place based Autism Strategies	Data analysis in relation to outcomes identified in different strategies	ICB review of all place based autism strategies.	Working with Brain in Hand in relation to strategy evaluation tools and evaluations of 'what is good practice'.	None						Neil Hawkins			
			Peter Rooney					Regional Network to evaluate areas of good practice - from health and social care services.	Network not yet established.	None	None	None	13/10/2023	31/12/2024				Risk reviewed and updated. Responsible Director updated.			
								Autism Statement Development Group.		Group notes and actions. Current gaps in support being identified that could potentially be addressed at an ICS level.	Working with Brain in Hand in relation to strategy evaluation tools and evaluations of 'what is good practice'.	None									
								Establishment of the All-Age Neurodivergence Group: The group will oversee the transformation program, providing leadership, setting priorities, and ensuring alignment with the ICB's strategic goals.	None identified.	Notes and actions from the All-Age Neurodivergence Group and teak and finish groups.	None identified.	None identified.									
								Defined Scope and Objectives: Ensure the scope of the program is realistic, with clear, phased objectives and milestones, to avoid overcommitment													

Risk category Strategic aim	Risk ref	Date identified	Directorate Level of control Committee	Description	Initial			Controls	Gaps in control	Internal assurances	External assurances	Gaps in assurance	Actions Action owner Details Progress	Residual			Reviews	Target			
					C	L	Score							C	L	Score		C	L	Score	
								and ensure achievable progress. Stakeholder Coordination via Task-and-Finish Groups: Use task-and-finish groups to address specific elements of the pathway transformation, ensuring focus on high-priority areas while maintaining oversight by the steering group.													
02 Quality	NENC/0027	21/10/2022	NENC Chief Nurse And AHP Ann Fox Peter Rooney	There is a risk that children and young people are unable to access mental health services they need in a timely manner. As a result of unclear mental health pathways for children and young people (CYPS, CAMHS, neurodisability), alongside service pressures and capacity, increased demand and inconsistencies in treatment threshold there is a risk that children and young people do not receive appropriate treatment which could result in negative outcomes for children, young people and their families. This could also lead to damage to the ICB's reputation and there is a potential for legal challenge.	4	4	16	CAMHS Partnership Board in place Contract review meetings with main foundation trusts Joint commissioning with local authorities Quality and Safety and Executive Committees. Children and Young People (CYP) mental health access trajectory in NHS Long Term Plan North East and North Cumbria CYP Summit	None None Processes to be agreed None None	Performance updates to ICB Performance reports; quality review group None Minutes and reports from Quality and Safety and Executive Committees. Integrated delivery reports. Executive Committee and Board oversight of performance. Outputs report from children and young people's mental health summit and recovery plan.	None None None None NHS England monitoring System specialist engagement around neurodevelopmental assessments considering the ICBs short-, medium- and longer-term plans to meet growing demands in this area.	None None None None None	13/10/2023 Peter Rooney Joint commissioning processes with local authorities to be agreed.	28/03/2025	4	3	12	(5). Quarterly 12/12/2024 Neil Hawkins Risk reviewed by owner and minor changes to action owner.	3	3	9