Board Assurance Framework

Risk Ref	Risk Title	Current Risk Rating	Trend
BAF0001	Recovery of Elective Services	20	→
BAF0002	Developing suitable workforce	12	↓
BAF0003	Pressure on Urgent and Emergency Care (UEC) in the BLMK System	12	↓
BAF0004	Widening Inequalities	16	→
BAF0005	System Transformation	20	→
BAF0006	Financial Sustainability & Underlying Financial Health	20	→
BAF0007	Climate Change: Health, inequality and healthcare service impacts from Climate Change and environmental degradation	16	→
BAF0008	Impact of Population Growth on Health and Care Services Infrastructure	20	→
BAF0009	Impact of Rising Cost of Living on Residents and Staff Wellbeing	16	→
BAF0010	Partnership Working	9	→
BAF0011	Health literacy - Denny Review	16	→
BAF0012	System Collaboration	9	→
BAF0013	VCSE sustainability	16	→
BAF0014	Maternity Services at BHFT	16	→
BAF0015	Failure to Deliver the Operational and Financial Plan	16	→
BAF0016	ICB Reconfiguration and potential destabilisation of BLMKs ICB's delivery and impact on statutory function delivery	20	→
BAF0017	Data Security Breach within or impacting BLMK	20	→
BAF0021	Estates & Infrastructure	9	★
BAF0022	Achieving Net Zero	12	→

Status Key

→	No change
↑	Escalated
↓	De-escalated
●	Closed
★	New Risk

BAF Heat Map

Impact					
5				1	
4			2	7	5
3			3	1	
2					
1					
	1	2	3	4	5
			Likelihood		

Accurate as of: 30/01/2026 10:10

Risk Movement Over Time – Rolling 12 Months											
	Feb - 25	Mar – 25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-26	Oct - 25	Nov-25	Dec-25	Jan-26
BAF0001	20	20	20	20	20	20	20	20	20	20	20	20
BAF0002	20	16	16	16	16	16	16	16	16	16	16	12
BAF0003	20	20	20	20	20	20	20	20	12			
BAF0004	16	16	16	16	16	16	16	16	16			
BAF0005	20	20	20	20	20	20	20	20	20			
BAF0006	20	20	20	20	20	20	20	20	20			
BAF0007	16	16	16	16	16	16	16	16	16			
BAF0008	20	20	20	20	20	20	20	20	20			
BAF0009	16	16	16	16	16	16	16	16	16			
BAF0010	9	9	9	9	9	9	9	9	9			
BAF0011	16	16	16	16	16	16	16	16	16			
BAF0012	9	9	9	9	9	9	9	9	9			
BAF0013	16	16	16	16	16	16	16	16	16			
BAF0014	16	16	16	16	16	16	16	16	16			
BAF0015				16	16	16	16	16	16			
BAF0016				20	20	20	20	20	20			
BAF0017				20	20	20	20	20	20			
BAF0021					20	20	20	9	9			
BAF0022					12	12	12	12	12			

Accurate as of: 30/01/2026 10:10

BAF0001 – Recovery of Elective Services

Risk Owner	Risk Description
Georgie Brown	There is a risk that the NHS is unable to recover elective services and waiting times to pre-pandemic levels due to increased Urgent and Emergency Care pathway related pressures, workforce and financial constraints, or demand led pressures. This may lead to poorer patient outcomes, reputation damage and an inability to meet constitutional targets.

Risk Lead
Michael Ramsden

Governance Board(s)
Elective Collaboration Board / Utilisation Management and Quality Improvement Committee

Date of Last Review
17/12/2025

Risk Movement
→ **No change**

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	5	20

Current Risk Rating

Impact	Likelihood	Risk Rating
4	5	20

Target Risk Rating

Impact	Likelihood	Risk Rating
4	3	12

Risk Updates

Date	Update
05/10/2023	Elective continues to be challenging due to Industrial action and non-elective pressures. System activity is close to plan and the ICB is experiencing significant growth in the Independent Sector which will support recovery. A national choice campaign will allow patients more flexibility on where they receive treatment meaning all available capacity is maximised.
23/02/2024	Risk reviewed, no changes since last review
21/05/2024	New control (choice) and action (demand management) added
16/07/2024	Risk reviewed and actions updated. Elective recovery continues to be a challenge and therefore risk score remains high.
22/11/2024	Risk reviewed. 2 new actions added: Diagnostics and Surgical hubs. Action progress updated
20/01/2025	Review complete - no changes apart from reassigning controls to Georgie Brown
17/03/2025	No change - remains a challenge to recover elective services
23/05/2025	Tiering process moved to controls and some actions updated (i.e. surgical hub and diagnostic D+C). Risk score remains and risk remains as the operational plan has set new recovery targets
10/07/2025	Risk reviewed. New actions added.
23/10/2025	Action complete - IAP agreed with Independent Sector Providers to deliver the Operational Plan targets. Oversight will be through the contract meetings. Action closed - Elective Collaboration Board and weekly leadership group provides oversight of progress against operational planning. Action closed - Trust transformation plans to increase productivity using GIRFT data. New IAP contracts awarded for ENT and Dermatology awarded in August. Action complete - Self-assessment against the Operational delivery framework - Q1 and Q2 complete. Now ongoing.

Accurate as of: 30/01/2026 10:10

BAF0001 - Recovery of Elective Services

System Controls

System Controls
The controls to support the UEC Pressures will support Elective performance. Strong demand management and flow, will reduce the likelihood of emergency medical patients outlying on surgical wards and concomitant elective cancellation will be mitigated.
Processes in place to ensure those with most urgent clinical needs are treated first.
Quality - Supporting review of performance across service provision in particular Cancer services and associated Pathways & diagnostics. Triangulating information and soft intelligence such as serious incidents, complaints, HW engagement, Safeguarding partnership information.
Elective Collaboration Board and weekly leadership group provides system governance.
RTT reporting enabling Wait list size trends
Optimising use of available resources including independent sector and clinical prioritisation
Independent Sector and community services used to support Trusts in their wait reduction
Monitoring of Trusts Elective recovery plans
Promotion of Patient Choice
Regional Tearing Meeting
Oversight of IAP with providers will be through the contract meetings
ICB assurance process in place to monitor Trust transformation plans to increase productivity using GIRFT data

System Actions

Action	Lead Org.	Lead	Due Date	Update
Review of Diagnostic Capacity	ICB	Michael Ramsden		The ICB is using this data to reconcile CDC payments to the Trusts. Dashboard complete and signed off by the ICB – action closed.
Surgical Hubs Development	ICB	Michael Ramsden	31/03/2026	No update
Development of a demand management program which covers unwarranted variation of referrals, triage and Advice and Guidance.	ICB	Michael Ramsden	31/03/2026	Action plan in place aligned to the A&G operational delivery framework to ensure maximising pre-referral A&G in BLMK

Milton Keynes Actions

Action	Lead Org.	Lead	Due Date	Update
NHSE led Tier 1 Process in MKUH.	ICB	Michael Ramsden	31/03/2025	Ongoing action and unlikely to cease until MKH eliminate all waits beyond 65w and improve their RTT performance

Accurate as of: 30/01/2026 10:10

BAF0002 - Developing suitable workforce

Risk Owner
Tania Marcus

Risk Lead
Bethan Billington

Governance Board(s)
Remuneration and Workforce Committee

Date of Last Review
08/12/25

Risk Movement
↓   **Descalated**

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	**5**	**20**

Current Risk Rating

Impact	Likelihood	Risk Rating
4	**3**	**12**

Target Risk Rating

Impact	Likelihood	Risk Rating
4	**3**	**12**

Risk Description

If system organisations within BLMK ICS are unable to recruit, retain, train and develop a suitable workforce then staff experience, resident outcomes and the delivery of services within the ICS, ICB People Responsibilities and the System People Plan are threatened.

Risk Updates

Date	Update
07/10/2024	Continue to see reduced turnover, vacancies and sickness. Planned growth above workforce plan
16/01/2025	We have invested in workforce modelling as part of the clinical services strategy and are starting to roll this out with mental health and diagnostic workforce.
01/04/2025	Vacancy rates have reduced, noted as the top performing ICS for the region in retention. Zero growth for operational plans for 25/26. Clinical expansion and placement quality plan in place and being delivered. - re-scored with 3 additional controls and 3 new actions.
27/05/2025	Restrictions on growth in system partners and reductions in bank and agency. Specific areas that are difficult to recruit being supported through system working. Clarity needed on where this work transfer to in the new ICB.
20/08/2025	BLMK was successful in bidding for WAD funding to continue the supported employment pathways.
08/12/2025	BLMK ICS has a stable turnover and headcount rate. Month 6 performance shows both Acute Trusts being slightly above plan for recruitment to their substantive workforce. Likelihood of risk reduced from 4 to 3.

BAF0002 - Developing suitable workforce

System Controls

System Controls
EDI & Wellbeing: People Board Subgroup focusing on supporting the wellbeing of staff across the ICS. Also responsible for improving workforce inequalities relating to protected characteristics and development and implementation of initiatives e.g. 'no more tick boxes' to address recruitment inequalities.
Leadership & OD: People Board Subgroup focussing on building the OD capacity and skills within the system to support workforce transformation across health and care. Development of leadership and development programmes for the ICB and system partner organisations in conjunction with regional and national bodies
Primary Care: People Board Subgroup focussing on workforce programmes as they relate to Primary Care Workforce. Wellbeing, career development, new roles (e.g. ARRS), international recruitment and workforce planning and OD
Workforce Modelling & Supply: People Board Subgroup focussing on the development of workforce strategy, recruitment, retention programmes and innovative role pilots
Primary Care Training Hub supporting in recruitment, retention and training of primary care workforce
People Board: ICS Executive Group with responsibility for People Plan delivery to meet ICS workforce priorities linked to BAF and People Board workforce risks. This enables delivery of ICS Strategic Objectives, ICB People Responsibilities and development of Workforce strategy
Education Partnership: People Board Subgroup responsible for development and co-ordination of CPD fund use & demand scoping for system as well as use of apprenticeship levy, school and university engagement and development of innovate courses and training courses across health and care workforce
Anchor Employment Workstreams - supporting those further from employment into careers in health and social care.
Long Term Workforce Plan - clinical expansion to meet demand and improvements in quality of education. Monitored by NHSE.
'No more tick boxes' recruitment approach has been embedded into ICB and Trusts ensuring diversity and fairness in recruitment practices (Inclusive Recruitment)

System Actions

Action	Lead Org.	Lead	Due Date	Update
Delivery and evaluation of Rotational Apprenticeship Pilot - level 3 Senior Healthcare Support Worker rotational apprenticeship between health and care providers in Bedfordshire as proof of concept	ICB	Catherine Jackson	31/12/2025	First phase evaluation report now produced, working through evaluation, impact on apprentices won't be available until they complete in 2026.
Long Term Workforce Plan - trajectory for meeting long term requirements in conjunction with education providers and employers	ICB	Bethan Billington	31/03/2026	The Long Term workforce plan is currently being reviewed.
Passport to NHS Careers - Supporting those furthest from employment/experiencing barriers to employment within our local population in to supported employment opportunities within our system Identified Cohorts for BLMK: Young people 18-30 NEET, Care experienced, economically inactive, long-term unemployed. Young unpaid Carers.	ICB	Bethan Billington	31/03/2027	158 attendees to date undertaking 2 week programme. 44 economically inactive for over 3 years, 16 gaining employment, 19 undertaking work experience, 20 moving into volunteering and 43 into further training Programme has transformed into the Widening Access Demonstrator Pilot . Presented on 3/12 to the Ministerial Community of Practice as an example of excellence. The Department of Health and Social Care also visited the Luton delivery site, recognising it as an exemplar in the field. Action closed
Expansion of Health and Care Academy over coming year - Was just Bedfordshire, to now include Luton, MK and Social Care. Plus expansion from 14-18 to then include 18-30	ICB	Bethan Billington	30/04/2026	Recruited practice development nurses and made contact with 100% of secondary schools. First cohort of 18-30 starting in April. Expansion ongoing.

Accurate as of: 30/01/2026 10:10

BAF0003 - Pressure on Urgent and Emergency Care (UEC) in the BLMK System

Risk Owner	Risk Description
Georgie Brown	As a result of multiple and interconnected factors across the BLMK system, including:

Risk Lead
Michael Ramsden

Governance Board(s)
Utilisation Management & Quality Improvement Committee

Date of Last Review
17/12/2025

Risk Movement
→ **No change**

Risk Description (continued):

- Population growth in BLMK (2.5 times faster than national average)
- Demand exceeding capacity across all Health and Care Services leading to people's inability to access services in a timely manner.
- Lack of effective and coordinated response to prevent use of emergency health and social care services (admission avoidance)
- Poor flow and discharge from acute hospitals, leading to overcrowding and delayed ambulance offloading,
- Increased complexity and the changing nature of patient needs, coupled with fragile capacity in community services and social care
- Challenged financial environment and pressures across the system, limiting resources and capacity for improvement
- Workforce limitations impacting staffing levels across all areas of the UEC pathway
- Lack of a unified and consistent approach to risk appetite and responding to system pressures, hindering flexibility in criteria to meet complex health needs and manage demand and capacity

There is a risk of:

- Services being overwhelmed with system-wide bottlenecks and delays in accessing appropriate UEC services, particularly for patients with complex needs
- Unsafe waits for assessment in 111 services and/or ambulance services.
- Unsafe overcrowding in Emergency Departments (EDs) and acute hospitals
- Increased risk of harm to patients due to delayed or missed clinical assessment / intervention / avoidable admissions.
- Increased delays and waiting times and reduced choice in the community, in ED and in discharge from hospital
- Higher health and social care costs due to out-of-area placements, reliance on expensive temporary accommodation, increased rehabilitation, over prescribing care, potential financial performance related penalties / loss of income opportunities.

Resulting in:

- Negative patient outcomes and harm including longer wait times, poorer quality care, avoidable complications, deconditioning and increased dependence on statutory services.
- Increased strain on resources and staff well-being and morale, recruitment and retention potentially leading to further workforce challenges
- Reduced system efficiency and effectiveness in managing patient flow across UEC pathways
- Impaired ability to respond to surge in patients
- Longer ambulance response times and further system strain
- Lack of public confidence in the NHS and social care
- Cancellations and delays in elective care
- Reduced capacity and ability to respond in the case of a Major Incident impacting Health Services.
- Critical System Safety thresholds occur: ie 8hr + ambulance offloads
- Unplanned expenditure and unsustainable costs across health and social care services.

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	5	20

Current Risk Rating

Impact	Likelihood	Risk Rating
4	4	12

Target Risk Rating

Impact	Likelihood	Risk Rating
3	4	12

Risk Updates

Date	Update
04/09/2024	Risk Reviewed. New controls added on Winter Planning and review of D2A beds
23/10/2024	Risk reviewed - new actions added: escalation and SDEC
22/11/2024	Risk reviewed and continues. Action progress updates applied in a number of areas
20/01/2025	Risk reviewed. No changes other than amended action to the correct assigned person
04/04/2025	Risk reviewed. Controls and actions updated where necessary. Recommend current risk score reduced to 16 to reflect the improved control of UEC pressure and maturity of some UEC transformation. The impact remains.
29/05/2025	Risk reviewed. Remains current and no score changes made. Some alterations made to action owners to reflect the changing responsibility in the ICB/Place team
10/07/2025	Risk reviewed. Minor changes to control leads. Winter planning exercise added to actions
20/08/2025	The KRIs are within the UEC Board Scorecard, the SCC also track the KRIs in their daily monitoring of operational delivery and management of escalation. New action added as BHT are now part of the GIRFT UEC Further Faster programme. A number of controls are listed which would be the responsibility of partners rather than the ICB - to discuss approach and assignment with EPRR
29/09/2025	The KRIs are within the UEC Board Scorecard, the SCC also track the KRIs in their daily monitoring of operational delivery and management of escalation. Entering winter months risk is likely to rise so risk remains likely during this period. Risk rating reduced to reflect consistency within expectant parameters.

Key Risk Indicators

Community Referrals
Reduced capacity in the community leads to a falling rate of accepted referrals into the 2 hour pathway AND a reduced % of 2 hour urgent referrals accepted seen within the 2 hour timeframe

Non-Inpatient Ward Accommodation Usage
Increased number of consecutive days exceeding a pre-defined threshold of patients bedded overnight in non-inpatient ward accommodation

Ambulance Cat 1 / Cat 2 Response
Increase % in the length of response times for cat 1 and 2, resulting in delays in accessing appropriate pathways, over a given period

Rolling Discharge Deficit
Increased backlog of patients waiting for discharge, indicating inefficiencies in patient flow and hospital bed utilisation.
(i.e. if BHFT need 215 P1-P3 discharges a week, and in week one deliver 210, week 2 deliver 200 and week 3 deliver 220, the rolling discharge deficit is 15.)

Ambulance Handover Time over 15 Minutes
Increased % of ambulance handovers exceeding 15 minutes at Emergency Departments (EDs) over a 7-day rolling average.

Call Abandonment Rate
Increased % of calls to the NHS 111 service and primary care that are abandoned.

MH Discharge Delays
Increased number of CYP and adults requiring a MH discharge in Acute Trust or a discharge from inpatient MH Ward.

Critical System Safety thresholds occur: i.e. 8hr + ambulance offloads

Accurate as of: 30/01/2026 10:10

BAF0003 - Pressure on Urgent and Emergency Care (UEC) in the BLMK System

System Controls
BLMK Primary Care access programme
Use of SHREWD / OPEL framework actions and system wide escalation with predetermined actions and response to pressures across the system.
Specific ICB focus on community bed management across BLMK
Optimised Patient Transport Services to facilitate swifter discharge
Exec Team Performance Meeting on a monthly basis
System Control Centre (SCC) 7 day capability to monitor, oversee, respond and coordinate increasing system pressure across BLMK
Cancellations of routine / planned care activities to enable diversion of resources to UEC pathways.
Maximising out of hospital pathways to avoid ED attendance e.g. UTC / Community Services / Silver Line.
Support from VCSE, mutual aid and cross cover across sites and organisations
Dynamic staffing arrangements to flex to the demand needed.
SOPs such as 999 validations, 24 hour dispositions etc to help manage demand and flow.
SDEC Improvement embedded into UEC programme plan across BLMK which identifies performance and metrics to achieve, KPIs, improvements and outcomes which are monitored by the STT programme. National focus on bedding of SDEC which SCC report on daily to NHSE.
UEC Assurance Programme plan lists admission avoidance and discharge and flow system priorities
Alternatives to ED reducing pressures at peak times
Operational delivery governance, including UEC and development of ICB operating framework, supporting the identification of and resolution of pressures reviewed for assurance.
Winter Planning and Delivery
Enhanced KRI monitoring
UCCH steering group with ICB, UCR teams and EEAST continues development of unscheduled care hub and associated admission avoidance pathways.
Multiple channels (newsletter, whatsapp, email, contractual levers via HWE ICB) for quick communication alert to Community Pharmacies of the system pressures thereby helping to manage patient expectations of managing non urgent issues (ICB Primary Care)
Forecasting Tool provides early warning signal of any surge in demand
Winter Planning Exercise /Scenario Testing and revision of OPEL and escalation framework

System Actions

Action	Lead Org.	Lead	Due Date	Update
Decompressions exercise in Bedfordshire and MADE events in Milton Keynes	ICB	Chess Cummings	31/03/2026	MADE events will continue throughout the year and be strategically timed to support periods where pressures have historically been evident. The target date now reflects the end of the financial year
System UEC transformational planning	ICB	Georgie Brown	31/03/2025	Priority plan complete and work in progress.
Review of Discharge to Assess Beds	ICB	Kaysie Conroy		Closed: The dementia beds went live on 03/11/25 and will continue to be reviewed until the end of the financial year Mar-26.
Further Faster GIRFT UEC	ICB/BHFT	Chess Cummings	31/03/2026	BHFT are in Cohort 2 of GIRFT UEC Further Faster Programme. New Bedfordshire and Luton discharge transformation action added.
Mental Health OPEL action cards	ICB/BHFT	Nadia Barakat	30/11/2025	Development of action cards to support the flow of mental health patients in acute or in-patient facilities. The actions cards will describe the actions taken by partners to only those that need in-patient care remain admitted with the other patients safely supported at home/alternative environment
Delirium pathway review	ICB	Michael Ramsden	31/03/2026	Review pathway and funding model for the remainder of 25/26 and 26/27. This will enable residents to be discharged from secondary care to their normal place of residence with support, improving their outcomes and potential to remain at home rather than long term care. 05/01/2026 – Options paper to UEC Board in February and then Local Authority committees to decide on long term model and funding implications.

Accurate as of: 30/01/2026 10:10

Bedfordshire Controls

Bedfordshire Controls
Bedfordshire Care Alliance UEC Transformation
Daily staffing sit rep informed by demand and capacity tool to inform any staffing flex arrangements required (CCS)
Pan HUC delivery model for NHS 111, CAS and OOHs service, increasing resilience through wider network for resources and infrastructure. Sophisticated forecasting tools in place to ensure that demand and capacity are aligned as closely as possible (HUC).
Mutual assurance scheme across care providers including in-house teams (BBC).
Handover45 implemented – Ambulances will leave patients at hospitals (safely) after 45 mins. (EEAST)
Unscheduled Care Hub (UCCH) in Bedfordshire
Senior leadership Group stood up for weekly/daily briefing and action (BBC)
UCCH steering group with ICB, UCR teams and EEAST
Implementation of the ITK link (999 back to 111) regional led operation with EEAST and HUC
Completing regular deep dives looking at rejected calls from the 999 stack and reviewing rejections

Milton Keynes Controls

Milton Keynes Controls
Milton Keynes improving system flow programme
Joint approach across MKCC, MKUH and CNWL working together in the Integrated Discharge Hub
Robust staffing management to ensure we optimise resources against short term forecast. (SCAS)
Utilising and where possible increasing clinical pathways to avoid transportation to the ED for patients who can be managed away from the ED (SCAS)
Making full use of Consultant Connect and clinical validation lines (SCAS)
When under demand pressure, will pull resources outside of the area to support or implement intelligent conveyancing until demand reaches a manageable state (SCAS).
Making full use of intelligent conveying when appropriate but remaining within the SCAS footprint (SCAS)

Bedfordshire Actions

Action	Lead Org.	Lead	Due Date	Update
New contract for Patient Transport Services between and ICB and EEAST to include modelling patient numbers for to match increased demand of same day PTS requirements	ICB	Michael Ramsden	Action complete	EEAST and ICB modelling complete. Reviewed option to transfer discharge PTS responsibility but not financially viable and creates a procurement risk. New activity plan to be implemented from September. Strategic options being explored. 05/01/2026 PTS contract award agreed in IVOG to align with Central East PTS contract end dates. Direct award notification underway. Central East PTS procurement to be planned in 26/27
UCCH and Community resilience - Bedfordshire	ICB/BHFT	Georgie Brown	31/03/2026	Business case to seek additional funding to increase community capacity. This will enable more care to be transferred directly from the ambulance stack or through call before convey. The decrease in ambulance conveyances will support ambulance and Acute pressures. 05/01/2026 Business case approved and additional funding secured until 31st March. Initial data suggests additional conveyances avoided. Evaluation to commence in January and explore recurrent funding opportunities before funding expires.

Milton Keynes Actions

Action	Lead Org.	Lead	Due Date	Update
Milton Keynes improving system flow programme - Development of enhanced admission avoidance schemes such as virtual wards and call before you convey	ICB	Rebecca Green	31/03/2026	Ongoing action
Unscheduled Care Hub Improvement - MK	ICB	Michael Ramsden	Action Closed	SCAS and MK Place lead on the project to support greater flow from the ambulance stack. Some improvements noted in July and August with 10-15 patients transferred and avoiding A+E per week. Project meetings continue between SCAS and CNWL to support improvement. 05/01/2026 – transfers from SCAS to CNWL continue to be monitored and are sustained. MK place leads continue to explore opportunities to improve flow from the ambulance stack. There is no additional funding for the UCCH in MK as the Southeast region decided to use ambulance improvement funds different to EoE. I don't expect further progress until SCAS install a new digital platform that gives community providers access. This will take > 2 years.

Accurate as of: 30/01/2026 10:10

BAF0004 – Widening Inequalities

Risk Owner	Risk Description
Sarah Stanley	There is a risk that inequalities and outcomes for specific demographic groups within BLMK population will widen (e.g. cost of living, health and care demand pressures) compromising our ICS purpose to improve outcomes and tackle inequalities.

Risk Lead
Sarah Watts

Governance Board(s)
Utilisation Management & Quality Improvement

Date of Last Review
08/01/2026

Risk Movement
→ No change

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	5	20

Current Risk Rating

Impact	Likelihood	Risk Rating
4	4	16

Target Risk Rating

Impact	Likelihood	Risk Rating
4	3	12

Risk Updates

Date	Update
30/10/2023	Inequalities Improvement team due to be in place by December/January. Inequalities funding at place. £2m has gone to place boards. EDI plans have been completed for both staff and services and denny review recommendations are coming to the ICB Board in December
25/07/2024	A weekly inequalities delivery group is in place, there is also a monthly inequalities system meeting. The 11 transformation priorities of work is underway to improve health equities and a whole programme focusing on health equity with a team SRO will be worked through over the next three years.
16/09/2024	Meeting to take place with Chief of Staff and Chief Nurse to review risk.
03/12/2024	Monthly Inequalities system delivery meeting in place. System transformation priorities launched with place focus and with resident engagement to support work. Cohort populations have been identified.
03/03/2025	Health Equity planning meeting took place on 12/3/2025 to align plan to three strategic priorities a
27/05/2025	Weekly Health Equity Programme meet in place to review system priorities and on-going work in relation to reducing health inequalities across BLMK. Health Equity Programme Board being developed (with Terms of Reference now agreed) with first board meeting planned for 11th August 2025.
11/07/2025	Weekly Health Equity Program team currently reviewing risk objectives to link to current work streams and drivers
09/10/2025	Revised risk description agreed at programme board. Potentially suitable KRI's identified. However due to organisational transformation, decision taken to pause progressing this for programme board approval. Work will be reconsidered once new priorities identified.
04/11/2025	Health equity meeting moved to fortnightly to review on going workstreams.
08/01/2026	There is an audit ongoing with the external auditors around inequalities. The outcomes should give some direction going into the new ICB organisation. The health equity meeting moved to fortnightly to review on going workstreams.

Accurate as of: 30/01/2026 10:10

System Controls
Annual resource allocation to help to reduce inequalities and draw out learning for future investment
Cross-ICS inequalities steering group and working group to coordinate inequalities activity across the ICS framed around the core20plus5 approach
Health inequalities defined at place and PCN level
Work with resident voice groups e.g maternity Voices, parent carer forums, SEND in coproduction of outcomes
Business Intelligence reports for key health outcomes/NHS constitutional standards by place
Monthly System Health Equity meetings in place to ensure momentum and action takes place within the Health Equity Programme
Equity Improvement Team in place which will support how we are making improvements through the system through an equity lens and ensuring balancing measure are in place to ensure we are not widening inequalities and how that is affecting the rest of the system.
System high-level equality metrics agreed and monitored over the short and long term. These will demonstrate changes and improvements or worsening in health inequalities to provide priority focus for system transformation.
Public Health Intelligence Unit and ICB Performance Team have an agreed data pyramid (set of measures) of population health outcomes (children, young people and adults) showing progress against widening health inequalities
Weekly Health Equity Program Board meetings in place with quartile Board Meetings due to commence in August 2025

System Actions				
Action	Lead Org.	Lead	Due Date	Update

Accurate as of: 30/01/2026 10:10

BAF0005 – System Transformation

Risk Owner	Risk Description
Maria Wogan (BLMK)	There is a risk that due to sustained operational pressures and complexity of change, there will be reduced delivery and benefit from strategic transformational change to deliver improved outcomes for our population.

Risk Lead
Tara Dear

Governance Board(s)
Finance, Planning & Payer Function, Utilisation Management & Quality Improvement and BLMK Neighbourhood Health Delivery Committees

Date of Last Review
09/11/2025

Risk Movement
→ **No change**

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	5	20

Current Risk Rating

Impact	Likelihood	Risk Rating
4	5	20

Target Risk Rating

Impact	Likelihood	Risk Rating
3	2	6

Risk Updates	
Date	**Update**
20/07/2023	Operational planning and transition plans to the new target operating model have commenced.
12/04/2024	Risk remains as we develop our transformation programmes as a system and ongoing performance management and reporting is in place to seek to mitigate
25/09/2024	Risk reviewed; refresh required with exec involvement.
03/12/2024	No change
03/03/2025	Risk reviewed - further action added regarding Board Champions which is in progress.
08/04/2025	System Charters have been completed for Complex Care CYP and End of Life, subject to approval by System Champions and leads. Complex Care Adults and Admission/Discharge Pathways to follow. System Champions now identified for the three priorities and four enablers and initial discussions taken place or planned. Additional resource requirements identified and being reviewed by ICB Execs on 09/04/25.
28/05/2025	Transformation progressing with agreed leadership. Progress reported in the May 25 Portfolio Report. Resource needs identified and being progressed. Update to be provided by System Champions at ICB Board on 27/06/25 along with proposed updates to the risk description in needed. Action complete, new control added.
06/06/2025	Transformation progressing with agreed leadership. Progress reported in the May 25 Portfolio Report. Resource needs identified and being progressed. Update to be provided by System Champions at ICB Board on 27/06/25.
29/08/2025	Two actions completed and controls added. Work continues to be reported in the System Portfolio Report, ICB Board expecting a progress update by System Champions at the end of September.
03/10/2025	Work continues to be reported in the System Portfolio Report, ICB Board expecting a progress update by System Champions. Further prioritisation and rationalisation work has been completed and the action closed.

Accurate as of: 30/01/2026 10:10

System Controls
Operational performance management process in place taking account of responses to operational pressures
Chief Execs Group - regular reviews of operational performance issues to agree mitigations
Agreed strategic priorities and BLMK Joint Forward Plan across the system in place
EPRR - monitor, plan for and respond to incidents within BLMK
System and Place Transformation Teams established to provide dedicated capacity for transformation
SCC monitor and support system pressures and coordination, 7 days a week
ICB Transformation Priorities agreed and monitored through portfolio report
System champions confirmed for each priority area
Charters for the three system transformation priorities agreed
Project resource for three system transformation priorities and four enablers agreed

System Actions				
Action	Lead Org.	Lead	Due Date	Update
No actions				

Accurate as of: 30/01/2026 10:10

BAF0006 - Financial Sustainability & Underlying Financial Health

Risk Owner
Sarah Griffiths

Risk Lead
Stephen Makin

Governance Board(s)
Finance, Planning and Payer Function Committee

Date of Last Review
30/07/2025

Risk Movement
→ **No change**

Inherent Risk Rating

Impact	Likelihood	Risk Rating
5	4	20

Current Risk Rating

Impact	Likelihood	Risk Rating
5	4	20

Target Risk Rating

Impact	Likelihood	Risk Rating
4	3	12

Risk Description

As a result of increased inflation, significant operational pressures and patient backlogs, there is a risk to the underlying financial sustainability of BLMK that could result in failure to deliver statutory financial duties.

Risk Updates

Date	Update
11/12/2023	The underlying financial challenge in the ICB remains and is exacerbated by a deterioration in the costs of prescribed medicines and continuing healthcare packages.
11/04/2024	The financial position of the ICB and the system is significantly challenged, the risk remains live and is a significant focus of the ICB as part of the 24/25 financial operational planning
04/12/2024	one action closed, now control. No further changes. Scoring remains appropriate.
16/01/2025	The ICS remains on track to deliver it's financial plan for 24/25, all actions are being progressed by action owners
28/03/2025	Reviewed with Stephen Makin. No change to risk. One action completed
03/06/2025	Actions all complete and closed. Controls updated. Risk score remains the same.
30/07/2025	Risk reviewed, no changes since last update

System Controls

Monthly financial reporting to Finance & Investment Committee and Integrated Care Board - includes analysis of financial performance: revenue, capital, underlying financial performance plus risks & mitigations.

System led financial oversight through System Chief Execs Group; Acute, Mental Health and Community services Sector Finance and Operational Delivery Executive Meetings and System DoFs Group.

Updated system Medium Term Financial Plan for 2023/24 to 26/27. Includes scenario modelling of key variables and downsides.

ICB Financial Improvement Group - responsible for developing and delivering additional efficiency schemes to achieve break even position.

ICB and Acute Trusts have established additional executive governance - responsible for controls on discretionary spend including staffing.

System PMO established to track progress of financial plan delivery

Financial Recovery Plans implemented by ICB and all Trusts - BHFT have developed a FRP. MKUH have recovery action plan and enhanced PMO supported by external resource. ICB has implemented Financial Improvement Group (FIG) and Investment Oversight Group (IVOG). These will introduce additional controls around new investment and strengthen the delivery of existing efficient plans plus support identification implementation and delivery of new savings and mitigations.

System efficiency and transformation programmes are reported to Board and quality and performance Finance and investment committee for assurance withing the governance cycle (bi-monthly).

Productivity dashboard will be published in June 2025 and will provide oversight of key indicators for assurance and monitoring.
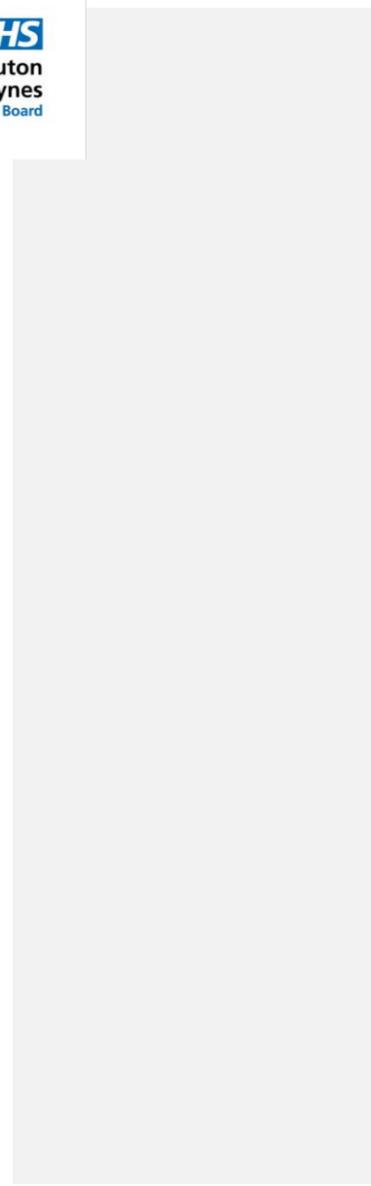
System Actions

Action	Lead Org.	Lead	Due Date	Update
No actions				

BAF0007 - Climate Change: Health Inequality and Healthcare Service Impacts from Climate Change and Environmental Degradation and risk of not achieving net zero

Risk Owner	Risk Description
Dean Westcott	As a result of climate change and wider impacts on the environment and biodiversity, there is a risk that the health of the population, health inequity, and the ability to deliver services will be negatively affected due to:

Risk Lead
Tim Simmance

i) exacerbation of existing health conditions (e.g. CVD, COPD, Asthma, mental health);
ii) new health challenges (e.g. tropical disease prevalence, population migrations);
iii) extreme weather events resulting in harm (e.g. storms, floods, wildfires);
iv) disruption to day-to-day healthcare provision (e.g. supply chain, workforce availability, power outages, infrastructure damage); and
v) a deterioration in population health outcomes.

This is resulting in worsening health, inequalities, access to healthcare, and additional pressures on health services. This risk is materialising now, in some contexts, and will increase in both likelihood and severity as climate change progresses.

Governance Board(s)
Utilisation Management and Quality Improvement Committee

Date of Last Review
21/10/2025

Risk Movement
→ **No change**

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	4	16

Current Risk Rating

Impact	Likelihood	Risk Rating
4	4	16

Target Risk Rating

Impact	Likelihood	Risk Rating
2	4	8

Risk Updates

Date	Update
08/06/2023	Risk rating remains unchanged. Work has begun on actions identified to work towards reducing risk impact.
11/07/2023	Risk rating remains unchanged. Some progress on actions.
31/08/2023	Risk reviewed - no change
01/12/2023	Actions are progressing
14/03/2024	Risk reviews - no change
24/05/2024	No significant change to overall risk.
19/07/2024	Risk reviewed. No change.
16/10/2024	Risk Reviewed. risk description updated to reflect more explicit link to population health and health inequalities. Likelihood of >2degree heating internationally considered more likely, thus despite progress the risk rating is considered to remain the same.
13/12/2024	Reviewed - no adjustments.
10/03/2025	Risks briefly reviewed at Environmental Sustainability Leadership Group meeting January 2025. No change to risk rating. Work in progress on Green Plan refresh and other underpinning actions.
05/06/2025	Achieving Net Zero element removed (separate risk created for this element - BAF0022). No change to risk rating.
18/08/2025	No change to current risk rating. BLMK Green Plan 2025-2032 approved at BLMK ICB Board 27 June 2025. Delivery of the Green Plan activities required to mitigate current risk.
22/10/2025	Indicators suggest that likelihood of achieving net zero remains at similar level of risk, despite local progress. Green plan delivery progressing but at risk due to NHS structural changes.
08/12/2025	Global and local indicators suggest that likelihood and impact remain the same as previous review. Trust adaptation plans in progress.

System Controls

System Controls
Partner Green Plans and Sustainability Plans.
Local Resilience Forum Adverse Weather Plans
BLMK ICS Green Plan 2022-25
ICB Adverse Weather Plan
Green Plan Operational Working Group
Climate Adaptation Task & Finish Group
Green Plan System Leadership Group

System Actions

Action	Lead Org.	Lead	Due Date	Update
Deliver ICS Green Plan 2025-2032	ICB	Tim Simmance	02/04/2026	Delivery of Y1 of BLMK Green Plan commenced. Progress monitored through Green Plan Leadership Group quarterly.

Accurate as of: 30/01/2026 10:10

BAF0008 – Impact of Population Growth on Health and Care Services Infrastructure

Risk Owner	Risk Description
Louis Kamfer	As a result of fast rate of population growth in BLMK, there is a risk that our infrastructure will not keep pace with the needs of our population, which will exacerbate widening inequalities and outcomes.

Risk Lead
Nikki Barnes

Governance Board(s)
Finance Planning & Payer Functions Committee

Date of Last Review
05/01/2026

Risk Movement
→ **No change**

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	5	20

Current Risk Rating

Impact	Likelihood	Risk Rating
4	5	20

Target Risk Rating

Impact	Likelihood	Risk Rating
3	4	12

Risk Updates

Date	Update
20/07/2023	All actions in progress as planned
10/04/2024	Housing growth trajectories obtained from three of the four local authorities. Place based estates workshops taking place end of April and beginning of May.
23/07/2024	Infrastructure strategy developed for signoff by the ICB Board end of September
11/10/2024	Risk reviewed; risk remains the same
28/02/2025	No change to risk. BLMK Infrastructure Strategy in development
26/06/2025	Infrastructure strategy due for sign-off by ICB Board 27th June 25

System Controls

System Controls
Local Authority Place Plans - address local population growth and inequalities
BLMK Joint Forward Plan 2024 - 2040, agreed by board sets out population growth and plans to mitigate
Developer Contributions - partnership working with local authorities to secure financial contributions for health from housing developments

System Actions

Action	Lead Org.	Lead	Due Date	Update
Development of BLMK Infrastructure Strategy	ICB	Nikki Barnes	05/01/2026	No update - BLMK Infrastructure Strategy was signed off by the ICB Board in June and implementation is underway

Accurate as of: 30/01/2026 10:10

Bedfordshire, Luton
and Milton Keynes
Health and Care Partnership

NHS
Bedfordshire, Luton
and Milton Keynes
Integrated Care Board

BAF0009 - Impact of Rising Cost of Living on Residents and Staff Wellbeing.

Risk Owner	Risk Description
Sarah Griffiths	As a result of rising cost of living, in particular the impact of cold weather and cost of heating, keeping warm and eating well,

Risk Lead	There is a risk that our residents and staff will not be able meet their basic needs
TBD	

Governance Board(s)	resulting in - deteriorating physical and mental health - pressure on all public services
Finance & Investment Committee/Quality & Performance Committee	

Date of Last Review
08/12/2025

Risk Movement
→ **No change**

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	4	16

Current Risk Rating

Impact	Likelihood	Risk Rating
4	4	16

Target Risk Rating

Impact	Likelihood	Risk Rating
3	4	12

Risk Updates

Date	Update
11/04/2024	The ICB has submitted a request for a living wage status. Lived experience charter has been achieved. Work is being carried out with BBI (Breaking Barriers Innovators), unpaid carers, lived experience of the cared system and neurodiversity.
24/07/2024	Risk ongoing, a health and wellbeing festival is coming up and most system partners are contracting with Vivup.
03/12/2024	Risk Reviewed - rephrased risk wording for clarity
27/02/2025	Reviewed with Martha Roberts - no change. Added an additional control
29/07/2025	Work and mitigations continues. Successful results with people starting employment in healthcare following programmes for NHS careers. Supported ex-Vauxhall employees into NHS employment.
23/10/2025	Upon review action to "develop approach to prioritise residents waiting for treatment who are unable to work as a result of their condition" closed. The action needed to be reframed as clinical priority is based on presenting condition, not socio-economic situation. The action is better described as to "develop additional support to help those waiting for treatment to continue to work as fully as possible". There are multiple programmes being carried out via the workforce team as part of their strategy, some also listed on this risk.
08/12/2025	All system actions closed. To reconsider scope of risk in April 2026.

> **Commented [JB1]:** Can this risk be lowered? Is it a risk we want to maintain?

Accurate as of: 30/01/2026 10:10

System Controls

System Controls
Delivery of ongoing communications to support population access to support services in partnership with Trusts and Local Authorities.
Local Authority support schemes for residents - Warm spaces/hubs - Food banks etc
Partner Support Schemes for staff e.g. BHFT Staff loan scheme enables small temporary loans
Partner and national NHS financial plans for managing increased costs due to inflation
Clinical and operational prioritisation of waiting lists is now part of business as usual to support access to services as appropriate
Monthly System Health Equity meetings in place to ensure momentum and action takes place within the Health Equity Programme
Equity Improvement Team in place which will support how we are making improvements through the system through an equity lens and ensuring balancing measure are in place to ensure we are not widening inequalities and how that is affecting the rest of the system.
ICB - living wage employer ensuring staff are at a minimum pay of living wage rather than minimum wage
ICS Work Health and Skills Stewardship - 40 system partners in attendance. To support resident population who suffer from long term health conditions or long term economic activity to become economically active and improve their health

System Actions

Action	Lead Org.	Lead	Due Date	Update

Bedfordshire Actions

Action	Lead Org.	Lead	Due Date	Update
Luton 2040 programme to ensure that Luton is a healthy, fair, and sustainable town where everyone can thrive, and no one has to live in poverty. (CEO-LBC)	ICB	Fiona Head	31/01/2040	Action in progress

Accurate as of: 30/01/2026 10:10

BAF0010 - Partnership working

Risk Owner	Risk Description
Maria Wogan (BLMK)	In the challenging financial environment, there is a risk that the development of the ICS's public position on an issue is inconsistent with the public position of one or more partner member(s), resulting in a lack of clarity for the public and stakeholders

Risk Lead
Dominic Woodward-Lebihan

Governance Board(s)
BLMK Neighbourhood Health Delivery Committee

Date of Last Review
05/11/2025

Risk Movement
→ **No change**

Inherent Risk Rating

Impact	Likelihood	Risk Rating
3	4	12

Current Risk Rating

Impact	Likelihood	Risk Rating
3	3	9

Target Risk Rating

Impact	Likelihood	Risk Rating
3	2	6

Risk Updates

Date	Update
12/07/2023	No substantive changes to the existing risk profile; joint ICP/ICB seminar on 2107 supporting system to reach coherent and collective position on issues. Issues relating to funding and estates remain the most likely cause of public disagreement most notably the ICBs inequalities funding which was the subject of strong debate at June's Board meeting.
07/09/2023	No substantive changes to the existing risk profile, but notable announcement of by-election in Central Bedfordshire in October creates a heightened sense of political sensitivity which all ICB partners are alert too (especially those operating in the mid bedfordshire footprint)
04/12/2023	Risk review complete
12/04/2024	Controls are presently offering good mitigation to this ongoing risk which has the potential to increase in an election year
26/07/2024	Good partnership efforts throughout pre and post election period on politically sensitive topics. Communications teams across ICS in regular conversation, new joint post between ICB/MKUH has commenced
22/11/2024	No immediate concerns as regards issues which are causing incompatible public positions, intense work continues on healthcare estates matters between partners.
04/03/2025	The Operational Planning process has this year, including the Board Seminar in January, has supported the development of a clear system narrative to which all partners can subscribe. This work continues throughout Feb and March. Plans for developing an updated system strategy for 2026 have been agreed initially by the BLMK Health and Care Partnership and will be reported to the ICB Board.
15/03/2025	Development of difficult decisions to meet the financial balance being undertaken in line with the agreed governance structures, including through CAG, so that all system partners can be engaged and give views, with the most impactful decisions brought before the Board.
13/06/2025	Development of difficult decision to meet financial balance being undertaken in line with the agreed governance structures, including through cag, so that all system partners can be engaged and give views, with the most impactful decisions brought before the Board.

BAF0010 - Partnership working

System Controls

System Controls
Director for Neighbourhood Health, Places and Partnerships has a coordinating role at Place and lead on place relationship management for the ICB.
Decision Planner gives partners notice of forthcoming decisions
Engagement Planner enables system wide coordination of engagement activity
Chair quarterly session with local leaders enables discussion of current issues facing the system
Chair quarterly session with local leaders enables discussion of current issues facing the system
Chair quarterly session with local leaders enables discussion of current issues facing the system
Core script/key lines now includes main thematic areas of concern outlined re cllr inductions
Exec has an open space session on stakeholder management more generally so there is understanding of individual and collective responsibilities
Chair quarterly session with local leaders enables discussion of current issues facing the system
Proactive briefings to key stakeholders as required: - Briefings for newly elected councillors   - Pre-briefing good practice to local leaders
Integrated communications framework to enhance partnership effectiveness, which includes a weekly communications grid for systematic information sharing, a robust communications network fostering collaboration among partners, proactive engagement through partnership social media platforms, regular dissemination of the 'Live Well' newsletter to promote health and wellbeing, and the implementation of a comprehensive media and social media strategy to ensure coherent and strategic messaging across all channels
Coordinated articulation of partnership progress and areas to develop further agreed by HCP in Feb 25, and reflected in the 2025 update to the Joint Forward Plan presented to the ICB Board in March.

System Actions

Action	Lead Org.	Lead	Due Date	Update
Continue to promote Joint Initiatives	ICB	Dominic Woodward-Lebihan	20/04/2026	Ongoing

Accurate as of: 30/01/2026 10:10

BAF0011 - Health literacy - Denny Review

Risk Owner	Risk Description
Maria Wogan	As a result of challenges with health literacy and understanding of health services as identified in the Denny Review, there is a risk that members of minority, disadvantaged and seldom-heard communities in BLMK are not able to properly access or navigate between health and care services, potentially leading to an exacerbation of health inequalities, increasing a sense of fragmentation between services, and resulting in adverse health outcomes.

Risk Lead
Tara Dear

Governance Board(s)
BLMK Neighbourhood Health Delivery Committee

Date of Last Review
06/08/2025

Risk Movement
→ **No change**

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	4	16

Current Risk Rating

Impact	Likelihood	Risk Rating
4	4	16

Target Risk Rating

Impact	Likelihood	Risk Rating
4	2	8

Risk Updates	
Date	**Update**
04/12/2023	Additional control added.
12/04/2024	Partnership working on the Denny response is increasingly responsive to health literacy concerns including recent launch of videos to support autistic people to navigate health and care system. 17 May seminar will help this progress further alongside new shared transformation team. Reasonably we expect this risk to take many years to fully address.
28/08/2024	The improving health equity programme has been identified as one of the 11 priority workstreams for the ICB and the response for the Denny recommendations are encompassed within it.
04/12/2024	Risk Reviewed, actions updated and no changes to scoring.
06/03/2025	Risk reviewed and actions updated.
06/08/2025	Announced closure of CSUs and Healthwatch, and potential transfer of functions to ICBs, will impact the future of coproduction approaches in BLMK, and are being considered in the round as part of the design of the new ICB.
29/08/2025	One action complete and control added.
The announced closure of CSUs and Healthwatch, and potential transfer of functions to ICBs, will impact the future of coproduction approaches in BLMK, and are being considered in the round as part of the design of the new ICB

System Controls

System Controls
Engagement with the public via Healthwatch and VCSE to explain the differences in services available, so that people can make the right choices for them and we can protect emergency provision.
Inequalities senior leadership group - looking at how funding is prioritised in each place based on the Denny review and evaluating impact.
Our working with people and communities strategy defines how the ICB listens and responds to the views of our residents, VCSE groups and harder to reach communities
Embedding of co-production into ICB processes and operations allowing us to co-design and coproduce of services and pathways with the people that use them. This is supported by our system wide co-production training
Memorandums of Understanding with Healthwatch and with the VCSE underpin our strategic intention to embed diverse resident insight into everything we do
The "Big Conversation" Programme of Work, led by the ICB with support from Healthwatch and wider partners, gathered resident insight from diverse communities, and supports the onward development of relevant policies and plans, most notably the Joint Forward Plan
The ICB's "Decision Planner" which is publicly available, sets out the decisions the Board will take over the next 12 months
Publication of the Denny Review - provides a baseline understanding of inequalities in BLMK and informs all transformation and improvement programmes
Translation and interpretation services across BLMK reviewed and appraisal presented to system partners at Q2 Health Equity Programme Board

System Actions

Action	Lead Org.	Lead	Due Date	Update
Delivery of the Improving Health Equity transformation programme	ICB	Sarah Watts	30/12/2025	No update- 3 year programme
Accessible communications produced and campaign to explain how to access health / care services	ICB	Dominic Woodward-Lebihan	01/08/2025	No update
Delivery of review of translation and interpretation services across BLMK- by Healthwatch and ICB	ICB	Samita Dass	Action Complete	Findings shared with the Health Equity Group are informing work with the T&I contracting team to strengthen service provision. Population health data is currently being reviewed to assess impact and deepen understanding across service delivery.

Accurate as of: 30/01/2026 10:10

BAF0012 - System Collaboration

Risk Owner	Risk Description
Maria Wogan	There is a risk that diverse and competing activities within the Integrated Care System (ICS) could lead to inefficiency and diluted accountability across the health and care sector organisations. This situation may result in a loss of focus on key priorities and ineffective use of resources, jeopardising the delivery of value to the BLMK population.

Risk Lead
Matt Hollex

Governance Board(s)
Board of the Integrated Care Board

Date of Last Review
04/11/2025

Risk Movement
→ **No change**

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	3	12

Current Risk Rating

Impact	Likelihood	Risk Rating
3	3	9

Target Risk Rating

Impact	Likelihood	Risk Rating
1	2	2

Risk Updates

Date	Update
26/07/2024	As per board agreement on 1907, newly agreed ICB transformation priorities will support focusing of resources underpinned by new ICB portfolio tool
22/11/2024	Risk reviewed, no changes since last review
19/02/2025	The February update of the Portfolio Report is currently being compiled
06/03/2025	The Feb-25 update of the Portfolio Report has been published on the ICB Intranet and the ICS website. This report continues to create awareness of what is happening in BLMK to support and facilitate cross-organisational discussions and collaboration
20/05/2025	The May-25 update of the Portfolio Report and the associated Q&P Committee paper that contains a series of remedial actions to address slippage, escalations and assurance gaps, is a key action in reducing risk BAF0012. PMO will work with SROs and leads to work through each of the actions from the Q&P Committee paper.
08/07/2025	The request for the August update of the Portfolio Report goes out on the 23/07
21/08/2025	Management of BLMKs portfolio of transformation, programmes and projects will became harder as the ICB Transition / Reconfiguration impacts on more teams and people. Mitigations are in place, however the risk will never be fully mitigated.

Accurate as of: 30/01/2026 10:10

BAF0012 - System Collaboration

System Controls
Partnership Governance Structures oversee transformation programmes within the remit e.g. MK Health and Care Partnership oversee MK Deal.
Joint Forward Plan provides strategic alignment of transformation priorities across partners
Regular reporting of transformation progress and system performance and outcomes via Verto and the portfolio report to board, System Chief Executives Group and other governance groups.
ICB CEO has regular 1-2-1s with Trust and Local Authority CEOs to share information and discuss areas of mutual interest.
ICB Stakeholder Management Plans developed for transformation programmes to support effective collaboration and information sharing
Verto 365 reduces the risk of duplication as the system is better enabling collaboration between partners and therefore greater awareness of work
The independent review for BCA and Bedfordshire Places was commissioned and has concluded with the final report and recommendations presented to the ICB Board in June 2025
Clarification of relationships, interdependencies, responsibilities and accountabilities for initiatives in the Portfolio Tool to remove duplication and improve clarity (October 2025)
Performance Reporting Processes includes outcome measures and implementation of the data pyramid.

System Actions

Action	Lead Org.	Lead	Due Date	Update
Develop a Place Maturity Framework based on learning from independent reviews of Milton Keynes and Bedfordshire	ICB	Michelle Evans-Riches	31/03/2026	No update – response wont be available until the end of September 2025
Undertake governance review for all ICB committees and partnership arrangements	ICB	Michelle Evans-Riches	31/03/2026	No update

Accurate as of: 30/01/2026 10:10

BAF0013 - VCSE sustainability - Impact on Delivery of ICS Strategic Priorities

Risk Owner	Risk Description
Maria Wogan	As a result of multiple factors affecting VCSEs: - Perceptions and understanding of the sector in relation to knowledge, business operations, impact and value - A reduction in charitable donations to VCSE organisations, increase in national insurance contributions and a challenging financial climate for statutory partners - Short term funding mechanisms and financial instability from using reserves to maintain services - Workforce challenges, including difficulties with recruitment, retention, and redundancy - Complex operational functions, less agility and diminished flexibility as a result of service decommissioning - Disproportionate reporting requirements - Engagement fatigue within the VCSE and communities - Reductions or closures of VCSE services There is a risk that the ICS will not deliver its vision and strategic priorities because the VCSE sector may not be in a position to adequately support the design and delivery of alternative approaches and services to deliver the left shift towards prevention and early intervention Resulting in: - Poorer resident experience and health outcomes - Loss of VCSE knowledge, organisational memory and service expertise - Reduced outreach to seldom heard and disadvantaged communities, increasing inequalities - Increased demand and costs for statutory partners - Reduced external funding coming into BLMK - Loss of opportunities for collaboration and innovation with the VCSE in areas such as research and workforce - Reduced economic and social development - Trust and reputational damage for all partners

Risk Lead

Sonal Mehta

Governance Board(s)

Board of the Integrated Care Board

Date of Last Review

11/12/2025

Risk Movement

→ No change

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	4	16

Current Risk Rating

Impact	Likelihood	Risk Rating
4	4	16

Target Risk Rating

Impact	Likelihood	Risk Rating
3	3	9

Accurate as of: 30/01/2026 10:10

BAF0013 - VCSE sustainability - Impact on Delivery of ICS Strategic Priorities

System Controls

System Controls
VCSE Strategy Group influences and facilitates greater collaboration between the BLMK Health and Care Partnership and the VCSE Sector
MoU in place to support partnership development between VCSE and ICB, which includes a commitment to sustainable funding
ICB employ VCSE Partnership Lead and fund VCSE Development Officer in VCSE sector to support development of the partnership
ICB Non-executive and Executive member roles provide strategic links between the ICB and VCSE sector to ensure the sector is advocated for at Board level
ICB has developed a Procurement and Market Management Strategy taking account of feedback from VCSE Strategy Group for more effective engagement
Prompts incorporated into policies and impact assessments e.g. Verto PMO tool, to support earlier engagement with VCSE in planning and decision making
Allocate 23-24 health inequalities funds to VCSE for work relating to recommendations in Denny Review

System Actions

Action	Lead Org.	Lead	Due Date	Update
Deliver procurement support for VCSE including training and workshops to enable market development	ICB	Sonal Mehta	31/03/2026	SM attended BLMK procurement practitioners group. To present VCSE briefing and agreed the partners would identify co- working opportunities. e.g. delivering a joint market engagement event.
Implement joint assessment with commissioner and provider on impact of decision to withdraw funding, including other partners	ICB	Sonal Mehta	31/01/2026	PPG has shared a survey re workplan priorities and includes joint activities with VCSE
ICB Place teams and STT are developing working arrangements with VCSE to support more effective collaboration	ICB	Sonal Mehta	31/01/2026	as part of the system wide risk development a KRI will be developed before this action is completed. There is an engagement structure in place, KRI's re the strategic alliance are in development to motivate system wide engagement
Ensure 23-24 inequalities funding allocated to support VCSE partners as part of NHS planning	ICB	Sonal Mehta	31/01/2026	£4k remaining and being reviewed within total VCSE programme budget to ensure work is sustained through ICB transition
Sustain the three VCSE mental health alliances across BLMK to support more effective delivery	ICB	Sonal Mehta	31/01/2026	Plans being developed following market engagement events.
Improve understanding of impact and value from VCSE contracts and grant funding from other system partners	ICB	Sonal Mehta	31/01/2026	Work is ongoing – opportunities to explore over CE footprint

Risk Updates

Date	Update
05/04/2024	Inconsistent comms around delayed NHS planning guidance means that some VCSE orgs have started to issue redundancy notices to staff, and limit or withdraw services. VCSE have already been holding risk within contracts due to lack of uplift in recent years and have supplemented costs through fundraising, which is becoming more difficult due to cost of living. Other partners are decommissioning VCSE services and this will have knock on effects for the NHS. For these reasons, parts of the sector are hesitant to engage with statutory partners as it is is deemed a risk to them.
24/05/2024	Risks assessment currently being undertaken with VCSE Strategy Group to consider for BAF at end of June
09/07/2024	risk assessment going to Board on 19th July and audit and risk cttee on 26th July
16/08/2024	System risk now on BAF. Feedback from audit and risk cttee being taken to VCSE Strategy group in September. Further work with partners required to develop KRIs
25/09/2024	Current controls and draft actions added in preparation for ICB audit and risk committee on October 11th
07/11/2024	Risk description redrafted following feedback from ARAC in October. Maria Wogan attending core VCSE group on 20th Nov to agree final description and determine next steps
13/12/2024	Risk description updated for ICB board report on 13/12/24
13/02/2025	VCSE contract spend under review
26/02/2025	Potential for further inequalities funding from 24-25. Proposal being worked up. BBC place team progressing re ACT project and further NHS planning funds secured for strategic VCSE engagement. Workplan and budget under review in light of model ICB transition.
28/05/2025	BBC place team progressing re ACT project and further NHS planning funds secured for strategic VCSE engagement. Workplan and budget under review in light of model ICB transition
09/07/2025	target updated - current position remains the same due to capacity barriers and appetite within the NHS
23/10/2025	Risk development work likely to pause while VCSE governance within Central East is reviewed. NHSE quality tool action closed due to internal NHSE change. VCSE representation in provider collaboratives complete and closed. Other actions updated.
18/11/2025	Central East VCSE Alliances funding proposal for 26/27 in development to ensure continuity and stability.

Accurate as of: 30/01/2026 10:10

BAF0014 - Maternity Services at BHFT

Risk Owner	
Sarah Stanley	

Risk Lead	
Sarah Watts	

Governance Board(s)	
Audit & Risk Management Committee/ Utilisation Management and Quality Improvement Committee	

Date of Last Review	
27/11/2025	

Risk Movement	
→ **No change**	

Risk Description

As a result of a number of factors across BHFT maternity services, relating to staffing and governance processes, which were identified and outlined at the Maternity Quality and Safety summit on 16th September 2024, not being fully addressed and rectified including:
• Inadequate staffing in the triage unit to manage all functions safely.
• Inadequate medical staff training and mandatory training completion as per Trust targets
• Not confronting unacceptable behaviours, including racism and discrimination
• Inappropriate management of incidents
• Insufficient number of qualified, competent, skilled, and experienced midwives to ensure safe care.
• equipment checks are not performed and documented as per Trust policy.

There is a risk of
• Increased incidence of avoidable harm
• Higher than expected mortality.
• Patient dissatisfaction

Resulting in
• Negative patient outcomes and harm
• backlogs of outstanding incidents hindering the identification of themes and trends necessary for shared learning
• Increased strain on resources and staff well-being and morale, recruitment and retention potentially leading to further workforce challenges.
• Increased health and social care costs
• Lack of patient confidence, satisfaction and experience
• Impact to reputation of BHFT maternity services and the NHS
• Legal action / enquiries

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	4	16

Current Risk Rating

Impact	Likelihood	Risk Rating
4	4	16

Target Risk Rating

Impact	Likelihood	Risk Rating
3	3	9

Risk Updates

Date	Update
06/03/2025	Good progress has been made with all must do CQC recommendations achieved. Scores to remain currently.
25/05/2025	Bedfordshire actions completed and controls added. MNVP voice and equal partner recruited. All posts recruited and staff in place from April 2025. PMA in post for both sites full time. Will support staff experience and improve safety.
08/07/2025	following discussion at Q&P consider deescalating this risk in September
28/08/2025	Gaining assurance has been an ongoing issue however the perinatal improvement programme work is being completed and shared as part of the improvement board. The CQC have visited this provider twice in August 25 and we are waiting for the report to be published with its findings.
27/11/2025	The Trust have notified us that the CQC have placed conditions on their registration because the Trust have a high backlog of incidents, complaints, DOC and out of date guidelines, high number of staff not completing appraisals and not meeting statutory maternity training and their is no dedicated maternity triage phone line in Bedford. There is an action plan in place which is being monitored by the CQC with monthly meetings.

MNVP structure in place and complaints will be monitored and feedback will be sought from service users for assurance.

National OPEL system for mutual aid support to be implemented in January 2026 (national programme). Complaints framework improvements have been implemented and are BAU, complaints will be monitored to ensure it is fully embedded. Quadmirative meeting with safety champions regularly and meeting is being minuted and having regular walkabouts, action has been completed with evidence submitted to LMNS |

System Controls

System Controls
Maternity Improvement Action Plan in Place to track and monitor progress and provide timely feedback.
Oversight provided through System Maternity Improvement Board
Trust Maternity Dashboard to monitor and track changes.
LMNS Board Meeting with ongoing oversight at LMNS Quality and Safety Meeting for assurance and reassurance
Monthly Trust Audit for quality assurance, check compliance, identify any risks and for continuous improvement
Maternity Improvement board meet monthly includes: ICB Chief Nurse (Chair), Screening Team, MNVP, NMC, GMC, Regional Workforce Training and Educational Team, CQC, Healthwatch to deliver all recommendations from CQC report, maternity summit actions, 60steps to safety and national screening team recommendations and resident feedback.
Maternity Support Programme - NHSE programme to support actions and delivery of recommendations (external clinical support within Acute)
BHFT Labour Ward Coordinator Framework promotes effective leadership and improvements in team culture
System Mortality / Harm review - monitored within Women, Children and Maternity Board which ensures the actions from recommendations are implemented and monitored
Bedfordshire control - BHFT increased staff and oversight resource to increase robustness of failsafe system.
Health Innovation East to support BHFT with one day per week to effectively implement NEWTT2 and MEWS across the whole trust not just maternity.
Antenatal screening programme resource - temporarily recruit an experienced screen coordinator to fill sickness gaps

System Actions

Action	Lead Org.	Lead	Due Date	Update
Focus on learning from incidents/harm with evidence of changes in practice.	ICB	Felitta Burney-Nicol	30/01/2026	No update
Tommy's app pilot to commence (Funding agreed for 3 year post to implement app 0.8 funded from BHFT, 0.8 from ICB).	ICB	Sanhita Chakrabarti	30/01/2026	Ongoing

Bedfordshire Controls

Bedfordshire Controls
Maternity Improvement Director has been appointed by BHFT who are a dedicated resource to lead the implementation of action plan and improvement.
BHFT appointed interim governance lead provide cross site governance, support and implementing governance framework and embed practices.
Bedfordshire Trust - Programme Director and Maternity Improvement Director in place to oversee and manage programme
BHFT have agreed an Equality, Diversity, and Inclusion (EDI) policy.
BHFT increased staff and oversight resource to increase robustness of failsafe system.
MNVP voice and equal partner recruited. All posts recruited and staff in place from April 2025.
PMA in post for both sites full time. Will support staff experience and improve safety.
EDI Policy and strategy to be implemented by BHFT
Implement a cultural strategy
Tier 3 weight management pilot
BHFT to develop a comprehensive workforce strategy
BHFT to develop a comprehensive culture strategy

Bedfordshire Actions

Action	Lead Org.	Lead	Due Date	Update
BHFT to develop and implement a Maternity Governance Risk Framework, including an associated action plan with clear timeframes	ICB	Felitta Burney-Nicol	30/01/2026	No Update
BHFT to ensure and learn from feedback loop on user experience and reporting (including complaints, users, incidents and outcomes. Themes, actions and learning). Monitored via Improvement Board	ICB	Sarah Stanley	30/01/2026	Ongoing, under continuous review

Accurate as of: 30/01/2026 10:10

BAF0015 - Failure to Deliver the Operational and Financial Plan 2025/26

Risk Owner
Maria Wogan

Risk Lead
Matt Hollex

Governance Board(s)
Audit & Risk Management Committee / Utilisation Management and Quality Improvement Committee / Finance, Planning and Payer Function Committee

Date of Last Review
12/12/2025

Risk Movement
→ **No change**

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	**5**	**20**

Current Risk Rating

Impact	Likelihood	Risk Rating
4	**4**	**16**

Target Risk Rating

Impact	Likelihood	Risk Rating
3	**2**	**6**

Risk Description

As a result of BLMK ICS failing to fully implement and mobilise its Operational and Transformational plans for 2025/26, there is a risk that BLMK ICS will not fully achieve the Financial, Performance and Workforce targets set out in 25/26 Financial & Operational Plan, which will result in failure to fully fulfil our commitment to improving services for our residents, poorer outcomes for patients and heightened scrutiny from NHS England, which could include less control over our finances and governance.

Risk Updates

Date	Update
23/10/2025	Action to update the 2025/26 contracts completed and closed. Deviation from plan monitoring in place and action closed. Action concerning NHSE support for Category 2 emergency response closed due to NHSE internal changes. ICB Financial Improvement Group (FIG), BHFT and MKUH Financial Turnaround Teams routinely review and identify additional efficiencies schemes, action closed.
12/12/2025	Action complete - BLMK ICS Transformational Programme Charter to be completed for Admissions Avoidance / Discharge Pathways.

Accurate as of: 30/01/2026 10:10

BAF0015 - Failure to Deliver the Operational and Financial Plan 2025/26

System Controls

BLMK ICS has 88 Service Change Proposals (including Difficult Decisions) and over120 active programmes and projects. These have agreed Governance Process to manage them including reporting to he Performance Exec, Operational Group, Quality & Performance committee, CEO Group and Board of the ICB for oversight.

BLMK ICS has over 100 Efficiencies / CIP schemes that total £118m and an agreed Governance Process to manage them

BLMK ICS has agreed 3 Transformational Programmes, 4 Priority Enablers and 6 Areas of Focus (from the Health Services Strategy) to support sustainable financial improvement and improved health outcomes for 2025/26 and beyond. Fortnightly highlighting reporting has commenced using the Verto Governance Report to ensure groups/forums have oversight of progress. Programme Charters have been agreed for CYP Complex Care and EOL.

NHSE region have oversight via monthly ICB and Trust reporting

Grip & Control measures implemented in 24/25 including: Fortnightly & monthly Financial & Operational Plan meetings between the ICB and all providers Acute Financial Recovery/Turnaround Teams & associated governance Acute Transformation/CIP teams & associated governance Acute Spend/Investment/Cost Scrutiny Panels Acute Boards and Committees holding FTs to account ICB Investment Oversight Group (IVOG) Transformation Programme Boards UEC and Elective Recovery Oversight Groups ICB Financial Recovery Group (FIG)

System Champions appointed to address BLMK ICS transformational plan deviations via associated governance.

Portfolio and Performance reports are being produced now. Both reports should be used at the Performance Exec, Operational Group, Quality & Performance committee, CEO Group and Board of the ICB to addresses poor performance and off-track programmes/projects.

Deviation from plan is picked up at established system collaborative forums including the "Delivering our Financial & Operational Plan" meetings.

The 2025/26 contracts have been finalised and clarify financial allocations, activity/outcome expectations and reporting requirements.

ICB Financial Improvement Group (FIG), BHFT and MKUH Financial Turnaround Teams routinely review and identify additional efficiencies schemes

System Actions

Action	Lead Org.	Lead	Due Date	Update
BLMK ICS Transformational Programme Charter to be completed for Admissions Avoidance / Discharge Pathways.	ICB	Matt Hollex	31/08/2025	Complete
QEIAs to be populated and assessed by BHFT, MKUH, ELFT and CNWL internally to obtain CMO/CNO approval.	ICB	Matt Hollex	01/04/2026	A majority of the QEIAs for 2025/26 have been created and reviewed by CAG. Most of the emerging QEIAs this late in the financial year are for 2026/27. There will be very few (if any) further QEIAs, any that do, like the ADHD QEIA will impact on 26/27, not 25/26.
CAG to review QEIAs to provide an approve or reject recommendation, in addition to determining the level of resident engagement required and associated risk assessment	ICB	Matt Hollex	28/01/2026	As per the update above, most 2025/26 QEIAs have been reviewed by CAG – we are now starting to see 2026/27 QEIAs emerging.

Accurate as of: 30/01/2026 10:10

BAF0016 – ICB Reconfiguration and Potential Destabilisation of BLMKs ICB's Delivery & Impact on Statutory Function Delivery

Risk Owner
Karen Barker

Risk Lead
TBD

Governance Board(s)
BLMK Neighbourhood Health Delivery Committee ICB Board

Date of Last Review
05/12/2025

Risk Movement
→ No change

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	5	20

Current Risk Rating

Impact	Likelihood	Risk Rating
4	4	20

Target Risk Rating

Impact	Likelihood	Risk Rating
3	2	6

Risk Description

As a result of BLMK ICS failing to fully implement and mobilise its Operational and Transformational plans for 2025/26, there is a risk that BLMK ICS will not fully achieve the Financial, Performance and Workforce targets set out in 25/26 Financial & Operational Plan, which will result in failure to fully fulfil our commitment to improving services for our residents, poorer outcomes for patients and heightened scrutiny from NHS England, which could include less control over our finances and governance.

Risk Updates

Date	Update
26/08/2025	Risk assessment and follow up action complete.
22/10/2025	New Executive Director structure in place. New Line Management arrangements will be in place by 01 Nov-25.
05/12/2025	Risk remains open at this time, acknowledging this is a system risk, the BLMK Head of Digital Delivery continues to run the 'Cyber Huddles' to ensure stakeholders are coordinating and cooperating, this will be subject to continual review as the new ICB develops.

System Controls

System Controls
BLMK ICB Transition Team in place
Regular BLMK ICB Transition Team calls established
Model ICB Blueprint made available to staff
Draft ICB Reconfiguration Timelines shared
Model ICB Directorates identified
Model ICB Design Groups established
Stop & Pause exercise undertaken at Exec to reduce the number of programmes and projects
Model ICB Chief and VSM Structures drafted
Regular ICB Staff Huddles being conducted
'Risk Assessment' exercise at Exec (follow on from the Stop & Pause exercise)
Confirmation of the Chair appointment
Confirmation of the CEO appointment
Confirmation of Executive Directors in the new ICB
Regular ICB Staff Huddles being conducted to enhance communication and clarity.

System Actions

Action	Lead Org.	Lead	Due Date	Update
Greater Clarity on the Timelines for staff	ICB	Dominic Woodward-Lebihan	01/04/2026	Ongoing
Central East Transition arrangements being established	CE ICB	Karen Barker	01/04/2026	In progress – BLMK transition arrangements will transfer to Central East approach

Accurate as of: 30/01/2026 10:10

BAF0017 – Data Security breach within or impacting BLMK System

Risk Owner
Louis Kamfer

Risk Lead
Mark Peedle

Governance Board(s)
Audit & Risk Management Committee / Board of the Integrated Care Board

Date of Last Review
08/12/2025

Risk Movement
→ No change

Risk Description

As a result of multiple factors across the BLMK System including: Increasing number of cyber / information security incidents (e.g., ransomware, phishing, or denial-of-service attacks) Increasing reliance on technology / digital interconnectedness / Artificial Intelligence / Robotic Process Automation Rapidly advancing and emerging technologies Increasing complexity or astuteness of cyber-attacks Human error / human ambivalence Geopolitical threats / tensions / worldwide events Increasing reliance on third-party systems (supply chain) e.g. cloud-based services and software Supply chain vulnerabilities / Variation in cyber maturity across different industry sectors Increasing demand in maintaining existing digital systems to ensure systems are able to remain up to date with security updates (i.e. implementing effective digital estate refresh programmes (eg: laptops, PC's, networks), software compliance and maintaining inventory, ensuring compliance with DSPT and CAF (Cyber Assurance Framework) standards)

There is a risk of Loss or compromise of one or more digital systems (including clinical, financial, business / administrative systems) and associated data.

Resulting in: Individual, multiple, departmental or organisational wide or supply chain systems being taken offline Loss of, exposed or damaged patient / confidential data / sensitive information / non-sensitive data Direct or indirect harm to patients due to disruption to critical services / overall service provision at Trust, Place and ICS levels, with possible Critical System Safety thresholds reached Cancellations or Delays in treatment / diagnostics / discharges / medicine management Protracted business continuity response, and impacts to wider system and regional / national capacity in support, including incident recovery Increased strain on resources and staff well-being and morale Reputational Damage (loss of trust as data controller) Societal impacts (unrest, disinformation) Missed opportunities for intervention (safeguarding) Financial losses through direct loss of funds and/or recovery costs Legal Repercussions (litigations, regulatory fines) Reduced capacity and ability to respond in the case of a concurrent incident / patient surge impacting Health Services.

Inherent Risk Rating		
Impact	Likelihood	Risk Rating
5	5	25

Current Risk Rating		
Impact	Likelihood	Risk Rating
4	5	20

Target Risk Rating		
Impact	Likelihood	Risk Rating
4	4	16

Risk Updates	
Date	Update
08/09/2025	Risk remains open, pending outcome of the current ICB reorganisation this may result is responsibility being handed to provider trusts or the NHS England regional office. To be stablished.

System Controls
BLMK ICS Cyber Huddle – Incident Sharing & Stakeholder Coordination
SYS Onboarding to Central Cyber Services
SYS Cyber Defence Services
SYS System-wide Compliance with DSPT/CAF Information Security Standards
SYS CCA 2004 – Legal Basis for Information Sharing
Incident preparedness EPRR
ICB triage of national cyber funding
SYS NHSE digital cyber security threats and remediation bulletin
SYS DCB1596 Secure Email Accreditation
SYS Data Security Protection Tool-Kit
SYS Business Continuity Planning
SYS NHSE National Cyber Security Operations Centre
SYS Regional Cyber Resilience Forum Meetings
ICB IG Team to receive ad hoc updates from partners re any issues regarding DSPT

System Actions				
Action	Lead Org.	Lead	Due Date	Update
ICS ePRR Cyber Incident Response Exercise - June 2025 with post exercise report and lessons	BLMK	Tammy Harding-Edwards	28/02/2026	Exercise completed June 2025. Awaiting Post Exercise Report from NHSE Region cyber lead

BAF0021 – Estates & Infrastructure

Risk Owner	Risk Description
Dean Westcott	As a result of an aging and increasingly unfit estate across the health system, there is a risk that facilities may fail to meet modern clinical and safety standards, resulting in service disruption, increased maintenance costs, reduced quality of care, and potential harm to patients and staff.

Risk Lead
Nikki Barnes

Governance Board(s)
Utilisation Management and Quality Improvement Committee

Date of Last Review
23/10/2025

Risk Movement
→ **No change**

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	5	20

Current Risk Rating

Impact	Likelihood	Risk Rating
3	3	9

Target Risk Rating

Impact	Likelihood	Risk Rating
2	2	4

Risk Updates

Date	Update
03/06/2025	Infrastructure Strategy Reviewed at Board
23/09/2025	Key locations contributing to this risk have specific risks which are being individually managed. These child risks are currently scored between 8 and 9. As a result this risks score was reduced from 20 to 9.
23/10/2025	Risk remains and control is still valid, no changes
05/01/2026	Risk score reduced following presentation of strategy to the June 2025 Board. Publication of four-year capital budgets for Trusts and ICBs has reduced this risk.

System Actions

Action	Lead Org.	Lead	Due Date	Update
Monitor area critical developments	Milton Keynes	Nikki Barnes	N/A	N/A

System Controls

Maximise capital funding opportunities

Accurate as of: 30/01/2026 10:10

BAF0022 – Achieving Net Zero

Risk Owner
Dean Westcott

Risk Lead
Tim Simmance

Governance Board(s)
Utilisation Management and Quality Improvement Committee

Date of Last Review
08/12/2025

Risk Movement
→ No change

Risk Description

As a result of competing priorities, availability of finance, resource constraints, inaccurate or incomplete data, and the current state of technological advancement, there is a risk that health and care services within BLMK may not reach net zero targets for emissions; this includes targets of 2032 (80% reduction) and 2040 (100%) for directly controllable emissions, and 2039 (80%) and 2045 (100%) for influenceable emissions (supply chain). This would result in contributing to uncontrolled climate change and could create the future risk of regulatory and enforcement action.

Inherent Risk Rating

Impact	Likelihood	Risk Rating
4	3	12

Current Risk Rating

Impact	Likelihood	Risk Rating
4	3	12

Target Risk Rating

Impact	Likelihood	Risk Rating
4	2	8

Risk Updates

Date	Update
06/08/2025	No update
21/10/2025	Indicators suggest that likelihood of achieving net zero remains at similar level of risk, despite local progress. Green plan delivery progressing but at risk due to NHS structural changes.
08/12/2025	For directly-controllable emissions, carbon footprints have decreased 5ktCO2e since 2020 (11%), although with a small rise in 2024/5 compared to 2023/4 (driven by increasing building emissions; investigation as to the reason ongoing). Green Plan delivery in progress, with some delay occurring. Current assessment is that delayed activities will not have a significant impact on emissions.

System Actions

Action	Lead Org.	Lead	Due Date	Update
Deliver ICS Green Plan 2025-2032	BLMK	Tim Simmance	05/06/2026	N/A

System Controls

System Controls
Partner Green Plans and Sustainability Plans.
BLMK ICS Green Plan
Green Plan System Leadership Group Monitoring Plans

Accurate as of: 30/01/2026 10:10