

Strategic aim	Risk ref	Date identified	Directorate Level of control Committee	Description	Initial			Controls	Gaps in control	Internal assurances	External assurances	Gaps in assurance	Residual			Reviews	Target		
					C	L	Score						C	L	Score		C	L	Score
Goal 1 Longer And Healthier Lives For All																			
1, Improve Outcomes In Population Health And Healthcare	NENC/0024	01/07/2022	NENC Chief Nurse Directorate Ann Fox NENC ICB Partial Control 3. NENC Quality And Safety Committee	Quality of commissioned services that fall below the required standards, putting patient health, safety and welfare at risk. As a result of the quality of commissioned services not being assessed and monitored within a structured and coordinated process of assurance (including acute, mental health, learning disability 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	4	4	16	(5). Quarterly 24/01/2024 Ann Fox Actions added.	4	2	8
1, Improve Outcomes In Population Health And Healthcare	NENC/0047	06/03/2023	NENC Medical Directorate Neil O'Brien Catherine Richardson NENC ICB Partial Control 3. NENC Quality And Safety Committee	High rates of suspected suicides The rates of suicide in the northeast and north cumbria are the highest in the country at 13.4 per 100,000 people. Suicide is the leading cause of death in our region for men aged 15 - 49 and women aged 20-34. The risk to the ICB is that we do not reduce the suicide rate for people in contact with NHS commissioned and health care delivery services, amenable to healthcare preventative efforts.	4	4	16	Quality and accountability of commissioned services. Tackling means and methods of suicide Improving services through listening and learning from individuals and families. Equitable, effective and targeted treatment and support for groups known to be at high risk of suicide. Programme group established. Support and training for NHS staff to increase skills and capability. Providing effective and appropriate crisis support.	None. TEWV footprint for audit cluster and increasing trend response not consistent across local authorities. No consistent mechanism in place. Availability of data and funding for training and post intervention support services, specifically children and young people. Lack of funding - WTE funding proposal submission Jan 24 Lack of funding - added to commissioning intentions	Mental Health, Learning Disability and Autism Sub-committee programme reports, performance reports and minutes. Suicide audit in CNTW footprint initially. ADPH project to update response guidelines Suicide audit missing underway on 1st November for CNTW footprint interface with DoN and Safeguarding to be strengthened Mental Health, Learning Disability and Autism Sub-committee 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	4	3	12	(4). 2 Monthly 24/01/2024 Daniel Webber Updated controls and assurance.	4	2	8
1, Improve Outcomes In Population Health And Healthcare	NENC/0001	06/07/2022	NENC Strategy And System Oversight Jacqueline Myers Marc Hopkinson 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 None	Plan reviewed and regularly tested Business continuity policy and plans and review process Annual EPRR self-assessment signed off 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	None Annual assurance undertaken by NHSE Audit One - internal audit of business continuity and EPRR 22/23 - reasonable assurance EPRR submission to NHSE/I Audit One - internal audit of business continuity and EPRR 22/23 - reasonable assurance NHS England regional operational centre provide regional scrutiny and challenge. None	None ICB business continuity currently being reviewed in line with changes during ICB 2:0 None None	4	3	12	(6). 6 Monthly 24/01/2024 Emma Pickering Controls and assurances updated	4	2	8

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1, Improve Outcomes In Population Health And Healthcare	NENC/0009	06/07/2022	NENC Strategy And System Oversight NENC ICB Limited Control 3. NENC Quality And Safety Committee	Primary care services As a result of workforce pressures, increased demand, infrastructure or technology issues, failure of or challenges to PCNs' ability to meet transformation agenda there is a risk that primary care is unable to provide long term, sustainable and reliable quality care services to patients and is not able to support people in a community based setting and provide a point of ongoing continuity of care. This could result in patient harm, increased attendance at hospital settings and compromised patient flow and damage the reputation of the ICB.	4	4	16	Strategic Data Collection Service (SDCS) reporting system to monitor workforce. Primary Care Network (PCN) transformation agenda linked to Long Term Plan OPEL status for practices reported via UEC-RAIDR App Primary Care Access Recovery Plan (PCARP) System Overview Group ICB Primary Care Strategy and Delivery Subcommittee Placed based delivery primary care teams and Support Level Framework aligned to delivery of PCARP 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. Single OPEL framework agreed to ensure consistency across the ICB and promote increased reporting of OPEL levels. Monitoring at place-based delivery primary care commissioning groups Support from place-based delivery primary care teams to practices Oversight of PCARP and SDF delivery through System Overview Group and Primary Care Transformation team Minutes and reports for the ICB Primary Care Strategy and Delivery Subcommittee. Board and Executive Committee review of PCARP and Primary Care / Secondary Care Interface System Plan. Monitoring at place-based delivery primary care commissioning groups, co-ordinated by an overview group. Oversight of PCARP and SDF delivery through System Overview Group and Primary Care Transformation team Minutes and reports for the ICB Primary Care Strategy and Delivery Subcommittee. Board and Executive Committee review of PCARP and Primary Care / Secondary Care Interface System Plan. Monitoring at place-based delivery primary care commissioning groups, co-ordinated by an overview group.	Strategic Data Collection Service (SDCS) reporting NHS Long Term Plan None Strategic Data Collection Service (SDCS) reporting NHS Long Term Plan NHS Long Term Workforce Plan System workforce retention reporting Strategic Data Collection Service (SDCS) reporting NHS Long Term Plan NHS Long Term Workforce Plan System workforce retention reporting	None	4	3	12	(5). Quarterly 24/01/2024 Emma Pickering Controls and assurances updated	3	2	6
1, Improve Outcomes In Population Health And Healthcare	NENC/0025	19/10/2022	NENC Chief Nurse Directorate NENC ICB Partial Control 3. NENC Quality And Safety Committee	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 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	None No implementation plan or clear measures in place as yet None	Terms of reference Meeting notes and action plans Workforce vacancy rates received by LMNS team Meeting notes and reports	Regional Maternity Transformation Board oversight Regional Perinatal Quality Oversight Board National tool - Birth Rate Plus in place with providers None	None Fragmentation within ICB around workforce planning means information not consistently being fed into LMNS None	4	3	12	(5). Quarterly 24/01/2024 Emma Pickering Controls and assurance updated	3	2	6

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Goal 2 Fairer Health Outcomes For All																													
2. Tackle Inequalities In Outcomes, Experience And Access	NENC/0028	21/10/2022	NENC Chief Nurse Directorate	Clinical and social care workforce across the region There are widespread challenges to recruitment nationally and particularly of clinical and social care staff as a result of many factors including EU exit, COVID and post COVID burnout, ageing workforce. This will impact on the delivery of safe services and could lead to lack of access to specific services, drive up waiting times leading to poorer outcomes for patients. This will cause further workload pressures on existing staff which could cause retention issues and potentially lead to staff ill health.	5	4	20	ICB Workforce People Group. ICS Workforce Strategy Group.	None	Terms of reference, meeting notes, action plans. Terms of reference (once developed).	External partners are part of the Group membership.	None	5	3	15	(5). Quarterly	5	2	10										
		David Purdue																											
		Leanne Furnell	NENC ICB Partial Control					NHS England workforce functions emerging (understanding of responsibilities still being explored).	None within the ICB control.	Chief Nurse meetings with counterparts in NHSE. ICB workforce team have regular meetings with counterparts at NHS England. ICB workforce team regular meetings with counterparts at NHS England.	None	None.																	
			3. NENC Quality And Safety Committee				People and Culture Plan	Plan still in final draft	System review of draft plan. Development of a system-wide plan to reduce the risk raised. Reporting arrangements on delivery of the plan being finalised.	Developed in consultation with and co-operation of the wider system with comments incorporated in the Plan	Plan currently in final draft																		
3. Enhance Productivity And Value For Money	NENC/0004	06/07/2022	NENC Finance Directorate	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.	4	4	16	Financial plan	None	Approved finance plan in place.	Audit One - internal audit of key financial controls 22/23 - substantial assurance	None	4	3	12	(5). Quarterly	3	3	9										
		David (ICB) Chandler																											
		Richard Henderson	NENC ICB Partial Control	For 2023/24, a deficit plan of £49.9m has been agreed for the ICS as a whole, with a surplus of £32.4m planned for the ICB.				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																		
			2. NENC Finance, Performance And Investment Commit	Currently specific pressures are being experienced within the ICB relating to prescribing cost growth and continuing healthcare costs.				None	Financial reporting and monitoring process	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																	
				Across the wider ICS, specific pressures are being experienced by provider trusts relating to the costs of industrial action and ERF, along with other pay and non-pay cost pressures.				None	Financial controls reviewed and strengthened where relevant across the ICS, including vacancy control processes and approval of non-pay spend	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																	
				Additional non-recurring funding to support industrial action and other pressures, together with other expected benefits have significantly reduced the net risk position across the ICS, with a revised forecast deficit for the ICS of £35m now anticipated, including a surplus for the ICB of £32m.				Latest forecasts show a potential net risk across the ICS.	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																		
2. Tackle Inequalities In Outcomes, Experience And Access	NENC/0006	06/07/2022	NENC Chief Nurse Directorate	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.	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.	None	Contract management process Performance management process OPEL status	NHS England quarterly performance submissions and assurance meeting Workforce planning from NHS E and providers	Contract management and performance oversight systems and processes under review through the MHLDA partnership.	4	3	12	(5). Quarterly	4	2	8										
		Kate O'Brien																											
		Linda Reiling	NENC ICB Partial Control					Contract management and performance oversight systems and processes.																					
			3. NENC Quality And Safety Committee																										
2. Tackle Inequalities In Outcomes, Experience And Access	NENC/0033	15/12/2022	NENC Strategy And System Oversight	Meeting needs of refugees and asylum seekers As a result of the lack of consistent provision across the ICB, there is a risk that the complex needs of the increased number of refugees and asylum seekers being placed in the North East and North Cumbria may not be met. This requires a more consistent management approach across the system to ensure providers have a clear understanding of the entitlement and requirements for refugee and asylum seeker health provision. An increase in demand will impact on sustainability of services, increase health inequalities. There is also a risk to the reputation of the ICB if adequate and appropriate services are not commissioned.	4	4	16	Multi agency working group established to look at the migrant health issues across the ICB area.	Appropriate attendance at working group by relevant stakeholders.	Terms of reference and initial meeting of the working group held in November 2023. Issues have been identified through a multi agency approach identified to address specific impacts.	These issues are also being addressed by NHSE and UKHSA regionally	Evidence of delivery from stakeholders.	4	3	12	(5). Quarterly	3	3	9										
		Jacqueline Myers																											
			NENC ICB Limited Control																										
			3. NENC Quality And Safety Committee																										

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1. Improve Outcomes In Population Health And Healthcare	NENC/0051	13/07/2023	NENC Chief Nurse Directorate 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	3	4	12	(5). Quarterly 24/01/2024 Daniel Webber Updated controls and assurances	3	2	6
2. Tackle Inequalities In Outcomes, Experience And Access	NENC/0049	14/06/2023	NENC Chief Nurse Directorate 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 finance 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	None None	4	3	12	(5). Quarterly 24/01/2024 Daniel Webber Updated controls and assurances	4	3	12
2. Tackle Inequalities In Outcomes, Experience And Access	NENC/0052	01/08/2023	NENC Chief Nurse Directorate 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	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	CQC/NHSE monitoring meetings including oversight of action plan 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	None None None	4	3	12	(5). Quarterly 24/01/2024 Jenna Wall Risk reviewed and progress, with summary of activities to support the mitigations.	3	3	9

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Goal 3 Improving Health And Care Services																					
3. Enhance Productivity And Value For Money	NENC/0065	07/11/2023	NENC Finance Directorate David (ICB) Chandler Richard Henderson	NENC ICB Partial Control 2. NENC Finance, Performance And Investment Commit	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	4	5	20	(3). Monthly 29/12/2023 Richard Henderson Updated assurances as additional detail received from providers around financial controls and unmitigated risks for 23/24 reduced significantly	4	2	8	
									Range of potential system opportunities identified and plans being developed	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
									Efficiency plan in place with ICB financial sustainability group established	None	Reports received from NHS Provider FT finance committees	NHS Provider FT finance committees									None
									NHS Provider FT efficiency plans	None	Scheme of Delegation approved annually Financial policies reviewed and updated annually Audit committee review	None									None
									Financial governance arrangements, financial policies and scheme of delegation	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
									Financial Controls reviewed and strengthened where relevant across the ICS, including vacancy control processes and approval of non-pay spend	None	Investment / business case policy	None									None
									ICB investment / business case policy to manage ongoing investments / commitments	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
									Monthly forecasting and variance reporting and plan to date to manage current and underlying position	None	Audit One - internal audit of key financial controls 22/23 - substantial assurance	None									None
ICB key financial controls	None																				
3. Enhance Productivity And Value For Money	NENC/0032	16/11/2022	NENC Finance Directorate David (ICB) Chandler Richard Henderson	NENC ICB Full Control 2. NENC Finance, Performance And Investment Commit	Management of ICB running costs position There is a risk that the ICB does not meet its statutory financial duty to manage running costs within its running cost allocation. An underspend is expected in 2023/24 due to vacancies but this remains a significant recurring risk for future years, with a 30% real terms reduction to be delivered by 2025/26	4	5	20	Financial plan including running costs	None	Financial plan to show breakeven position	None	None	4	4	16	(5). Quarterly 15/12/2023 Richard Henderson Updated risk description to reflect 2023/24 dates.	3	2	6	
									Financial reporting and monitoring process, including forecasting and variance reporting	None	Monthly finance reports showing running cost position. Reported to FPI Committee	None									
									Staffing establishment control process to manage staffing establishment. Recruitment freeze implemented for all but essential posts	None	Process in place with appropriate approval required for any staffing establishment changes	None									
									Work programme established to oversee the transformation required to manage the 30% reduction in running costs	None	Weekly running cost working group in place with transformation group being established	None									
									ICB key financial controls	None	Audit Committee oversight. Finance, Performance and Investment committee	Audit One - internal audit of key financial controls 22/23 - substantial assurance									
2. Tackle Inequalities In Outcomes, Experience And Access	NENC/0007	06/07/2022	NENC Strategy And System Oversight Jacqueline Myers Lucy Topping	NENC ICB Partial Control 2. NENC Finance, Performance And Investment Commit	Delivery of NENC 23/24 operational planning objectives There is a risk of failure to achieve 23/24 operational planning objectives for our patients. Significant pressures are evident in certain standards, particularly in respect of HCAI, Cat 2 ambulance response times, A&E 4 hour, elective activity levels, units of dental activity, cancer 62 day backlog, access to Talking Therapies, and mental health support for CYP. Any failure to deliver the objectives has the potential to adversely impact on patient care, as well as posing a reputational risk for the ICB.	4	5	20	Contract management processes in place to manage delivery of objectives.	None	Performance monitored by Executive Committee.	None	None	4	4	16	(5). Quarterly 24/01/2024 Emma Pickering Controls and assurance updated	3	3	9	
									Performance management processes in place as well as support through relevant strategic programmes.	None	Performance and activity monitored by ICB.	None									
									North East and North Cumbria Performance improvement and oversight group established with terms of reference, membership includes Chief Operating Officer attendance from acute trusts.	None	Monitoring against plans	None									
									Elective recovery plans developed with main providers where needed.	None											
1. Improve Outcomes In Population Health And Healthcare	NENC/0067	03/04/2023	NENC Strategy And System Oversight Jacqueline Myers Kate O'Brien	NENC ICB Partial Control 1. NENC Executive Committee	Care, Education and Treatment Reviews (C(e)TRs) and Dynamic support registers (DSRs) compliance 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.	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. Complex care structure developed within the nursing directorate as part of the ICB 2.0 programme.	NHS England Dynamic support register and Care (Education) and Treatment Review policy and guide	Incomplete implementation plans across the patch	4	4	16	(5). Quarterly 20/03/2024 Linda Reiling Risk reviewed with NECS, controls added and updated, action plan date updated.	3	4	12	
									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.	NHS England Dynamic support register and Care (Education) and Treatment Review policy and guide									
									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.	NHS England Dynamic support register and Care (Education) and Treatment Review policy and guide									

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1. Improve Outcomes In Population Health And Healthcare	NENC/0054	15/08/2023	ICB North	Inconsistent Primary Care Quality across ICB Highlighted through Quality & Safety North	4	5	20	Primary Care Quality issues process. Quality and Safety Committee and Area Quality and Safety subcommittees. ICB internal audit annual programme.	Reporting process. Capacity at place.	Quality and Safety Committee and Area Quality and Safety Committee - minutes, papers and actions.	Internal audit reports	None	4	4	16	(5). Quarterly 24/01/2024 Daniel Webber Updated controls and assurances.	3	2	6
		Neil O'Brien	NENC ICB Partial Control	Inconsistencies identified across North around Primary Care Quality reporting and risk and mitigations. Lack of capacity and inconsistent approach to Primary Care Quality identified throughout ICB. Place no longer receive Primary Care dashboard and lack of capacity and regular support to Primary Care (GP Practices and Care Homes) means a lot of soft intelligence has also been lost.															
	NENC/0075	18/12/2023	NENC Strategy And System Oversight	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. Elective service specification and pathway. ICB Executive Committee. NENC Contract Group.	None	NENC Contract Group and Executive Committee oversight. Elective service specification and pathway development being prioritised as far as possible within available resource.	None	None	4	4	16	(5). Quarterly 24/01/2024 Daniel Webber Updated controls and assurances.	4	2	8
		Jacqueline Myers	NENC ICB Partial Control																
2. Tackle Inequalities In Outcomes, Experience And Access	NENC/0048	05/06/2023	NENC Digital And Information Directorate	GP Practices losing connection to Great North Care Record following migration to the TPP SystemOne clinical system It has been identified that when practices have migrated to the TPP clinical system they have lost connection to the regional shared care record system (the Great North Care Record - GNCR). This record allows the GP patient records to be viewed in other points of care delivery to facilitate 'joined up care' and appropriate clinical decisions to be made.	4	5	20	Process in place to negotiate with suppliers to reach agreement. ICB escalation process	None (within ICB control)	ICB escalation process through the primary care transformation programme.	NHS England commercial lead involved as part of the broader TPP conversations.	No agreement in place as yet	4	4	16	(4). 2 Monthly 24/01/2024 Emma Pickering Controls and assurances updated.	3	3	9
		Graham Evans	NENC ICB Partial Control	TPP not allowing the reconnecting to GNCR is also impacting on any new community connections, so preventing data such as 0-19 services (whole region) health visitor, safeguarding, immunisations etc. from appearing in the GNCR.															
1. Improve Outcomes In Population Health And Healthcare	NENC/0055	04/09/2023	NENC Strategy And System Oversight	23-24 planned inpatient discharges and subsequent bed closure trajectories As a result of the lack of appropriate accommodation and support available across the region to meet the complex needs of people with a learning disability and autistic people there is a risk that the ICB will fail to achieve 23-24 planned inpatient discharges and subsequent bed closure trajectories. The risk is compounded by the implications of the Supreme Court Judgment in MM case whereby people detained in hospital subject to the MM Ruling cannot be discharged which prevents new admission to secure services.	4	5	20	Senior Intervenor Project and development of regional commissioning framework to enable discharges and triangulation with housing work ICB Learning Disability and Autism Programme Team to help support discharges from hospital with regards to guidance, capacity and expertise in stimulating the market and case management. Planning intentions process for 2024/25 Care, Education and Treatment Reviews (C(e)TRs) and Dynamic Support Registers (DSRs)	None	Terms of reference for Senior Intervenor Project, meeting notes, action plans and reports. High level Senior Intervenor outcome recommendation report High Cost Packages of Care is part of the planning intentions for 24/25 should be documented as an internal assurance	NHS England Mental Health, Learning Disability and Autism Inpatient Quality Transformation Programme NHSE Mental Health, Learning Disability and Autism Inpatient Quality Transformation Programme	Development of a system wide action plan to address recommendations made within the senior intervenor report Planning intentions not yet confirmed for 24/25	3	5	15	(5). Quarterly 24/01/2024 Emma Pickering Controls and assurances updated	3	3	9
		Jacqueline Myers	NENC ICB Full Control																
	NENC/0023	06/09/2022	NENC Chief Nurse Directorate	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 and action plans.	NHS E north east and Yorkshire are also reviewing ambulance delays. SCC monitoring on a daily basis between 8am to 8pm. Scrutiny by NHSE Scrutiny by NHSE	None None None	4	3	12	(5). Quarterly 22/01/2024 Daniel Webber Controls and assurances reviewed and updated.	4	2	8
		David Purdue	NENC ICB Partial Control																
			3. NENC Quality And Safety Committee																

Strategic aim	Risk ref	Date identified	Directorate Level of control Committee	Description	Initial			Controls	Gaps in control	Internal assurances	External assurances	Gaps in assurance	Residual			Reviews	Target		
					C	L	Score						C	L	Score		C	L	Score
1. Improve Outcomes In Population Health And Healthcare	NENC/0059	19/09/2023	NENC Strategy And System Oversight Thomas Knox NENC ICB Partial Control 3. NENC Quality And Safety Committee	Impact of Industrial Action for Health Providers across the ICB There is a risk that despite providers having risk assessed and mitigated the impact of industrial action there may be some unmitigated risk and/or patient safety issues. Failure to provide required services across the integrated care system which could damage the reputation of the ICB and reduce public confidence in the NHS as a whole.	4	4	16	ICB regular engagement with Providers. Providers have risk assessment, registers and mitigation action plans that have been developed through a series of recent periods of industrial action	None	ICB Incident Coordination Centres stood up for every period of industrial action and ongoing planning and engagement with all providers across the system Regular touch base meetings held daily during industrial action period.	NHSE robust oversight and regular engagement at ICB and Regional level	None	3	4	12	(5). Quarterly 11/01/2024 Thomas Knox Risk reviewed with NECS- after December/ January period of industrial action, control internal assurance updated, risk target score reviewed and decreased, action updated.	2	4	8
3. Enhance Productivity And Value For Money	NENC/0031	16/11/2022	NENC Finance Directorate NENC ICB Full Control 2. NENC Finance, Performance And Investment Commit Richard Henderson	There is a risk that the ICS is not able to manage capital spend within the confirmed capital funding allocation. There is a risk that the ICS is not able to manage capital spend within the confirmed capital funding allocation. For 2023/24, capital plans have been agreed in line with the capital allocation, including 5% 'over-programming' allowance, however this is a significant reduction to original plans with a potential risk of overspends in-year.	4	5	20	Capital plan Monthly financial reporting and forecasting against capital plans and funding allocation Provider collaborative process for managing capital spend	Capital plan included 5% over-programming and impact of IFRS16 has now been allocated to systems, resulting in shortfall in plans None None	Agreed ICS capital plan with variance reported monthly. Audit One - internal audit of key financial controls 22/23 - substantial assurance Monthly finance reports, reported to FPI Committee. Audit One - internal audit of key financial controls 22/23 - substantial assurance Updates to monthly ICS Directors of Finance group. Audit One - internal audit of key financial controls 22/23 - substantial assurance	Agreed capital plan is in excess of confirmed funding allocation None None	None None	3	4	12	(5). Quarterly 22/01/2024 Richard Henderson Risk reviewed and actions added	3	2	6
	NENC/0076	12/01/2023	NENC Chief Nurse Directorate David Purdue NENC ICB Partial Control 3. NENC Quality And Safety Committee Trina Holcroft	Safeguarding risk of patient access to online records There is a safeguarding risk as safeguarding information may be held in perpetrators' records (e.g. relating to Multi-agency Risk Assessment Conference (MARAC)) which could place patients at further risk of harm or potentially cause harm to staff in the healthcare setting. This could lead to an increase in safeguarding resources required to protect victims and potential damage to the reputation of the ICB should an incident occur in terms of failing to perform statutory duties.	4	3	12	Training for GP/FT staff Correspondence in place to review records going back before COVID. Digital updates National campaigns	Time and capacity to undertake the necessary reviews and deliver training	Regular correspondence to review records Training in place Support for internal teams	NHSE(as NHS Digital) have supported rollout	One incident has occurred	4	3	12	(6). 6 Monthly 24/01/2024 Risk description re-written to clarify	4	2	8
2. Tackle Inequalities In Outcomes, Experience And Access	NENC/0060	02/10/2023	NENC Strategy And System Oversight NENC ICB Full Control 1. NENC Executive Committee Jacqueline Myers Clare Nesbit	ICB 2:0 Programme ICB 2:0 Programme aims to redesign the ICB operating model and staffing structure to achieve a range of improvements including the 30% reduction in the Running Cost Allowance that will take effect across 2024/25 and 2025/26. There is a risk that the scale of reduction will compromise the ability of the ICB to meet its statutory duties and make progress towards its vision and long-term foals There is a further risk that the change process will result in staff being distracted and/or demotivated, or that we will lose key staff members to jobs elsewhere The is an associated risk that the change will destabilise the North of England Commissioning Support Unit (NECS) and exacerbate there existing financial challenges and that the impact of this will knock onto delivery capacity within the ICB	4	4	16	Steering Group chaired by the ICB Executive Senior Responsible Officer. ICB Executive Committee. Dedicated ICB 2.0 program team. ICB Organisational Development plan. NECS involvement at the Programme Steering Group. Formal staff consultation process. Organisation Development Plan, with supporting implementation plan.	None None	Executive oversight of the ICB 2:0 Programme. Executive Committee minutes, Steering Group notes and action plan (closely monitored, reviewed and regularly tested). Finance review in relation to the delivery of the 30% RCA reduction. Formal consultation outcome report. Regular engagement with staff and partners is taking place via a range of channels including weekly newsletter and face to face roadshows. Executive Committee approval (minutes) and continued oversight	Assurance exercise undertaken by NHS England at the end of August 2023.	None	4	3	12	(4). 2 Monthly 24/01/2024 Daniel Webber Updated controls and assurances.	3	3	9

Strategic aim	Risk ref	Date identified	Directorate Level of control Committee	Description	Initial			Controls	Gaps in control	Internal assurances	External assurances	Gaps in assurance	Residual			Reviews	Target		
					C	L	Score						C	L	Score		C	L	Score
Goal 4 Best Start In Life For Children+YoungPeople																			
2. Tackle Inequalities In Outcomes, Experience And Access	NENC/0066	13/10/2023	NENC Strategy And System Oversight	Autism Approach Pathways Inconsistent approach to Autism Care Pathways resulting in poor post diagnosis support and care	4	5	20	ICS Autism Statement.	ICS Autism Statement not yet in place.	None	None	None	4	4	16	(5). Quarterly 24/01/2024 Daniel Webber Updated controls and assurances.	4	3	12
			Jacqueline Myers					Place based Autism Strategies	Data analysis in relation to outcomes identified in different strategies	ICB review of all place based autism strategies.	Working with Brain in Hand in relation to strategy evaluation tools and evaluations of 'what is good practice'.	None							
			Kate O'Brien					Regional Network to evaluate areas of good practice - from health and social care services.	Network not yet established.	None	None								
			NENC ICB Partial Control					Autism Statement Development Group.	None	Group notes and actions. Current gaps in support being identified that could potentially be addressed at an ICS level.	Working with Brain in Hand in relation to strategy evaluation tools and evaluations of 'what is good practice'.	None							
1. NENC Executive Committee																			
2. Tackle Inequalities In Outcomes, Experience And Access	NENC/0027	21/10/2022	NENC Chief Nurse Directorate	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	None	Performance updates to ICB	None	None	4	3	12	(5). Quarterly 24/01/2024 Daniel Webber Updated controls and assurances	3	3	9
			David Purdue					Contract review meetings with main foundation trusts	None	Performance reports; quality review group	None								
			Kate O'Brien					Joint commissioning with local authorities	Processes to be agreed	None	None								
			NENC ICB Partial Control					Quality and Safety and Executive Committees.	None	Minutes and reports from Quality and Safety and Executive Committees.	None								
3. NENC Quality And Safety Committee																			
								Children and Young People (CYP) mental health access trajectory in NHS Long Term Plan North East and North Cumbria CYP Summit	None	Integrated delivery reports. Executive Committee and Board oversight of performance. Outputs report from CYP mental health summit published with live recovery plan in place to this area. System specialist engagement around neurodevelopmental assessments considering the ICBs short-, medium- and longer-term plans to meet growing demands in this area.	NHS England monitoring	None							