

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/0009	06/07/2022	NENC Strategy And Transformation	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	02/04/2024 31/08/2024	3	4	12	(5). Quarterly 19/04/2024 Neil Hawkins Responsible Director updated following 2.0	3	2	6
		Jacqueline Myers	NENC ICB Limited Control		3. NENC Quality And Safety Committee	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	Support from place-based delivery primary care teams to practices	None								
		Alex Sinclair						OPEL status for practices reported via UEC-RAIDR App	None	Support from place-based delivery primary care teams to practices	None	None								
								Primary Care Access Recovery Plan (PCARP)	None	Oversight of PCARP and SDF delivery through System Overview Group and Primary Care Transformation team	Strategic Data Collection Service (SDCS) reporting	None								
								System Overview Group			NHS Long Term Plan									
								ICB Primary Care Strategy and Delivery Subcommittee		Minutes and reports for the ICB Primary Care Strategy and Delivery Subcommittee.	NHS Long Term Workforce Plan									
								Placed based delivery primary care teams and Support Level Framework aligned to delivery of PCARP		Board and Executive Committee review of PCARP and Primary Care / Secondary Care Interface System Plan.	System workforce retention reporting									
								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								
										Oversight of PCARP and SDF delivery through System Overview Group and Primary Care Transformation team	NHS Long Term Plan									
										Minutes and reports for the ICB Primary Care Strategy and Delivery Subcommittee.	NHS Long Term Workforce Plan									
										Board and Executive Committee review of PCARP and Primary Care / Secondary Care Interface System Plan.	System workforce retention reporting									
										Monitoring at place-based delivery primary care commissioning groups, co-ordinated by an overview group.	None	None identified								
								GPPC workforce group in place enabling joint practice recruitment and retention initiatives	None	Action logs Governance through GPPC executive	None									
02 Quality	NENC/0079	02/04/2024	NENC Chief Nurse, AHP And People	Patient safety concerns- Complex care case management in Tees Valley	4	5	20	Review of caseload and programme of visits, utilising a consistent methodology.	Currently there are unknown risks to individuals on the caseload.	Planned programme of review based on RAG rating within a 4-month timescale.	NHSE are part of the incident management group and CQC have been informed.	Unknown risk until the caseload has been reviewed.	02/04/2024 31/08/2024	3	4	12	(3). Monthly	3	3	9
			David Purdue	As a result of changes in complex case management, there has been inconsistent and variable oversight of the caseload, which has and could result in quality and safety concerns including the exposure and actual risk of harm (safeguarding harms).						Methodology devised to be used during visits including guidance and escalation.										
			Kate O'Brien	This has been evidenced through safeguarding adult reviews which have highlighted concerns about case management and there have been recent hospital admissions for individuals where significant						Mobilisation plan developed with action owners and timescales to cover all elements of the programme.										
										Monitoring of individual cases and performance to be reported on a weekly										

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				safeguarding concerns were identified. Incidents have been raised on SIRMS in relation to the recent incidents.						basis.												
04 System Recovery	NENC/0001	06/07/2022	NENC Strategy And Transformation 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 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/ 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	29/06/2023 30/06/2024 Marc Hopkinson Action plan in place which is regularly monitored and reviewed following any significant incident	4	3	12	(6). 6 Monthly 03/06/2024 Deborah Cornell Risk ongoing.	4	2	8		
02 Quality	NENC/0024	01/07/2022	NENC Chief Nurse, AHP And People 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 and community services), there is a risk that the ICB remains unaware of any quality issues or concerns and associated action plans to address them which could result in patient harm and reputational damage.	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 Provider Review Groups Care Quality Commission inspections ICB internal audit annual programme	None	Agendas and minutes for ICB Quality and Safety Committee, Area Quality and Safety subcommittees and Provider Quality Review Groups Agendas and minutes of ICB Board, Audit Committee and Executive Committee	Care Quality Commission inspection reports Healthwatch reports and reviews	None	24/01/2024 30/06/2024 Ann Fox To move from a quality review group look back model of quality assurance to attendance at / involvement in provider internal quality committee / governance meetings to improve timeliness of learning, quality assurance and any emerging risks and concerns.	4	3	12	(5). Quarterly 03/06/2024 Deborah Cornell Action target date updated.	4	2	8		
02 Quality	NENC/0047	06/03/2023	NENC Chief Nurse, AHP And People 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.	None. TEWV footprint for audit cluster and increasing trend response not consistent across local authorities. No consistent mechanism in place.	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	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	Audit is only available on CNTW footprint. Lack of data to inform decision making and trends. No mechanism in place for near misses and	28/06/2023 30/06/2024 Catherine Richardson suicide prevention ICB programme plan 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	4	3	12	(5). Quarterly 03/06/2024 Deborah Cornell Action target date updated.	4	2	8		

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									Strategy.	finalised. Executive Committee sign-off Developing communications launch due in April 24.	incorporated in the Plan											
03 Workforce	NENC/0051	13/07/2023	NENC Chief Nurse, AHP And People DavidPurdue Ann Fox NENC ICB Limited Control 3. NENC Quality And Safety Committee	LeDeR reviews capacity As a result of there being limited dedicated funded resource to undertake LeDeR reviews and a continued increase in the number of reviews required , there is a risk that reviews will not be undertaken effectively and the ICB failing its statutory duty, which could result in limited learning, reduced quality improvement impact, continued circumstances which contribute to early deaths and reputational damage.	3	5	15	Local area contacts are overseeing the workload and timeliness of reviews. LeDer Assurance Group. Quality and Safety Committee. System Quality Group.	Sufficient resource and recurrent funding.	Workforce/budget options appraisal developed for Executive to consider (in the context of ICB 2.0). LeDeR Assurance Group terms of reference, regular meetings and notes. LeDeR annual reports. Minutes of ICB Quality and Safety Committee and System Quality Group.	None	None	01/05/2023 Ann Fox Options appraisal in development LeDeR assurance group cycle of business under review Options appraisal delayed as it needed to be informed by national listening event (December 2023). This will be taken forward as part of ICB 2.0. Proposal to manage LeDeR reviews until March 2024 scheduled for investment committee w/c 18 Dec 2023. Date Entered : 13/12/2023 14:11 Entered By : Neil Hawkins	3	4	12	(5). Quarterly 24/01/2024 Daniel Webber Updated controls and assurances	3	2	6		
02 Quality	NENC/0052	01/08/2023	NENC Chief Nurse, AHP And People DavidPurdue Jenna Wall NENC ICB Limited Control 3. NENC Quality And Safety Committee	BPAS termination of pregnancy pathways receiving 'inadequate' 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 PSIRF deployment alongside BPAS.	Inequitable access with whole pathway not provided in every locality and depending on gestation, women may need to travel out of area. 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.	CQC/NHSE monitoring meetings including oversight of action plan. Quality feedback from QIG received. Assurance visits with safeguarding leads. Peer level support from other areas and ICBS (Leeds/Newcastle/Doncaster)	None New contract lead needs to be identified. None	11/04/2024 Jenna Wall ICB Quality leads group established to work with BPAS to develop national metrics reporting into national QIG, and subject to their approval.	4	3	12	(5). Quarterly 11/04/2024 Jenna Wall Risk reviewed and updated with new control added.	3	3	9		
02 Quality	NENC/0049	14/06/2023	NENC Chief Nurse, AHP And People DavidPurdue Ann Fox 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 (AACC) All Ages Continuing Care Strategic Transformation Group (AACCTSG) and working groups. ICB internal audit annual programme.	None None	Reporting from AACCTSG to Exec/Quality and Safety Committee and financial sustainability committee. PMO reporting and support in place. Minutes/notes from AACCTSG and working groups. Programme management of workplan. Highlight reports and minutes from Executive and Quality and Safety Committees and System Quality Group.	Reporting to NHSE. Internal audit reports Deloitte review and endorsement of improvement plan	None 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	4	3	12	(5). Quarterly 03/04/2024 Ann Fox Controls and actions reviewed and updated. Residual score confirmed as 12 which is appropriate for the risk at this time.	4	2	8		

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01 Finance	NENC/0004	06/07/2022	NENC Finance Directorate NENC ICB Partial Control 2. NENC Finance, Performance And Investment Commit	<p>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.</p> <p>For 2023/24, a deficit plan of £49.9m was originally agreed for the ICS as a whole, with a surplus of £32.4m planned for the ICB. Following receipt of additional non-recurring funding and other one-off benefits, a breakeven position has been delivered across the ICS (although this includes £35m of funding which will be excluded from a financial performance perspective). This position remains subject to audit.</p> <p>Significant recurrent pressures continue to exist across the ICB and ICS. Work is ongoing to finalise the 2024/25 financial plan which currently reflects a deficit across the ICS, with substantial risks to delivery, including an efficiency requirement of over 6%.</p>	4	4	16	Financial plan	None	Finance plan in place.	Audit One - internal audit of key financial controls 22/23 - substantial assurance	Financial plan for 2024/25 to be agreed with NHSE	<p>01/04/2024 31/07/2024</p> <p>Linda Reiling</p> <p>Review of the contract management and performance oversight systems and processes through the Mental health Oversight and Performance Group.</p> <p>01/04/2024 31/07/2024</p> <p>Linda Reiling</p> <p>A review of the outcome of the full system NHS Talking Therapies review to identify any impact for the ICB.</p> <p>01/04/2024 31/07/2024</p> <p>Linda Reiling</p> <p>Review of utilisation to be undertaken and any communications needs identified as a result.</p>	4	3	12	(5). Quarterly	15/05/2024	Richard Henderson	08/05/2024 - risk description and actions etc updated	3	3	9
								Efficiency plan in place with financial sustainability group established	None	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	Reported to NHSE each month.	None											
								Financial reporting and monitoring process	None	Monthly finance reports. Audit One - internal audit of key financial controls 22/23 - substantial assurance	Review of position with NHSE	Underlying financial position work illustrates significant potential financial pressures											
								Financial controls reviewed and strengthened where relevant across the ICS, including vacancy control processes and approval of non-pay spend	None	Vacancy control process in place and panel in place for approval of any discretionary non-pay spend	Assurances received from each ICS FT provider on review of financial controls	None											
								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																			
02 Quality	NENC/0006	06/07/2022	NENC Chief Nurse, AHP And People NENC ICB Partial Control 3. NENC Quality And Safety Committee	<p>Access to adult mental health services There is a risk that people do not receive the right treatment and access to services, at the right time as a result of lack of capacity, discrepancies in treatment thresholds, poor communication and referral processes. Increased demand for services as a result of the pandemic and additional service pressures where workforce capacity is reduced contributes to the risk. This would result in patients having poor access to timely and effective treatment, or escalate to crisis. There is an additional risk of damage to reputation damage to the ICB.</p> <p>Contract management and performance oversight systems and processes. NHS 111 press 2 will be deployed and in place from 30 April 2024. This will change how patients access support and provision across NENC.</p>	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.	4	3	12	(5). Quarterly	03/06/2024	Deborah Cornell	Data quality check undertaken - actions added to reflect gaps in controls and assurances.	4	2	8	
								Contract management and performance oversight systems and processes. NHS 111 press 2 will be deployed and in place from 30 April 2024. This will change how patients access support and provision across NENC.	Risk that ASD population may not utilise this provision.	Monitored by mental health performance oversight group and contracting team. Interim arrangements in place with MH and Ambulance Transformation Board around any issues	Mental Health and Ambulance Transformation Leadership Board established.	Mobilisation of services - handover to providers and ICB management as BAU oversight.											

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					C	L	Score							C	L	Score	C	L	Score			
								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.	Awaiting outcome of review.	due to mobilisation. NENC ICB NHS talkies therapies transformation group. Mental health performance oversight group monitors data.	Mental health performance oversight group has partner members who attend from mental health providers.	Awaiting decision making regarding full system review.										

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 David (ICB) Chandler Richard Henderson	NENC Finance Directorate	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, either in 2024/25 or future years. The current underlying financial position is a significant deficit across the ICS. Current MTFP do nothing modelling suggests a deficit risk of over £1bn by 2027/28. 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.	5	5	25	MTFP development programme agreed across the ICS with external support and agreed governance arrangements.	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 be identified	07/11/2023	30/09/2024	5	4	20	(3). Monthly	5	2	10			
			NENC ICB Partial Control					System Recovery Board now established with workforce, elective, procurement and UEC agreed as the live opportunities with a pipeline of workstreams being matured. Plans being developed for each live workstream	None	Efficiency delivery included in monthly finance reports. Monitored by financial sustainability group with PMO support in place	Reported to NHSE each month.	Efficiency plan to be developed for 24/25. Under-delivery of recurring efficiency schemes in 23/24	08/05/2024	31/03/2025				Richard Henderson				Work programme being developed from long list of opportunities to inform 24/25 plan and address recurring shortfalls - led by financial sustainability group	15/05/2024 Richard Henderson	08/05/2024 - risk description and actions etc updated
			2. NENC Finance, Performance And Investment Commit					NHS Provider FT efficiency plans	None	Reports received from NHS Provider FT finance committees	NHS Provider FT finance committees	Significant risk around delivery of efficiency plans, identified within financial plan												
								Financial governance arrangements, financial policies and scheme of delegation	None	Scheme of Delegation approved annually Financial policies reviewed and updated annually Audit committee review	None	None												
								Financial Controls reviewed and strengthened where relevant across the ICS, including vacancy control processes and approval of non-pay spend	None	Vacancy control process in place and panel in place for approval of any discretionary non-pay spend	Assurances received from each ICS FT provider on review of financial controls. All recurrent investments over £250k shared across system	None												
								ICB investment / business case policy to manage ongoing investments / commitments	None	Investment / business case policy	None	None												
								Monthly forecasting and variance reporting and plan to date to manage current and underlying position	None	Monthly finance reports. Reported to Finance, Performance and Investment committee.	Monthly review with NHSE regional team and processes in place to highlight variances such as industrial action and prescribing pressures.	None												
			ICB key financial controls	None	Audit One - internal audit of key financial controls 22/23 - substantial assurance	None	None	None	None															

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04 System Recovery	NENC/0067	03/04/2023	NENC Strategy And Transformation	Care, Education and Treatment Reviews (C(e)TRs) and Dynamic support registers (DSRs) compliance	4	5	20	Implementation plans.	Not all plans in place as yet.	Plans to be triangulated and process standardised across the ICB to reduce variation.	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.	Incomplete implementation on plans across the patch	03/04/2023 Kate O'Brien	30/06/2024	4	4	16	(5). Quarterly	29/05/2024	3	4	12
		David Purdue	NENC ICB Partial Control	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.				Development of complex care structure.	DSR policy compliance and standardisation of process.	Complex care structure developed within the nursing directorate as part of the ICB 2.0 programme.	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	NENC ICB SRO / ICB Director / Chief Nurse									
		Kate O'Brien	1. NENC Executive Committee						C(e)TRs completed within the required timeframe.	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.	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	ICB Place Based Case Managers ICB Place Based Commissioners NENC ICB Regional Manager for Learning Disability and Autism					Action target date revised and executive director lead updated.			
03 Workforce	NENC/0081	17/05/2024	NENC Strategy And Transformation	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.	4	4	16	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 Thomas Knox	30/08/2024	4	4	16	(3). Monthly	03/06/2024	3	4	12
		Jacqueline Myers	NENC ICB Limited Control										Plan to be developed to mitigate as many variables as possible.					Risk frequency updated. Risk ongoing				
		Thomas Knox	1. NENC Executive Committee																			
04 System Recovery	NENC/0075	18/12/2023	NENC Contracting And Procurement	Choice Accreditation There is a risk that the ICB is required under legislation and NHS E policy direction to contract unaffordable levels of 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	None	Updated process in place following agreement at Executive Committee. 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.	None	None			4	4	16	(5). Quarterly	03/06/2024	4	2	8
		David Gallagher	NENC ICB Partial Control																Updated risk owner and assurances updated.			
		Paul Turner	1. NENC Executive Committee																			
01 Finance	NENC/0031	16/11/2022	NENC Finance Directorate	There is a risk that the ICS is not able to manage capital spend within the confirmed capital funding allocation.	4	5	20	Capital plan	Capital plan included 5% over-programming and impact of IFRS16 has now been allocated to systems, resulting in	Agreed ICS capital plan with variance reported monthly. Audit One - internal audit of key financial controls 22/23 - substantial assurance	Capital plan for 2024/25 to be finalised with potential pressure of £20m	None	08/05/2024 Richard Henderson	31/03/2025	3	4	12	(5). Quarterly	15/05/2024	3	2	6
		David (ICB) Chandler	NENC ICB Full Control	There is a risk that the ICS is not able to manage capital spend within the confirmed capital funding allocation.									Capital Plan 2024/25 discussion with NHS England.						08/05/2024 - risk description and actions etc updated			
		Richard Henderson	2. NENC Finance,	For 2023/24, the capital position																		

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					C	L	Score							C	L	Score	C	L	Score											
													03/06/2024 02/09/2024 Ewan Maule Request for remaining vacancies in NECS SLA to be in-housed immediately. This will make the posts more attractive to potential candidates, ensure the costs are only incurred when the posts are filled and prevent the need for in-housing at a future date. Requires executive approval																	
02 Quality	NENC/0023	06/09/2022	NENC Chief Nurse, AHP And People David Purdue NENC ICB Partial Control 3. NENC Quality And Safety Committee Marc Hopkinson	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). ICB winter plan and surge plan System resilience meetings (monthly) Quality and Safety Committee and Area Quality and Safety Committee. Urgent and emergency care network.	Provider not taking direct action for delays. Dynamic risks None None	Minutes/actions from LADB. Analysis of any serious incidents (SIs) resulting from delay over 59 mins. Protocol put in place by ICB in December 23 to address any issues of delayed ambulance handovers. System SitReps during surge periods System-wide Surge exercise System resilience meeting notes/actions. 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. Minutes and action plans.	NHS England North East and Yorkshire region are also reviewing ambulance delays. System Control Centre monitoring on a daily basis between 8am to 8pm. Scrutiny by NHSE Scrutiny by NHSE NHS England reporting arrangements.	None None None	03/06/2024 02/09/2024 Ewan Maule Request for remaining vacancies in NECS SLA to be in-housed immediately. This will make the posts more attractive to potential candidates, ensure the costs are only incurred when the posts are filled and prevent the need for in-housing at a future date. Requires executive approval	4	3	12	(5). Quarterly 03/06/2024 Deborah Cornell Data quality check undertaken.	4	2	8										

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 Transformation NENC ICB Partial Control 1. NENC Executive Committee Jacqueline Myers Peter Rooney	Autism Approach Pathways Inconsistent approach to Autism Care Pathways resulting in poor post diagnosis support and care	4	5	20	ICS Autism Statement. Place based Autism Strategies Regional Network to evaluate areas of good practice - from health and social care services. Autism Statement Development Group.	ICS Autism Statement not yet in place. Data analysis in relation to outcomes identified in different strategies Network not yet established. None	None ICB review of all place based autism strategies. None Group notes and actions. Current gaps in support being identified that could potentially be addressed at an ICS level.	None Working with Brain in Hand in relation to strategy evaluation tools and evaluations of 'what is good practice'. None Working with Brain in Hand in relation to strategy evaluation tools and evaluations of 'what is good practice'.	None None None	12/10/2023 30/06/2024 Kate O'Brien Autism Statement to be developed by ICB Place Based Commissioners and Place Based Case Managers 13/10/2023 30/06/2024 Peter Rooney Regional Network to be established.	4	4	16	(5). Quarterly 03/06/2024 Deborah Cornell Data quality check undertaken. Actions added to reflect gaps in controls/assurances.	4	3	12
02 Quality	NENC/0027	21/10/2022	NENC Chief Nurse, AHP And People David Purdue NENC ICB Partial Control 3. NENC Quality And Safety Committee 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	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.	None None None None	None None None None	13/10/2023 30/06/2024 Peter Rooney Joint commissioning processes with local authorities to be agreed.	4	3	12	(5). Quarterly 16/04/2024 Kate O'Brien Risk owner, controls, assurances and actions updated.	3	3	9

Risk category Strategic aim	Risk ref	Date identified Director Risk owner	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
				ICB's reputation and there is a potential for legal challenge.						people's mental health summit and recovery plan.	considering the ICBs short-, medium- and longer-term plans to meet growing demands in this area.									