



Agenda Item No:	8

Report to:	Humber and North Yorkshire Integrated Care Board
Date of Meeting:	9 July 2025
Subject:	Board Assurance Framework
Director Sponsor:	Jayne Adamson
	Deputy Chief Executive / Executive Director of People
Author:	Sasha Sencier, Head of Governance and Compliance
	Contributions by ICB Risk Leads
STATUS OF THE R	EPORT:
Approve Discus	Assurance Information A Regulatory Requirement

This paper presents the updated Board Assurance Framework (BAF). It aims to provide the ICB Board Members with assurance that the key risks, agreed by the Board, relating to the delivery of the ICB's Strategic Objectives are being managed appropriately.

Based on the Board's recommendation in April to revise the BAF, it has been updated to reflect the Strategic Objectives approved by the Board for 2025/26. Minor adjustments have been made to the domains to ensure better alignment with the identified risks. The risks now correspond to the new strategic objectives. Additionally, the Executive Committee reviewed the BAF prior to the Board meeting and is recommending approval of the revised version.

This report also includes updates to existing risks, identifies those closed for 2024/25, and highlights new risks pertinent to 2025/26.

A snapshot of the active risks is detailed in **Section 2** of this report. Key areas for attention by the Board are detailed in **Section 3** of the report. The BAF can be found in full at **Appendix A**.

RECOMMENDATIONS:

Members are asked to:

- Review and approve the BAF that has been recast against the ICBs new Strategic Objectives for 2025/26.
- Approve new risks recommended to be included on the BAF.
- Approve the closure of risks as recommended by the relevant Committee.

ICB STRATEGIC OBJECTIVE

Leading for Excellence	\boxtimes
Leading for Prevention	\boxtimes
Leading for Sustainability	\boxtimes
Voice at the Heart	\boxtimes

IMPLICATIONS

Finance	Risks A3 / A4 (2025/26 financial resource) and A5 / A6 (medium term financial
	sustainability) relates specifically to risks associated with the maintenance of
	financial control. The current assessment of the risks, together with their mitigations,

	associated with this are set out in the BAF. Financial implications associated with other risks would be set out on a case-by-case basis.
Quality	Risk A1 (patient safety) and C4 (patient and public engagement) refer specifically to quality impacts should the threats relating to clinical quality, safety and patient experience not be adequately mitigated for. The current controls and assurances in place are set out within the BAF.
HR	Risks B1 (ICB transition) and B2 (workforce availability & transformation) sets out the risks in the event of not delivering the ICB People Plan, together with the controls and mitigations in place to minimise these.
Legal / Regulatory	The maintenance of a comprehensive BAF provides an important means through which the compliance/regulatory risks to the ICB are mitigated.
Data Protection / IG	There are no direct data protection / IG implications relating to this paper, however data protection/IG controls and mitigations will be considered, as relevant, for all principal risks.
Health inequality / equality	Risk A2 (2025/26 delivery of operational plan) reference the negative impacts on health inequality/ equality if each risk is not adequately controlled however the existing mitigations are also set out within the document.
Conflict of Interest Aspects	No conflicts of interest are identified in relation to the BAF; however, it is noted that COIs will continue to be monitored on a case-by-case basis given the broad scope of the report's contents and the professional / organisational diversity of the Board membership.
Sustainability	Risks C2 (Estates), A3 / A4 (2025/26 financial resource), and A5 / A6 (medium term financial sustainability), relate specifically to risks associated with leading for sustainability.

ASSESSED RISK:

The ICB has a statutory and regulatory obligation to ensure that systems of control are in place, to minimise the impact of all types of risk. The BAF is an essential part of a robust and comprehensive internal control framework for the ICB.

MONITORING AND ASSURANCE:

The Executive Team will oversee the development of the wider risk management strategy and framework of which the BAF will be an element. The Audit Committee maintains independent oversight for the assurance of the BAF and ICB control framework.

ENGAGEMENT:

A wide variety of ICB subject matter specialists, senior officers and the ICB Board have been engaged in the development of the BAF.

REPORT EXEMPT FROM PUBLIC DISCLOSURE	No	\boxtimes	Yes	
If yes, please detail the specific grounds for exemption.				

1.0 Purpose

This paper presents the updated Board Assurance Framework (BAF). It aims to provide the ICB Board Members with assurance that the key risks, agreed by the Board, relating to the delivery of the ICB's Strategic Objectives are being managed appropriately.

Based on the Board's recommendation in April to revise the BAF, it has been updated to reflect the Strategic Objectives approved by the Board for 2025/26. Minor adjustments have been made to the domains to ensure better alignment with the identified risks. The risks now correspond to the new strategic objectives. Additionally, the Executive Group reviewed the BAF prior to the Board meeting and is recommending approval of the revised version.

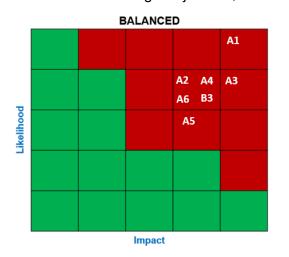
This report also includes updates to existing risks, identifies those closed for 2024/25, and highlights new risks pertinent to 2025/26.

A snapshot of the active risks is detailed in **Section 2** of this report. Key areas for attention by the Board are detailed in **Section 3** of the report. The BAF can be found in full at **Appendix A**

2.0 BAF Snapshot

There are currently thirteen active risks documented in the Board Assurance Framework (BAF). A new risk, identified as Risk B1, has been added to address the Integrated Care Board (ICB) transition.

The table and heat maps in **Figure 1** outline how each of the BAF risks are aligned to the ICB strategic objectives, risk domains and risk appetite.



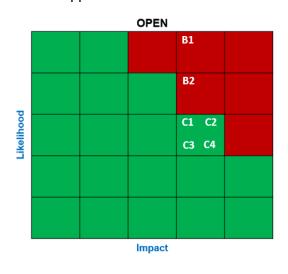


Figure 1: Heat Map and Risk Table (based on risk appetite)

Strategic Objective	Domain	Risk Appetite	Risks aligned to Strategic Objective
	Delivery Improvement	BALANCED (8)	A1 (patient safety)
	Delivery improvement	BALANCED (0)	A2 (2025/26 delivery of operational plan)
A: Drive delivery, productivity and improve performance			A3 (2025/26 financial resource - ICB)
A: Drive delivery, productivity and improve performance	Outcomes led resourcing	BALANCED (8)	A4 (2025/25 financial resource - ICS)
	Outcomes ted resourcing	BALANCED (8)	A5 (medium-term financial sustainability - ICB)
			A6 (medium-term financial sustainability - ICS)
B: Deliver a model for the future HNY ICB as a strategic	System workforce	OPEN (12)	B1 (ICB transition)
commissioner to deliver the strategic ambitions within	System workloide	OPEN (12)	B2 (workforce availability & transformation)
the new cost envelope	Organisational control mechanisms	BALANCED (8)	B3 (Governance and controls)
	Population Health	OPEN (12)	C1 (partnership vision and priorities)
C: Transform provision through the implementation of	Sustainable estates	OPEN (12)	C2 (Estates)
the design to support the 3 shifts	Data and Digital	OPEN (12)	C3 (data and digital maturity)
(Hospital to Community, Analogue to Digital, Treatment to Prevention)	Empowering Providers / Places / Neighbourhoods / Collaboratives	OPEN (12)	No risks currently aligned
	Transformative public engagement	OPEN (12)	C4 (patient and public engagement)

3.0 BAF Risks: Areas for Attention

Risk leads have reviewed all risks, as detailed in the full BAF at Appendix A. Risk scores remain unchanged since the Board's last review in April 2025.

The Board's review and approval are required for the opening of new risks or the closure of existing ones.

3.1 New Risks Recommended for Approval

The Finance, Performance, and Delivery Committee has submitted **three** risks for the Board's consideration and approval for inclusion in the BAF. These new risks have been identified for 2025/26, and there is a recommendation for the Board to approve the closure of the risks related to 2024/25 which are detailed at item 3.2.

NEW RISK: Risk A2

Strategic Obje	ctive	REF D	Doma	ain	1	I	Princip	alı	Risl	k															
A: Drive delive productivity a improve performance			Delive mpro			nt (2025/20 outcom sustaina risks the regiona	5 wi es f abili e sys I an	II ca or t ty; u sten d na	use financia he populatio undermine o n being subj ational proce	the ICBs avail instability I on; threaten onfidence in ect to escala esses that de bilities and p	eading to po individual or the ICB lead ted oversigh tract from g	oorer rganisation dership; nt from												
Risk Owner		urance	(Refore Mi			- (Refore Mi			/Refore Mi			/Refore Mi			/Refore M		/Refore M		Initial Risk Rati (Before Mitigation		_		Risk Appetite	Status (In / Out of	Movement from Last
				ı	L	Rat	inglxL	1	L	Rating I x L		Appetite)	Quarter												
Chief Operating	Finance,	Performa	ince								g		4												

4 5

BALANCED

5

& Delivery Committee

5

NEW RISK: Risk A3

Officer

Strategic Obje	ctive	REF	F Domain Principal Risk									
A: Drive delive productivity a improve performance	• •	А3	Outco Led Reso			2025/2 outcom sustaina the syst & natio	3: Failure to operate within the ICBs available resources for 2025/26 will cause financial instability leading to poorer outcomes for the population; threaten individual organisation sustainability; undermine confidence in ICB leadership; risks the system being subject to escalated oversight from region & national processes that detract from getting on with required responsibilities and priorities.					oorer rganisation hip; risks m regional
Risk Owner		urand	_			Risk Rating Mitigation)	1		rent Risk Mitigation)	Risk Appetite	Status (In / Out of	Movement from Last
	COII			1	L	Rating I x L	ı	L	Rating I x L	''	Appetite)	Quarter
ED Finance & Investment	Finance, & Deliver			5	5	25	5	4	20	8 BALANCED	OUT	\$

NEW RISK: Risk A4

Strategic Obje	ctive	REF	Dom	ain	ı	Princip	al I	Risk				
A: Drive delive productivity a improve performance	• •	A4	Outco Led Reso			2025/26 outcome organisa leadersh oversigh	wi es f atio nip; nt fi	II ca or t n su risk	erate withir use financia he populatio stainability; s the systen regional & r	ll instability on; threaten undermine n being subj national pro	leading to p individual confidence ect to escala cesses that	in the ated detract
Risk Owner		urand				Risk Rating Mitigation)	(rent Risk Mitigation)	Risk Appetite	Status (In / Out of	Movement from Last
	Con	imitt	ee	Ι	L	Rating I x L	ı	L	Rating I x L	прреше	Appetite)	Quarter
ED Finance & Investment	Finance, & Delive			5	5	25	5	4	20	8 BALANCED	оит	\Leftrightarrow

3.1.2 The Transition Committee has submitted **one** risk for the Board's consideration and approval for inclusion in the BAF. This risk has replaced a previous workforce risk, and there is a recommendation for the Board to approve the closure of the previous risk which is detailed at item 3.2.

Risk B1 has been submitted by the Transition Committee for the Board's consideration and approval for inclusion in the BAF:

Strategic Objective		R	EF	Domain	ľ	Prin	cipal Risk			
B: Deliver a model for HNY ICB as a strateg to deliver the strateg within the new cost	ic commissione gic ambitions	В	1	System Workford	e a	affo stafi mpa	ailure to desi rdable and e f structure w acts for staff /or reputatio	ffective ICB rill lead to ne and operati	operating m gative well onal, financ	odel and being ial, legal
							•			
Risk Owner	Assurance Committee			Risk Rating Mitigation)			rrent Risk r Mitigation)	Risk Appetite	Status (In / Out of	Movement from Last Quarter
		ı	L	Rating I x L	1	L	Rating I x L		Appetite)	Quarter
Executive Director of People (Transition Director)	Transition Committee	5	5	25	4	5	20	12 OPEN	ОИТ	NEW RISK

3.2 Risks Recommended for Closure

3.2.1 The Finance, Performance, and Delivery Committee has submitted **three risks** for the Board's closure. Please be advised that the reference system and strategic objectives pertain to the 2024/25 period.

Ref: A2 Leading for Excellence Deputy Chief Executive / Chief Operating Officer				STRATEGIC OBJECTIVE A:	
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Principal Risk: Failure to deliver the ICB Operating plan for 2024/25, and the associated 32 national objectives, may result in patients not being treated in a timely and appropriate manner.

Reason for Closure: Risk is in relation to 2024/25. A new risk has been opened for 2025/26.

Closure Recommended by: Finance, Performance & Delivery Committee

BAF Risk | STRATEGIC OBJECTIVE C: Executive Risk Owner:

Ref: C3a Leading for Sustainability Executive Director of Finance and Investment

Principal Risk: Failure to operate within the ICBs available resources for 2024/25 will cause financial instability leading to poorer outcomes for the population; threaten individual organisation sustainability; undermine confidence in the ICB leadership; risks the system being subject to escalated oversight from regional and national processes that detract from getting on with the required responsibilities and priorities.

Reason for Closure: Risk is in relation to 2024/25. A new risk has been opened for 2025/26.

Closure Recommended by: Finance, Performance & Delivery Committee

BAF Risk | STRATEGIC OBJECTIVE C: Executive Risk Owner:

Ref: C3b | Leading for Sustainability | Executive Director of Finance and Investment

Principal Risk: Failure to operate within the ICSs available resources for 2024/25 will cause financial instability leading to poorer outcomes for the population; threaten individual organisation sustainability; undermine confidence in the leadership; risks the system being subject to escalated oversight from regional and national processes that detract from getting on with the required responsibilities and priorities.

Reason for Closure: Risk is in relation to 2024/25. A new risk has been opened for 2025/26.

Closure Recommended by: Finance, Performance & Delivery Committee

3.2.2 The Transition Committee has submitted one risk for the Board's consideration for closure. Please be advised that the reference system and strategic objectives pertain to the 2024/25 period.

BAF Risk Ref: STRATEGIC OBJECTIVE C: Executive Risk Owner: Leading for Sustainability Executive Director of People

Principal Risk: Failure to recruit and retain staff of the right calibre and with the right values will prevent the ICB organisation delivering its core purposes. Lack of effective succession planning will reduce the leadership capability of the ICB and limit the impact and effectiveness of the organisation in leading the improvement and transformation of the HNY health and care system.

Reason for Closure: Risk closed due to new risk being established which has a focus on the transition to the new model ICB. The new risk has the same reference on the new system and is Risk Ref: B1.

Closure Recommended by: Transition Committee

4.0 Recommendations

Members are asked to:

Members are asked to:

- Review and approve the BAF that has been recast against the ICBs new Strategic Objectives for 2025/26.
- Approve new risks recommended to be included on the BAF.
- Approve the closure of risks as recommended by the relevant Committee.

END.