

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 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	01/04/2025	31/03/2026	4	3	12	(5). Quarterly	4	2	8
		Jacqueline Myers	NENC ICB Limited Control		3. NENC Quality And Safety Committee	Primary Care Network (PCN) transformation agenda linked to Long Term Plan	None	Monitoring at place-based delivery primary care commissioning groups	NHS Long Term Plan	None	Support from place-based delivery primary care teams to practices	None	None	01/04/2025	31/03/2026	4	3	12	(5). Quarterly	4	2
04 System Recovery	NENC/0001	06/07/2022	NENC Strategy And System Oversight	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	4	5	20	System-wide surge and escalation plan agreed between all stakeholders	None	Plan reviewed and regularly tested	None	None	01/04/2025	31/03/2026	4	3	12	(6). 6 Monthly	4	2	8
		Jacqueline Myers	NENC ICB Full Control		1. NENC Executive Committee	NENC ICB Business Continuity Plan	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.	Business continuity policy and plans and review process	Annual assurance undertaken by NHSE Audit One - internal audit of business continuity and EPRR 22/23 - reasonable assurance	ICB business continuity currently being reviewed in line with changes during ICB 2:0	Annual EPRR self-assessment signed off	EPRR submission to NHSE/I	None	01/04/2025	31/03/2026	4	3	12	(6). 6 Monthly	4	2

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					C	L	Score							C	L	Score	C	L	Score			
				ambulance, community, acute and primary care services, and an inability to deliver core services.				(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	by ICB SCC to monitor and provide system leadership and coordination when necessary to ensure appropriate and proportionate response. Liaison with providers and ICB/EPRR when incidents occur. Performance addressed with providers during contract discussions. ICB escalation process	Audit One - internal audit of business continuity and EPRR 22/23 - reasonable assurance NHS England regional operational centre provide regional scrutiny and challenge. None	None										
02 Quality	NENC/0024	01/07/2022	NENC Chief Nurse And AHP Hilary Lloyd Hilary Lloyd	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 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 Quality Committees Care Quality Commission inspections ICB internal audit annual programme Quality Strategy Commissioner quality assurance visits Local authority information sharing	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	01/12/2024 Ann Fox Risk controls and assurances in place - no further actions required at last review 01/01/2025 Sarah Dronsfield New assurance framework in development aligned with ICB CQC requirements and assessment	31/12/2025	4	3	12	(5). Quarterly 12/03/2025 Ann Fox Risk reviewed and assurance framework development activity added	4	2	8	
04 System Recovery	NENC/0025	19/10/2022	NENC Chief Nurse And AHP Hilary Lloyd Michael Dunn	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 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 Health Education England and regional maternity transformation team support with workforce LMNS funding allocation for 24/25 has been received and confirmed that Ockenden II and III funding is now recurrent LMNS have submitted a business case to the ICB vacancy panel to employ a 1.0 WTE, fixed term, Band	None No implementation plan or clear measures in place as yet None n/a Awaiting formal notification regarding outcome from	Terms of reference Meeting notes and action plans Workforce vacancy rates received by LMNS team Meeting notes and reports Confirmation that funding letter has been received and funding has been transferred to Provider Trusts Regular communication with ICB Chief Nurse / LMNS SRO regarding business case process	Regional Maternity Transformation Board oversight Regional Perinatal Quality Oversight Board National tool - Birth Rate Plus in place with providers None Funding letter is provided by National Maternity Team (NHSE) N/A	None Fragmentation within ICB around workforce planning means information not consistently being fed into LMNS None n/a None	01/04/2025 Michael Dunn Risk controls and assurances in place - no further actions required at last review 06/03/2025 Michael Dunn Business case to be developed and approved and recruitment to be undertaken	31/03/2026	4	3	12	(5). Quarterly 13/03/2025 Michael Dunn Controls and actions updated	4	2	8	

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				
								7 Programme Lead to lead the LMNS workforce programme which will include the development of a NENC maternity and neonatal workforce strategy. In the interim, the Head of LMNS Programmes is providing high level programme support alongside other members of the LMNS PMO team to ensure key workforce priorities are supported. The NHS England Regional Maternity Team have advised there will be a project implemented to look at Provider Workforce Return (PWR) data that is submitted by the 8 NENC Provider Trusts. The current quality of this data is variable due to Trusts recording and submitting data in different ways and due to inaccuracies around ESR data recording.	vacancy panel and therefore dates for recruitment are unknown at this stage. There are currently no timescales in place for this project commencing.	Updates will be provided to the LMNS Workforce Steering Group	Communication via the NHSE regional maternity team in respect of progress and implications for LMNS	None identified											
02 Quality	NENC/0047	06/03/2023 Neil O'Brien Catherine Richardson	NENC Medical Directorate NENC ICB Partial Control 3. NENC Quality And Safety Committee	High rates of suspected suicides The rates of suicide in the North East 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	01/04/2025 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	31/03/2026	4	3	12	(5). Quarterly 08/05/2025 Neil Hawkins Action target date updated for 25/26.	4	2	8		

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02 Quality	NENC/0101	18/03/2025	NENC Contracting And Procurement NENC ICB Limited Control 1. NENC Executive Committee	Unplanned pharmacy closures. Jhoots group unplanned closures SNJ Health Limited, Jhoots Healthcare Limited, Jhoots Chemist Limited and LPSD fifty two Limited. Risk patients unable to get their prescriptions from branches listed above. Risk to supervised patients unable to obtain controlled substances in safe and controlled manner. Impact on surrounding GP Practices.	4	5	20	Contractual breach notices. Contracts subcommittee has oversight and reported through Pharmaceutical Services Regulations (PSR) subcommittee. Reviewing current procedures with NHSD to stop pharmacy nomination to practices to reduce risk to patients.	SNJ Health Limited closed since 23 January 2025.	Minutes and papers from Pharmaceutical Services Regulations (PSR) subcommittee.	Communication lines in place with Jhoots and regular updates.	Gaps in service and do not communicate in timely manner and do often follow up unless chased. Lack of notification when issues occurring.	24/03/2025 Helen Scott Premises registration lapsed on 14 February 2025 - GPhC is aware and is looking into this and our clinical adviser is also looking into what can be done as they are still an active pharmacy with an open ODS code. Monitor situation and update as information becomes available. 18/03/2025 Helen Scott When notified of closures to enforce breach notifications.	31/05/2025	4	3	12	(3). Monthly 08/05/2025 Neil Hawkins Reviewed controls and assurance detail.	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 breakeven position has been delivered for the ICS as a whole, with the ICB delivering a £12.2m surplus (subject to audit). For 2025/26, a balanced financial plan has been agreed across the ICS, including a planned ICB surplus of £11.8m. Delivery of that planned position will be extremely challenging and there are unmitigated net risks of over £240m across the ICS, including almost £34m net risk for the ICB.	5	5	25	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 Monthly forecasting and variance reporting and plan to date NHS Provider FT efficiency plans and system efficiencies co-ordinated via System Recovery Board Financial governance arrangements, financial policies and scheme of delegation	None None None Latest forecasts show a potential net risk across the ICS for 2025/26 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 Vacancy control process in place and panel in place for approval of any discretionary non-pay spend Reported to Finance, Performance and Investment committee. Audit One - internal audit of key financial controls 22/23 - substantial assurance System Recovery Board ICB sighted on FT efficiency plans 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 Reported to NHSE each month. Review of position with NHSE Independent review of financial controls across the ICS Monthly review with NHSE regional team and processes in place to highlight variances NHS Provider FT finance committees Audit One - internal audit of key financial controls 22/23 - substantial assurance	None None Underlying financial position work illustrates significant potential financial pressures None None	01/04/2025 Richard Henderson For 2025/26, a balanced financial plan has been agreed across the ICS, including a planned ICB surplus of £11.8m. Delivery of that planned position will be extremely challenging and there are unmitigated net risks of over £240m across the ICS, including almost £34m net risk for the ICB.	31/12/2025	5	4	20	(5). Quarterly 07/05/2025 Ruby Burdis Update from Richard Henderson 02.05.25: 'Updated risk description for 2025/26 and minor updates on controls/assurances Residual risk score increased to 20 to reflect increased risk for 25/26"	3	2	6
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	5	4	20	ICS People Partnership Forum. ICS People Strategy Group. NHS England workforce functions emerging (understanding of responsibilities still being explored).	None None within the ICB control.	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	External partners across the health and care system are part of the two groups membership. None	None None.	01/04/2024 Kelly Angus 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	31/07/2025	5	3	15	(5). Quarterly 20/03/2025 Jayne Aitken Reviewed current risk aware of a number of upcoming changes but until new information is released no immediate changes to be made.	5	2	10

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					C	L	Score							C	L	Score		C	L	Score			
				issues and potentially lead to staff ill health.				People and Culture Strategy.	Funding of NHS long term workforce plan could impact on ability to deliver Strategy.	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.	Developed in consultation with and co-operation of the wider system with comments incorporated in the strategy. Socialising final draft with system colleagues.	None.				21/01/2025 Melody Price				No change to current score. Recruitment process ongoing for new Chief People Officer. Workforce Strategy presented to Executive board with renewed focus on achieving workforce outcomes.			
02 Quality	NENC/0052	01/08/2023	NENC Chief Nurse And AHP Hilary Lloyd Nicola Jackson	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 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.	30/06/2025	4	3	12	(5). Quarterly 08/05/2025 Neil Hawkins Updated risk owner.	3	3	9		
02 Quality	NENC/0049	14/06/2023	NENC Chief Nurse And AHP Hilary Lloyd Hilary Lloyd	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. Proposal to develop an AACC Task Force will support delivery	None 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. Task force will address weakness (Capacity and responsiveness from enabling teams)	Reporting to NHSE. Internal audit reports Deloitte review and endorsement of improvement plan Task force governance will support system engagement via AACC STG	None None None	01/03/2025 Ann Fox Task Force proposal developed committing resource from wider teams to support delivery	30/06/2025	4	3	12	(5). Quarterly 12/03/2025 Ann Fox Task Force Proposal added to support delivery of actions and reduce risk	4	2	8		

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					C	L	Score							C	L	Score	C	L	Score			
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. Development of EDI dashboard to monitor progress.	None identified.	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	None at this stage.	None identified at this stage.	01/04/2025 31/03/2026 Hamid Motraghi Co-production of a five year system EDI strategy - underway. 01/04/2025 31/03/2026 Hamid Motraghi Board diversity monitoring form being developed for inclusion as part of the Board recruitment process	4	3	12	(5). Quarterly 08/05/2025 Neil Hawkins Updated action owners.	4	3	12		
02 Quality	NENC/0006	06/07/2022	NENC Delivery Directorate 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, diminished stakeholder confidence, and adverse outcomes for patients, including delayed or inadequate care and potential escalation to crisis situations.	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. Contract management and 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. 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.	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.	01/04/2025 31/03/2026 Linda Reiling Review of the contract management and performance oversight systems and processes through the Mental health Oversight and Performance Group. 01/04/2025 31/03/2026 Linda Reiling A review of the outcome of the full system NHS Talking Therapies review to identify any impact for the ICB. 01/04/2025 31/03/2026 Linda Reiling Review of utilisation to be undertaken and any communications needs identified as a result.	4	3	12	(5). Quarterly 08/05/2025 Neil Hawkins Action timescales updated to reflect ongoing into 25/26.	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 2. NENC	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 position impacts on the delivery of	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	01/04/2025 31/03/2026 Richard Henderson Plans being developed for each workstream under System Recovery Board Refresh of MTFP underway	5	4	20	(3). Monthly 07/05/2025 Ruby Burdis Update from Richard Henderson 02.05.25 - Risk	5	2	10
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					C	L	Score							C	L	Score		C	L	Score	
			Finance, Performance And Investment Commit	<p>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>We expect 2025/26 to be even more challenging financially, despite the increases in revenue funding for the NHS announced in the 2024 Autumn budget and the use of non-recurrent measure in past to support financial sustainability</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>	None	Efficiency delivery included in monthly finance reports. Monitored by financial sustainability group with PMO support in place	Reported to NHSE each month.	be identified	01/04/2025 31/03/2026 Richard Henderson				Reviewed and No update required				
							NHS Provider FT efficiency plans	None	Reports received from NHS Provider FT finance committees	NHS Provider FT finance committees	Efficiency plan to be developed for 25/26. Under-delivery of recurring efficiency schemes in 24/25										
							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	Significant risk around delivery of efficiency plans, identified within financial plan										
							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										
04 System Recovery	NENC/0075	18/12/2023	NENC Contracting And Procurement NENC ICB Partial Control 1. NENC Executive Committee	<p>Choice Accreditation</p> <p>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.</p>	4	5	20	Established accreditation process in place. Elective service specification and pathway. ICB Executive Committee oversight NENC Contract Group 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	02/09/2024 01/09/2025 Paul Turner	4	4	16	(5). Quarterly 03/04/2025 Paul Turner Risk reviewed. No changes	4	2	8	
04 System Recovery	NENC/0067	03/04/2023	NENC Strategy And System Oversight NENC ICB Partial Control 1. NENC Executive Committee	<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	Implementation plans. Development of complex care structure.	Not all plans in place as yet. DSR policy compliance and	Plans to be triangulated and process standardised across the ICB to reduce variation. Complex care structure developed within the nursing directorate as part of the ICB 2.0 programme. Complex care structure developed within the	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. There is an updated NHS England	Incomplete implementation plans across the patch None	01/04/2025 31/03/2026 Kate OBrien Action plan in development.	4	4	16	(5). Quarterly 08/05/2025 Neil Hawkins Controls reviewed to reflect completion of ICB 2.0 process. Action deadlines extended for 2025/26.	3	3	9	

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					C	L	Score						C	L	Score		C	L	Score			
01 Finance	NENC/0090	18/11/2024	NENC Medical Directorate NENC ICB Limited Control 1. NENC Executive Committee	Neil O'Brien Ewan Maule	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	standardisation of process. Workforce capacity to undertake all necessary and higher admissions in some areas of the ICB.	nursing directorate as part of the ICB 2.0 programme. C(e)TRs completed within the required timeframe. Additional support identified to minimise the impact of current staffing capacity.	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. 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	12/03/2025 Ewan Maule	01/07/2025	3	5	15	(5). Quarterly 03/04/2025 Ewan Maule Reviewed - reference to national webinar added	2	5	10
01 Finance	NENC/0102	14/05/2025	NENC Strategy And System Oversight NENC ICB Limited Control 1. NENC Executive Committee	Jacqueline Myers Craig Blair	ICB transition programme. As a result of the pace of change required to meet the ICB transition programme timescales, alongside staff capacity to deliver the requirements, there is risk that the ICB fails to deliver a revised ICB operating model within the timescales required. Staff morale and capacity could be adversely affected, alongside pressure on the delivery of ongoing ICB statutory responsibilities. In addition there is a risk surrounding skills retention through the transition process, ensuring the ICB retains the skill and capacity to deliver the strategic commissioning role - which is further compounded through the lack of clarity concerning responsibilities that may in time transition away from the ICB but need to continue post reorganisation with less resource to ensure safe delivery.	5	4	20	ICB Transition Committee established to meet fortnightly to guide transition. Transition programme team established with dedicated SRO. National guidance - e.g. Model Integrated Care Board - Blueprint v1.0 Strategic commissioning transition programme steering group - established, meeting weekly to guide transition programme, reporting into the Transition Committee. Comprehensive staff support offer in place and updated/reviewed regularly. Regular staff communication in place through all staff webinars and senior leaders cascade.	None identified at last review.	Minutes, papers and highlight reports from Transition Committee. Highlight reports to Transition Committee.	Reporting to NHS England as required.	None identified at last review.	14/05/2025 Craig Blair	30/06/2025	5	3	15	(3). Monthly 15/05/2025 Craig Blair Risk added to register following agreement at ICB Transition Committee on 14 May 2025.	5	2	10
02 Quality	NENC/0084	09/07/2024	NENC Chief Nurse And AHP NENC ICB Limited Control	Hilary Lloyd Vicky Playforth	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,	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 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	We need to understand the activity, funding budget and workforce issues the LA;s describe as otherwise risk of taking back an	LA's may still serve notice on the Section 75	09/07/2024 Ann Fox	30/06/2025	3	4	12	(5). Quarterly 08/05/2025 Neil Hawkins Action timescales updated to reflect	3	3	9

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					C	L	Score							C	L	Score	C	L	Score			
			1. NENC Executive Committee	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.				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.		meetings. Finance aware and to have continued involvement to measure risk.	underfunded function. All cases would need to be up to date in terms of reviews, DoLS, COP DoLS Continued commitment to meeting		approach to potential transformation of AACC case management functions across the ICB. 13/12/2024 23/06/2025 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.				ongoing into 25/26. Review with owner to see if risk is best managed at Place.					
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 programme established 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. Oversight	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. System resilience framework implemented during system pressures (Direct Policy) 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 Centre monitoring on a daily basis between 8am to 8pm 17 days co-ordination. Scrutiny by NHSE Scrutiny by NHSE NHS England reporting arrangements.	None None None	01/04/2025 31/03/2026 Marc Hopkinson Ongoing monitoring at LADB with escalation where required	4	3	12	(5). Quarterly 08/05/2025 Neil Hawkins Action timescales updated to reflect ongoing into 25/26.	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 System Oversight NENC ICB Partial Control 1. NENC Executive Committee	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. Place based Autism Strategies Regional Network to evaluate areas of good practice - from health and social care services. Autism Statement Development Group. Establishment of the All-Age Neurodivergence Group: The group will oversee the transformation program, providing leadership, setting priorities, and ensuring	ICS Autism Statement not yet in place. Data analysis in relation to outcomes identified in different strategies Network not yet established. None None identified.	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. Notes and actions from the All-Age Neurodivergence Group and team and finish groups.	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 identified.	None None None	01/04/2025 31/03/2026 Kate OBrien Autism Statement to be developed by ICB Place Based Commissioners and Place Based Case Managers 01/04/2025 31/03/2026 Peter Rooney Regional Network to be established.	4	4	16	(5). Quarterly 08/05/2025 Neil Hawkins Action timescales updated to reflect ongoing into 25/26.	4	3	12
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					C	L	Score							C	L	Score		C	L	Score
								alignment with the ICB's strategic goals. Defined Scope and Objectives: Ensure the scope of the program is realistic, with clear, phased objectives and milestones, to avoid overcommitment 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 Hilary Lloyd Peter Rooney NENC ICB Partial Control 3. NENC Quality And Safety Committee	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	13/10/2023 31/12/2025 Peter Rooney Joint commissioning processes with local authorities to be agreed.	4	3	12	(5). Quarterly 10/04/2025 Neil Hawkins Removed link to SEND subcommittee at the request of SEND subcommittee Chair.	3	3	9