

Item: 9

REPORT CLASSIFICATION	✓	CATEGORY OF PAPER	✓
Official	✓	Proposes specific action	
Official: Sensitive Commercial		Provides assurance	✓
Official: Sensitive Personal		For information only	

BOARD

27 JANUARY 2026

Report Title:

Board Assurance Framework and Risk Management Report – Q3 2025/26 position

Purpose of report

The purpose of this report is to provide the Board with a refreshed Board Assurance Framework for quarter three, 2025/26 and an updated corporate risk register for review and consideration.

Key points

The Board has overall responsibility for ensuring systems and controls are in place and sufficient to mitigate any significant risks which may threaten the achievement of the ICB's strategic aims and objectives. The Board achieves this primarily through the work of its committees, use of audit, independent inspections and by systematic collection and scrutiny of performance data.

The Board Assurance Framework (BAF) is used to provide assurance on the management of key risks to the delivery of the ICB's strategic aims and objectives as well as the wider strategic goals of the Integrated Care Partnership. It is intended to provide a visible strategic risk summary, supported by the full detail of the corporate risk register.

The Board also receives the corporate risk register on a quarterly basis which includes risks identified by the ICB and via committee risk registers as being 'high or very high' scored 12 and above.

The following appendices are attached to the report:

- Appendix 1 - refreshed BAF for quarter 3, 2025/26
- Appendix 2 – corporate risk register, an overview of all ICB risks with a residual risk score of 12 and above.

The BAF is reviewed regularly by the Executive, Audit, Quality and Safety and Finance, Performance and Investment Committees before submission to the Board. The corporate risk register is also reviewed regularly by the Audit and Executive Committees and, depending on the nature of the risk, by the Quality and Safety and Finance, Performance and Investment Committees.

Risks and issues

Risks are mapped to the goals identified in the North East and North Cumbria Integrated Care Partnership strategy 'Better health and wellbeing for all' and from these goals the principal risks to the strategy have been identified as:

1. **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.**
The gap between how long people live in the North East and North Cumbria compared to the rest of England is not on track to reduce by 10% by 2030. Overall risk rated as 12 A (high).

2. 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.

The gap between the inequality in life expectancy and healthy life expectancy at birth between people living in the most deprived and least deprived 20% of communities is not on track to narrow by 10% by 2030. Overall risk rated as 20 A (extreme).

3. 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.

The ICB does not maintain its good or outstanding rating from the Care Quality Commission (CQC) and the percentage of regulated services across social care, primary care and secondary care that are rated as good or outstanding by the CQC is declining. Overall risk rated as 20 R (extreme).

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

The percentage of children with good school readiness when they join the reception class (including children from disadvantaged groups) is declining. Overall risk rated as 16 A (high).

Assurances

The report is in line with the ICB's Risk Management Strategy: <icbp037-risk-management-strategy-5.pdf>

Recommendation/action required

The Board is asked to:

- Satisfy itself that the BAF accurately reflects the principal risks to achieving our objectives as well as their current mitigations;
- Approve the BAF for quarter 3, 2025/26;
- Receive and review the corporate risk register for assurance.

Acronyms and abbreviations explained

BAF – Board Assurance Framework

CRR – Corporate Risk Register

AC – Audit Committee

LMNS - Local Maternity and Neonatal System NHSE – NHS England

FOI - Freedom of Information

MOU - Memorandum of Understanding

VCSE - Voluntary, Community & Social Enterprise

SI – Serious Incident

LeDeR - Learning from lives and deaths – people with a learning disability and autistic people

SVOC - System Vaccination Operations Centre

Sponsor/approving executive director	C Riley, Chief Corporate Services Officer
Date approved	20 January 2026
Reviewed by	D Cornell, Director of Corporate Governance and Board Secretary
Report author	N Hawkins, Strategic Head of Corporate Governance

Link to ICP strategy priorities

Longer and Healthier Lives	✓
Fairer Outcomes for All	✓
Better Health and Care Services	✓
Giving Children and Young People the Best Start in Life	✓

Relevant legal/statutory issues						
Note any relevant Acts, regulations, national guidelines etc						
Any potential/actual conflicts of interest associated with the paper?	Yes		No		N/A	✓
If yes, please specify						
Equality analysis completed	Yes		No		N/A	✓
If there is an expected impact on patient outcomes and/or experience, has a quality impact assessment been undertaken?	Yes		No	✓	N/A	
Key considerations						
Financial implications and considerations	None identified					
Contracting and Procurement	None identified					
Local Delivery Team	None identified					
Digital implications	None identified					
Clinical involvement	None identified					
Health inequalities	None identified					
Patient and public involvement	None identified					
Partner and/or other stakeholder engagement	None identified					
Other resources	None identified					

Board Assurance Framework 2025/26 (Quarter 3) and Risk Management Report

1. Introduction

The Board has overall responsibility for ensuring systems and controls are in place, sufficient to mitigate any significant risks which may threaten the achievement of the ICB's strategic aims and objectives. Evidence may be gained from a wide range of sources, but it should be systematic, supported by evidence, independently verified and incorporated within a robust governance process. The Board achieves this primarily through the work of its committees, through use of audit, independent inspections and by systematic collection and scrutiny of performance data.

2. Developing the Board Assurance Framework

The ICB manages risk across five levels with the principal risks to achieving the ICB's objectives forming the Board Assurance Framework (BAF):

1. Place
2. Area
3. Directorate
4. Executive directors (corporate risks)
5. Board Assurance Framework

Risks are considered at their corresponding committees to provide the Board with assurance that risks are reviewed individually by risk owners and also collectively by an oversight committee.

Further to the publication of the North East and North Cumbria Integrated Care Partnership strategy, the ICB's risks have been assessed to determine their impact on achieving the vision and goals of the strategy and these have been incorporated into the BAF for 2025/26.

Each goal has been reviewed to determine an overarching or principal risk to its achievement and then each corporate risk has been aligned to one of the four risks to determine the overall risk score.

The updated BAF for Q3 2025/26 is available at Appendix 1. The BAF is monitored through the Executive, Audit, Quality and Safety and Finance, Performance and Investment Committees before submission to the Board.

All ICB risks are assessed against the Integrated Care System's goals with the highest risk score used to determine the overall risk to the achievement of each goal.

In summary, the risks to each goal are:

ICS Goal	Previous overall score	Current overall score
Longer and healthier lives	12	12
Fairer outcomes for all	20	20
Better health and care services	20	20
Giving children and young people the best start in life	16	16

3. Risk movement

- **NENC/0049** – Variation in practice and compliance within the ICB/ICS Continuing Care teams. There is a risk of reputational damage, non-compliance with statutory duties, adverse financial impact, negative patient/family experience and adverse impact on the market and workforce. The work of the All Age Continuing Care Taskforce has reduced the risk score to 8 (from 12).
- **NENC/0067** – Care, Education and Treatment Reviews (C(e)TR) and Dynamic Support Registers (DSR) not being compliant against the new updated policy and guidance. The new DSR and (C(e)TR) policy has standardised processes and there is additional leadership capacity in place to oversee the process. Risk score reduced to 9 (from 12).
- **NENC/0090** – 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. There is a risk of financial pressures resulting from charges back to the ICB for consultations and drug costs. Following the updated commissioning policy the risk score has been reduced to 8 (from 15).
- **NENC/0031** – There is a risk that the ICS is not able to manage capital spend within the confirmed capital funding allocation. Currently there are particular pressures on in-year delivery of the capital position and also delays in national approval of Return to Constitutional Standards funding. Mitigations are being identified but there is a risk of an overspend or schemes not being able to progress as planned. Risk score increased to 12 (from 9)
- **NENC/0032** - There is a risk that the ICB does not meet its statutory financial duty to manage running costs within its running cost allocation. The risk score has been reduced to 8 (from 12) as the ICB is expected to be able to deliver running cost allocation position in 2025/26.

4. New corporate risks

There were four new corporate risks added to the corporate risk register this reporting period:

- **NENC/0098** – The proposed delegation from NHSE to the ICB for the Practice Level Support Operating and Commissioning Model for 2026/27, without an identified resource to undertake. Confirmation is still awaited from NHSE to confirm the ICB's responsibilities, this therefore delays the timescales for procurement. Funding would also need to be identified by the ICB. Risk scored 12 (high).
- **NENC/0021** – For delivery of the COVID vaccination programme in 2026/27, the ICB will need to manage the risk associated with Spring/Autumn delivery considering the ICB Blueprint, Model Region and the Office of Pan ICB Commissioning guidance. NHSE has confirmed a 50% reduction in COVID programme funding which will see a reduced level of service from the SVOC. Risk score 15 (high).
- **NENC/0118** – The ICB was made aware of a major incident in September 2025 which impacted 5 of the 8 NENC Provider Trusts whereby when a number of women's records have been updated within BadgerNet, the updates have not been saved within the system

therefore the information is lost. Local adjustments and measurements will be considered by LMNS programme delivery group in December 2025 as part of the mitigations. Risk score 12 (high).

- **NENC/0119** – PHL Group have taken over the Vocare contract for out of hours provision in the North affecting Northumberland, Newcastle and North Tyneside. Risk of failure of financial due diligence and valid contract for provision in place until resolved. Risk score 15 (high).

5. Closed risks

No corporate risks have been closed during this reporting period.

6. Recommendations

The Board is asked to:

- Satisfy itself that the BAF accurately reflects the principal risks to achieving our objectives as well as their current mitigations;
- Approve the BAF for quarter 3, 2025/26;
- Receive and review the corporate risk register for assurance.

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Date: 15th December 2025