

## Integrated Care Board

<b>Date of meeting</b>	14 May 2026
<b>Title of paper</b>	Quarterly Report of the Board Assurance Framework
<b>Presented by</b>	Debra Atkinson, Company Secretary/Director of Corporate Governance
<b>Author</b>	Claire Moore, Head of Risk Assurance and Delivery
<b>Agenda item</b>	9
<b>Confidential</b>	No

### Executive summary

The ICB's strategic risk management arrangements are centred on the Board Assurance Framework (BAF), which provides a structured approach to identifying and managing the principal risks to the achievement of the ICB's strategic objectives.

The BAF sets out the key sources of assurance in supporting delivery of the ICB's core aims and objectives and plays an important role in informing the Chief Executive's Annual Governance Statement.

A facilitated risk workshop was held at the Board seminar on 16 April 2026. This report summarises the key outputs and associated actions, which will be progressed during Quarter 1 to support the review of the ICB's strategic objectives, the Board's risk appetite, and the risks included within the 2026/27 BAF.

The report also provides an update on the risks currently held within the BAF, including the year-end position as at Quarter 4 2025/26 (full BAF at Appendix 1). Where appropriate, updates include recommendations from Lead Executives regarding proposed reductions in risk scores or extensions to target dates, for Board approval. The Board is asked to note, however, that further changes to current risks may arise following the outcomes of the recent risk workshop and the progression of associated actions.

A summary is also provided of risks recorded on the ICB's Operational Risk Register (ORR) that meet the threshold for corporate oversight (risk score 20+), in line with the ICB's Risk Management Policy and reporting framework.

Finally, the report highlights the positive assurance received following Mersey Internal Audit Agency's (MIAA) Phase 2 review of the ICB's Assurance Framework.

### Public and Stakeholder Engagement

N/A

### Recommendations

The board is requested to:

- **Note** the contents of the report.

- **Note** the work underway following the facilitated risk management workshop held on 16 April 2026 to review and refresh the BAF, Strategic Objectives, and Board risk appetite, to be completed during Quarter 1 2026/27.
- **Note** the progress made during Quarter 4 2025/26 in managing risks held on the BAF.
- **Review and approve** the recommendations relating to the following risks as set out in Section 3.4 of the report, noting that further changes to current risks may arise from the actions outlined in Section 2.:
  - **BAF-001 (fully developed vision, strategy, intentions and implementation plans for strategic commissioning):** to reduce the risk to its target risk score (“12”) noting the work currently underway to review and refresh the SOs and associated risks.
  - **BAF-004 (deliver the agreed financial plan for 2025/26)** to reduce the risk to its target score (“10”) and close, with a new risk assessment undertaken for the 2026/27 financial year.
  - **BAF-005: (develop and maintain effective partnership and collaborative arrangements and implement an effective governance structure for partnership working):** To reduce the risk to its target score (“12”) but maintain oversight of the risk whilst strategic partnership arrangements are further developed.
  - **BAF-007: (effectively implement an affordable AACC framework and deliver the enhanced controls established through the Turnaround Plan):** To extend the target risk date to 30 June 2026 to enable actions relating to Turnaround Plan to be completed, and for there to be consideration of any residual risk which may have reduced.
- **Note** the risks held on the Operational Risk Register (corporate oversight) with a current risk score of 20 or above.
- **Note** the positive outcome of MIAA’s Phase 2 review of the ICB’s Assurance Framework.

Which Strategic Objective/s does the report relate to:		Tick		
SO1	Improve quality, including safety, clinical outcomes, and patient experience	✓		
SO2	To equalise opportunities and clinical outcomes across the area	✓		
SO3	Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential employees	✓		
SO4	Meet financial targets and deliver improved productivity	✓		
SO5	Meet national and locally determined performance standards and targets	✓		
SO6	To develop and implement ambitious, deliverable strategies	✓		
Implications				
	Yes	No	N/A	Comments
Associated risks	✓			As outlined in the report
Are associated risks detailed on the ICB Risk Register?	✓			As outlined in the report
Financial Implications			✓	

Where paper has been discussed (list other committees/forums that have discussed this paper)				
Meeting	Dates			Outcomes
Executive Committee	Monthly			Endorsed
Conflicts of interest associated with this report				
Not applicable				
Impact assessments				
	Yes	No	N/A	Comments
Quality impact assessment completed			✓	Not required
Equality impact assessment completed			✓	Not required
Data privacy impact assessment completed			✓	Not required

<b>Report authorised by:</b>	Debra Atkinson, Company Secretary/Director of Corporate Governance
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## **Integrated Care Board – 14 May 2026**

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### **Quarterly Report of the Board Assurance Framework**

#### **1. Introduction**

- 1.1 The purpose of the report is to present the board with the Quarter 4 update on risks held on the Board Assurance Framework (BAF) for review and approval. The report highlights progress made since the last update in January, to the management of risks identified as having the potential to impact on the achievement of the ICB's strategic objectives (SOs).
- 1.2 A facilitated risk management workshop was held at the board seminar on 16 April 2026. The key actions and outputs from the workshop are summarised within the report and these will be progressed during Quarter 1 2026/27. This work will inform the review of the ICB's strategic objectives (SOs), the board's risk appetite and the principal risks held on the Board Assurance Framework (BAF).
- 1.3 The report also includes a summary of risks held on the ICB's Operational Risk Register (ORR) that meet the threshold for corporate oversight, defined as a current risk score of 20 or above, in line with the ICB's Risk Management Policy.
- 1.4 Finally, the report sets out the positive assurance provided by Mersey Internal Audit Agency following its Phase 2 review of the ICB's Assurance Framework.

#### **2 Board Seminar: Risk Management Workshop**

- 2.1 A facilitated risk management workshop was held at the Board seminar on 16 April 2026. This supported a structured review of the ICB's SOs, the Board's risk appetite, and the principal risks within the BAF. The review was undertaken in the context of the ICB's transition to its new operating model and its role as a strategic commissioning organisation.
- 2.2 Strategic Objectives
- 2.3 The review of the current Strategic Objectives was paused in 2025/26 to enable greater clarity regarding the core role and functions of the ICB and the wider NHS. The Board held a focused discussion on proposed changes to the Strategic Objectives, which received broad support.
- 2.4 The outputs and actions arising will be progressed over May 2026 to define a revised set of five strategic objectives that reflect the ICB's statutory duties, strategy, and population needs, and which will guide decision-making, delivery, and accountability across the organisation.
- 2.5 Risk Appetite

- 2.6 The board undertook the annual review of its risk appetite<sup>1</sup> to assess the overall level of risk it feels acceptable to tolerate in the pursuit of its strategic objectives. Following review, the results were broadly comparable to 2025/26, and therefore no change in overall risk appetite across each of the risk domains.
- 2.7 The risk appetite statements will be refreshed and localised where relevant; a revised overarching risk appetite statement will be circulated to board members for their final approval prior to dissemination to staff and publication.
- 2.8 BAF
- 2.9 The BAF was approved by the Board in September 2025 and is currently centred around eight principal risks to the achievement of the ICB's strategic objectives.
- 2.10 During the workshop, Board members were asked to identify the three most significant risks currently facing the ICB. The responses were themed and ranked, as set out below, alongside alignment to current BAF risks:

**1. Transition to Model ICB Blueprint/sustainable workforce/capacity and capability**

- ✓ Aligns to BAF002 (Transition to Model ICB Blueprint) and BAF-003 (Sustainable workforce)

**2. Financial sustainability**

- ✓ Aligns to BAF-004 (Delivery of Financial Plan)

**3. Strategic Commissioning**

- ✓ Aligns to BAF-006 (Strategy, intentions and implementation plans for strategic commissioning)

- 2.11 The Board also considered risks that may no longer represent principal risks to the achievement of strategic objectives, as well as emerging risks that may require inclusion within the BAF.
- 2.12 It was also agreed that the BAF will be further refined to align with the revised committee governance structure and Executive portfolios.
- 2.13 All actions arising from the workshop will be progressed through the Executive Team during Quarter 1 2026/27.

### **3 Quarter 4 Review of BAF**

- 3.1 During the Quarter 4 reporting period, each Executive Lead has maintained oversight of the risks held within the BAF. Risks have been reviewed and updated by the relevant Lead Executives, with progress reported to the Executive Committee (ExCo) through risk exception and dashboard reports.

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<sup>1</sup> [LSC ICB Risk Appetite Statements 2025 26 FINAL.pdf](#)

- 3.2 The Board's assurance committees have also received quarterly risk management update reports for those risks aligned to their respective remits, including risks within the BAF and those meeting the threshold for corporate oversight.
- 3.3 The tables below provide a summary of activity against the eight principal risks currently held within the BAF, supported by concise narrative updates outlining progress since the last Board review in January 2026. Full details are set out in **Appendix 1**,
- 3.4 Where recommendations are made to amend current BAF risks, the Board is asked to note that further changes may arise as actions identified in Section 2 of this report are progressed.

<b>BAF-001: Strategic Commissioning</b>									
<b>If the ICB does not have a fully developed vision, strategy, intentions and implementation plans for strategic commissioning, then effective delivery of service transformation, the government ‘3 strategic shifts’ and achievement of financial sustainability will not be achieved.</b>									
Quarter/ Score 25/26	Q1	Q2	Q3	Q4	Target Score/ Date		Risk Appetite Statement	Linked ORR / Risk level.	
Likelihood	4	4	4	4	3	30 Jun 26	Cautious	Low	-
Consequence	4	4	4	4	4			Med	-
Risk Score	16	16	16	16	12 (Jun)			High	-
<b>Progress Made in Quarter 4 25/26:</b>									
The risk score (16) remained static during Q4 25/26, with a view to re-assess progress towards the target risk score (12) subject to the finalisation of the medium-term commissioning plan, 5-year strategy and the refresh of the Joint Forward Plan to enable the risk to be further mitigated. The ICB’s 5 Year Strategic Commissioning Plan (5YSCP) and commissioning intentions were formally ratified by the board in March; these describe how the ICB will use its role as a strategic commissioner and system leader to improve population health, reduce inequalities and secure sustainable health and care services across LSC. Throughout January – March engagement with staff and stakeholders has also taken place on the ICB’s operating model narrative, which was formally published in April 2026.									
<b>BAF-001: Recommendation:</b> to reduce the risk to its target risk score (“12”) noting the work currently underway to review and refresh the SOs and associated risks described in section 2 of the report.									

<b>BAF-002: Transition to model ICB Blueprint</b>									
<b>If the ICB does not transition effectively and safely to a strategic commissioning organisation aligned to the ICB model blueprint whilst meeting the national directed reduction in running and programme costs from 1 April 2026, then we will not have an organisation that is able to fulfil its statutory responsibilities within its running and programme costs.</b>									
Quarter/ Score 25/26	Q1	Q2	Q3	Q4	Target Score/ Date		Risk Appetite Statement	Linked ORR / Risk level	
Likelihood	5	5	5	4	4	30 Oct 26	Cautious	Low	-
Consequence	4	4	4	4	4			Med	-
Risk Score	20	20	20	16	16			12 (Q3)	High
<b>Progress Made in Quarter 4 25/26:</b>									
The Transition Programme Working Group, led by the Interim Chief People Officer and supported by a transitional planning framework was established and has met regularly throughout the reporting period, with exception reports provided to the ExCo and Transition Committee.									
All directorates have provided executive approved Business Impact Assessments (BIAs) to ensure risks identified to “business as usual” activities are managed appropriately through the transition process. Additional arrangements, including some short-term changes to senior									

leadership are in place to maintain team stability, and ensure staff remain supported during the transitional period. During Q1 26/27, the staff consultation process on the ICB's proposed operating model launched (20 April) and will run through to 4 June 2026. An all-staff briefing was held to provide an overview of the consultation process and further directorate-level meetings are currently underway with support from the communications team, the Executive team and HR. Initial feedback is demonstrating a good level of engagement with staff and some common themes emerging; these will be captured and shared with the ExCo and staff via the staff intranet.

**BAF-003: Sustainable Workforce**

**If the ICB fails to effectively support the workforce through change and develop an effective workforce structure, then the workforce capacity and/ or capability may not be sustainable to support delivery of the ICB's statutory duties, strategies and plans as outlined in the model ICB blueprint.**

Quarter/ Score 25/26	Q1	Q2	Q3	Q4	Target Score/ Date	Risk Appetite Statement	Linked ORR/ Risk level		
Likelihood	4	4	4	4	4	30 Jun 26	Open – Seek	Low	-
Consequence	4	4	4	4	4			Med	-
Risk Score	16	16	16	16	16 (end Q1)			High	-

**Progress Made in Quarter 4 25/26:**

The ICB's programme of organisational development support, including leadership development, continued during the reporting period. A leadership meeting was held with the ICB's Chief Executive and Executive Team on 9 March; this enabled collaborative discussions on the development of the ICB's operating model including plans for strengthening the ICB's role as a strategic commissioner through working together with staff to manage the next steps of the transition and leading change in ways supportive of staff and their teams.

In late February, the ICB's Chair and Chief Executive visited the University of Lancashire and discussed strategic priorities, wider sector challenges and the opportunities and engagement between the university and the ICB with a tour of the schools of Medicine and Dentistry and Nursing and Midwifery. During February the board also held a development session focused on Equality, Diversity and Inclusion (EDI); this included a focus on continuing to build a culture in which all staff and communities feel respected, safe and valued.

Further to the update provided to the board in January, as the ICB progresses towards its new target operating model as a strategic commissioning organisation, emerging risks in relation to specific ICB functions and wider workforce capacity are reported under BAF-002 (transition).

**BAF-004: Sustainable Finances**

**If the ICB fails to deliver the agreed financial plan for 2025/26, then it will not achieve its statutory financial duties**

Quarter/ Score 25/26	Q1	Q2	Q3	Q4	Target Score/ Date	Risk Appetite	Linked ORR/
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							Statement	Risk level
Likelihood	4	4	4	4	2	2	Year end	Low -
Consequence	5	5	5	5	5	5		Med -
Risk Score	20	20	20	20	10	10		High Y

**Progress Made in Quarter 4 25/26:**

As reported to the Finance and Contracting Committee, in February the ICB continued to report a balanced position YTD and was forecasting a £10.1m surplus at the end of the financial year, therefore reducing the likelihood of failing to deliver its financial plan in 2025/26. The ICB continued to review its forecast outturn position with regular reports to finance committee, with reporting continuing through weekly IMT meetings on WRP delivery. IAG meetings remain in place during Q4 and further senior 'improvement' support has been secured in February to help deliver 25/26 WRP and planning for 26/27.

Further to the final accounts submission (subject to audit) the Chief Finance Officer is now assured that actions to mitigate the likelihood of the risk materialising have been implemented.

**BAF-004 Recommendation: To reduce the risk to its target score ("10") and close, with a new risk assessment undertaken for the 2026/27 financial year.**

**BAF-005: Achieving transformation through effective partnerships and collaborative working**

**If the ICB does not develop and maintain effective partnership and collaborative arrangements and implement an effective governance structure for partnership working, then collaborative working and shared decision making may not be enabled, and we will fail to achieve the transformation required to deliver improved health outcomes for our local population**

Quarter/ Score 25/26	Q1	Q2	Q3	Q4	Target Score/ Date	Risk Appetite Statement	Linked ORR / Risk level
Likelihood	4	4	4	4	3	31 Mar 2026	Low -
Consequence	4	4	4	4	4		Med -
Risk Score	16	16	16	16	12		High -

**Progress Made in Quarter 4 25/26:**

In early March, the regular engagement session with MPs from Lancashire and South Cumbria was held; as well as other constituent issues, the discussion included Neighbourhood Health Models including progress towards establishing neighbourhood health centres. In February the ICB hosted an engagement session with colleagues from our place-based partnerships to discuss the development of the ICB's operating model and approach to transition. More than 80 colleagues attended the session with positive dialogue around developing our partnerships with Local Authorities, NHS, education, VCFSE, business and community partners.

Local partners were integral to the development of the ICB's 5 Year Strategic Plan (approved by the ICB board in March) including the Provider Collaborative and VCFSE sector organisations. The strategic plan was presented to the Integrated Care Partnership in March and will be further taken through the respective Health and Wellbeing Boards; this will inform how our strategic partnerships are further developed to support successful delivery against the plan.

Following a nominations and appointment process, the board agreed its revised membership with additional partner member roles on the board to further strengthen sectorial expertise and enhance board decision-making.

**BAF-005 Recommendation: To reduce the risk to its target score (“12”) but maintain oversight of the risk whilst strategic partnership arrangements are further developed.**

**BAF-006: Quality, regulation and compliance**

If the ICB does not have a robust framework to effectively monitor and identify quality issues and have effective mechanisms in place for early identification and escalation (e.g. contract monitoring, or clinical governance frameworks), then we may not effectively recognise and respond to fundamental quality and regulatory standards in local care provision, and our duty of continued quality improvement.

Quarter/ Score 25/26	Q1	Q2	Q3	Q4	Target Score/ Date	Risk Appetite Statement	Linked ORR /Risk level
Likelihood	4	4	4	4	3	30 Jun 26	Cautious
Consequence	4	4	4	4	4		
Risk Score	16	16	16	16 ↓ 12	12 (end Q1)		

**Progress Made in Quarter 4 25/26:**

The ICB’s quality frameworks and systems have matured, and further actions taken which provide effective mechanisms for identifying and escalating quality issues, therefore the Executive Committee agreed that the risk likelihood score could reduce therefore bringing the overall risk score to “12”. The target risk score was also reviewed and this was increased from “8” to “12” to reflect a realistic assessment of the control mechanisms available in the mitigation of the risk.

Whilst the risk has now been mitigated to the target risk score, the target risk score is outside of the board’s agreed risk appetite for quality (which is 10). This will be fully reviewed as part of the work following the board’s risk workshop.

**BAF-007: All-Age Continuing Care**

If we do not effectively implement an affordable AACC framework and deliver the enhanced controls established through the Turnaround Plan, then the ICB will not deliver its financial plan or achieve optimal efficiency through the Waste Reduction Programme savings for 2025/26 whilst maintaining quality of service.

Quarter/ Score 25/26	Q1	Q2	Q3	Q4	Target Score/ Date	Risk Appetite Statement	Linked ORR / Risk level
Likelihood	4	4	4	4	4	31-Mar 26-30 Jun 26	Cautious
Consequence	4	4	4	4	3		
Risk Score	16	16	16	16	12 (end Q1)		

**Progress Made in Quarter 4 25/26:**

The Finance and Contracting Committee in April 2026 received updates on progress including sustained improvement in CHC timeliness and elimination of long waits, maintaining compliance with national standards, WRP governance strengthened with enhanced financial validation and

oversight, agency capacity mobilised to accelerate high-impact reviews and continued progress across the four-priority turnaround workstreams. The committee were alerted that the M12 financial performance report indicates that WRP delivery is £44.3m against a plan of £60.2m. This is an underachievement of £15.9m.

The reported year end position is an overspend of £97.2m. This is comprised of reconciliation and system resolution expenditure for Transforming Care (£28.6m) and historical LD pool deficit invoices (£20.6m); Prior Year costs (£22.6m) which relate to an under accrual; Provider invoices (£5.8m); and overspend across FNC, Mental Health and retrospective reviews.

**BAF-007 Recommendation: To extend the target risk date to 30 June 2026 to enable actions relating to Turnaround Plan to be completed, and for there to be consideration of any residual risk which may have reduced.**

**BAF-008: Responsive and Resilient Health Care Services**

**If the ICB does not commission clinically appropriate responsive and resilient health care services, aligned to a system wide clinical strategy, then we will not improve access, clinical outcomes and patient safety, and stabilise fragile services.**

Quarter/ Score 25/26	Q1	Q2	Q3	Q4	Target Score/ Date		Risk Appetite Statement	Linked ORR / Risk level	
Likelihood	4	4	4	16	3	30 Jun 2026	Cautious	Low	-
Consequence	4	4	4	16	4			Med	-
Risk Score	16	16	16	16	12 (end Q1)			High	-

**Progress Made in Quarter 4 25/26:**

During the reporting period a task and finish steering group has continued to support the development of the ICB’s clinical strategy. ICB colleagues and wider partners have been engaged with to connect with the work undertaken to date, support the review of the draft strategy and contribute to its further development.

The clinical strategy is now approaching final completion and will be presented to the board for approval in June 2026. Further engagement and testing of the principles contained within the clinical has been undertaken throughout Q4; the testing included the applicability of the principles contained within the clinical strategy to the strategic commissioning cycle, and the development of the ICB’s commissioning intentions. The outputs of this work will be used to inform the final draft of the strategy to ensure consistency across the ICB’s wider strategies and commissioning plans.

Alongside the 5 Year Strategic Plan and commissioning intentions which were approved by the board in March, the board received three “Case for Change” documents in accordance with the ICB’s Service Change Policy and NHS service change guidance.

**4. Operational Risks (Corporate Oversight) rated “20” or above**

4.1. Risks which are held on the ICB’s ORR (corporate oversight) are those which have been assessed as having the potential to impact on the delivery of the ICB’s plans and priorities and are identified through the day-to-day running of the organisation.

- 4.2. There are currently 16 risks held on the ICB’s ORR of which four risks are scored at “20” or above therefore, in accordance with the ICB’s risk management policy are included within this quarterly report to the board.
- 4.3. The four risks (summarised below) are aligned to **SO1** (Improve safety, quality, clinical outcomes); assurance of their management is reported to the ICB’s Quality and Outcomes Committee on a quarterly basis. The target risks scores are all within the board’s agreed risk appetite (cautious) and risk tolerance (4-10) thresholds.
- 4.4. There is one risk\* highlighted below where the target risk score has not met the anticipated timescales, therefore a request for extension has been submitted for approval by the lead executive.

**ORR Risks scored “20” or above**

Risk ID	SO	Summary Risk Description	Current Risk Score	Target Risk Score	Target Risk Score Date	Risk appetite /tolerance
ICB026	SO1	ICB ability to meet its statutory SEND responsibilities	20	8	31.8.26	4-10 (target score within range).
ICB029	SO1	Neurodevelopment pathways across Lancashire and South Cumbria	20	8	31.12.26	
ICB037	SO1	Ability of the ICB to effectively identify and respond to quality and safety concerns for Primary Care	20	8	31.12.26	
ICB038*	SO1	Court of Protection Deprivation of Liberty (CoPDOL) applications not completed in accordance with expected timeframes and court orders*	20	9	1.4.26*	

## 5. Mersey Internal Audit Agency - Review of Assurance Framework Phase 2

- 5.1. In February 2026 Mersey Internal Audit Agency (MIAA) completed the second phase of their annual review of the ICB’s Assurance Framework. The findings of the review were positive reported as “standards met with no recommendations”, and that:
- The ICB’s Assurance Framework is structured to meet the NHS requirements of assurance best practice model.
  - The organisation has considered its risk appetite, and the risk appetite is used to form the management of the AF.
  - The AF is visibly used by the organisation.
  - The AF clearly reflects the risks discussed by the board

## 6. Next steps Quarter 1 2026/27

- 6.1 The actions arising from the facilitated risk management workshop, as summarised in section 2, will be progressed through the Executive team during Quarter 1 2026/27. This will inform the revision of the ICB's strategic objectives and the principal risks included within the 2026/27 BAF.
- 6.2 The board's risk appetite statements will be further localised and circulated to the board for approval prior to the dissemination to staff and publication on the ICB's website.

## 7. Recommendations

7.1 The board is requested to:

- **Note** the contents of the report.
- **Note** the work underway following the facilitated risk management workshop held on 16 April 2026 to review and refresh the BAF, Strategic Objectives, and Board risk appetite, to be completed during Quarter 1 2026/27.
- **Note** the progress made during Quarter 4 2025/26 in managing risks held on the BAF.
- **Review and approve** the recommendations relating to the following risks as set out in Section 3.4 of the report, noting that further changes to current risks may arise from the actions outlined in Section 2.:
  - **BAF-001 (fully developed vision, strategy, intentions and implementation plans for strategic commissioning):** to reduce the risk to its target risk score ("12") noting the work currently underway to review and refresh the SOs and associated risks.
  - **BAF-004 (deliver the agreed financial plan for 2025/26)** to reduce the risk to its target score ("10") and close, with a new risk assessment undertaken for the 2026/27 financial year.
  - **BAF-005: (develop and maintain effective partnership and collaborative arrangements and implement an effective governance structure for partnership working):** To reduce the risk to its target score ("12") but maintain oversight of the risk whilst strategic partnership arrangements are further developed.
  - **BAF-007: (effectively implement an affordable AACC framework and deliver the enhanced controls established through the Turnaround Plan):** To extend the target risk date to 30 June 2026 to enable actions relating to Turnaround Plan to be completed, and for there to be consideration of any residual risk which may have reduced.
- **Note** the risks held on the Operational Risk Register (corporate oversight) with a current risk score of 20 or above.
- **Note** the positive outcome of MIAA's Phase 2 review of the ICB's Assurance Framework.

**Debra Atkinson**

**Company Secretary/Director of Corporate Governance**

**Appendix 1**

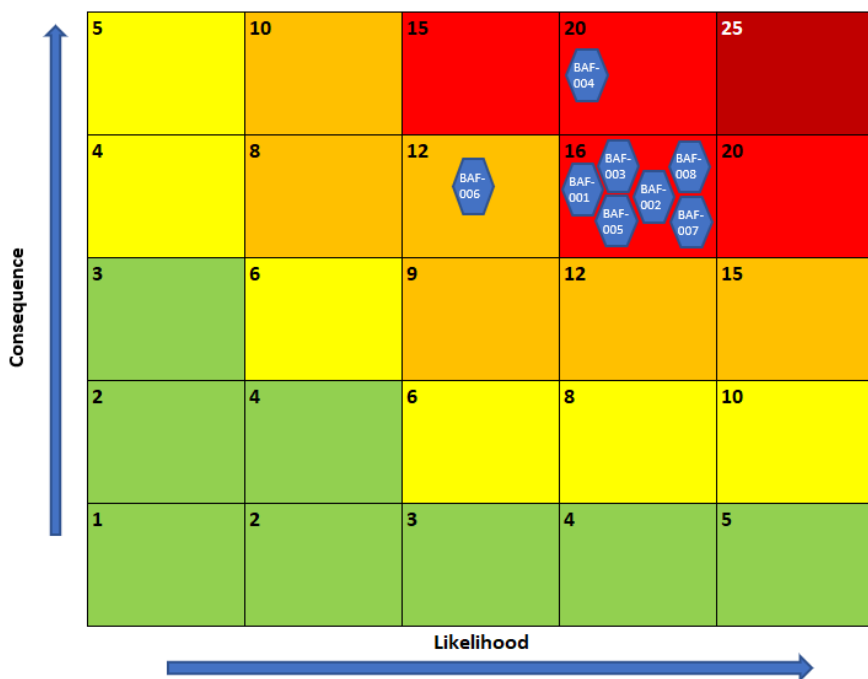
**NHS Lancashire and South Cumbria Risk Management Dashboard and Full BAF risk entries**

<b>SO1</b>	Improve quality, including safety, clinical outcomes and patient experience	<b>SO4</b>	Meet financial targets and deliver improved productivity
<b>SO2</b>	To equalise opportunities and clinical outcomes across the area	<b>SO5</b>	Meet national and locally determined performance standards and targets
<b>SO3</b>	Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential employees	<b>SO6</b>	To develop and implement ambitious, deliverable strategies

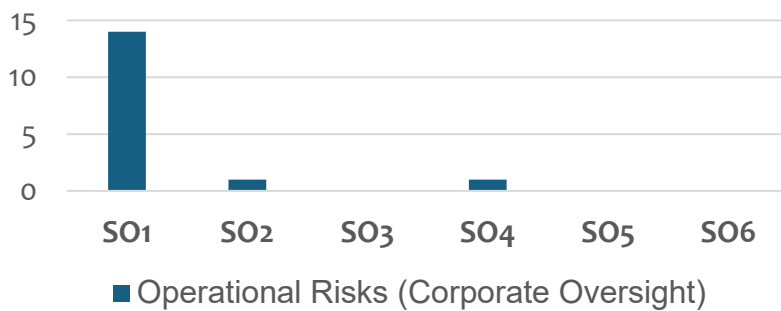
The ICB Board’s **Risk Appetite Statements** 2025/26 describe “the amount and type of risk the board is prepared to pursue, retain or take in the pursuit of its strategic objectives”.

[LSC ICB Risk Appetite Statements 2025 26 FINAL.pdf](#)

**BAF Risks Heat Map**



### Alignment of Operational Risks (Corporate Oversight) with Strategic Objectives



There are 16 risks currently held on the ICB's Operational Risk Register that meet the threshold for corporate oversight (scoring 15 or above). These are aligned to the ICB's SOs as demonstrated in diagram 1.