

BAF Heat Map						
Impact	5				BAF0003 BAF0006	
	4				BAF0002 BAF0004 BAF0007 BAF0009 BAF0011 BAF0013 BAF0014 BAF0015	BAF0001 BAF0005 BAF0008
	3			BAF0010 BAF0012		
	2					
	1					
		1	2	3	4	5
	Likelihood					


Accurate as of: 18/06/2025 15:56

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

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.

Action	Lead Org.	Lead	Due Date	Update
Trust transformation plans to increase productivity using GIRFT data	ICB	Michael Ramsden	31/03/2026	No update
Delivery of national and local recovery priorities.	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	Hema Sutton	30/06/2025	No update
Review of Diagnostic Capacity	ICB	Matthew Rogers	31/07/2025	Demand and capacity analysis being undertaken by AGEM. Some data quality issues need resolving but the outputs will help inform if the system has the capacity needed for the BLMK population.
Surgical Hubs Development	ICB	Michael Ramsden	31/08/2025	Seed funding awarded. Options appraisal being developed which will be considered nationally as options likely to exceed £25M envelope.

Action	Lead Org.	Lead	Due Date	Update
NHSE led Tier 1 Process in MKUH.	ICB	Michael Ramsden	30/06/2025	Ongoing action and unlikely to cease until MKH eliminate all waits beyond 65w and improve their RTT performance

Risk Owner	Risk Description		
Martha Roberts	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 Lead			
Bethan Billington			
Governance Board(s)			
Finance & Investment Committee/Quality & Performance Committee			
Date of Last Review			
01/04/25			
Risk Movement			
 Reduced			
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
07/08/2023	<p>- 50k Nurse Programme: Nurse supply has improved Nov 2022 to Feb 2023 has seen a month on month increase and above programme trajectory, with March 2023 showing an above trajectory of 1.3%. This is driven mainly by international recruitment (13.3% above trajectory).</p> <p>- International Nurse Recruitment: Forecasting to March 2024, BLMK (Acute Trusts) will have recruited 709 IR. This is likely to be approx. 750 when including Community and Mental Health Trusts</p> <p>- Retention: Workstreams have been established as Flexible Working, Onboarding & Early careers and Career Development Mid to Late Careers.</p> <p>- Legacy Mentoring roles: Eight roles in place for Nursing, Midwifery and AHP (Physio) in Acute and Primary Care. Regional strategy developed from BLMK results for attraction and recruitment into these legacy roles. Legacy Paramedic with EAEST has commenced (first nationally), recruiting for Legacy Therapies post at BHFT. Discussions started re Legacy roles in Social Care, Community and Mental Health.</p> <p>- Late Career Nurse programme: HEE funding to Primary Care training hub to support Mid to late career programme more specifically targeting General Practice Nurses. This has also been offered across our system (8 places) to mid-late career staff. Programme started 22nd March 2023 it will run for 12 months. In discussion to run a 2nd Cohort in 2024 which will be extended system wide</p> <p>- HCSW Recruitment and Retention: Digital campaign is now live - landing page including Bedfordshire Hospitals and MKU/H hyperlinks advertising band 2 HCSW vacant roles. Digital Posters and Billboards across BLMK and leaflet advertising roles distributed in likely postcoded areas with digital poverty.</p> <p>- HCSW Rotational Apprenticeships: Final draft of 'advert' for all employing partners agreed; Partners' Apprentice Job Descriptions will be used. ELFT will now be employing a HCSW Apprentice for their community services in Bedfordshire. Draft rotation schedule shared with partners for comment. Lessons learned captured. Agreed to hold two separate recruitment days in North & South Bedfordshire.</p>
07/11/2023	<p>The team have developed an inclusive recruitment toolkit that will be rolled out within the ICB from Dec 2023</p> <p>The 50k Nursing programme is due to complete and BLMK has met its target</p> <p>The ICS is working with Breaking Boundaries Innovators to develop supported employment pathways</p> <p>The ICB has signed up to the Lived Experience Charter and the ICS is supporting the care leavers covenant to support our local populations in to employment</p>
04/03/2024	<p>Focus groups have been undertaken with frontline staff to know how to support and working with NHS England on the education allocations to meet the requirements. There is a productivity and efficiency group, the purpose of which is to strengthen substantive workforce and reduce reliance on contingent workforce. Safer staffing lead has been extended for twelve months to look at community and mental health staff levels.</p>
23/08/2024	<p>The turnover and vacancy rate are consistently decreasing, suggesting the risk is not materialising. As part of operational planning, there are restrictions on growth</p>
07/10/2024	<p>Continue to see reduced turnover, vacancies and sickness. Planned growth above workforce plan</p>
16/01/2025	<p>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.</p>
01/04/2025	<p>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.</p>
27/05/2025	<p>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.</p>

Risk Owner	Risk Description	
Georgie Brown	As a result of multiple and interconnected factors across the BLMK system, including:	
Risk Lead	<ul style="list-style-type: none"> - 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. 	
Michael Ramsden	<ul style="list-style-type: none"> - Lack of effective and coordinated response to prevent use of emergency health and social care services (admission avoidance) 	
Governance Board(s)	<ul style="list-style-type: none"> - 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 	
Quality and Performance Committee	<ul style="list-style-type: none"> - 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 	
Date of Last Review		
29/05/2025	There is a risk of:	
Risk Movement	<ul style="list-style-type: none"> - 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. 	
➔ 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	4	12
<p>Resulting in:</p> <ul style="list-style-type: none"> - 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. 		

Risk Updates	
Date	Update
20/07/2023	Winter plan being managed by MK together and Bedfordshire Care Alliance, to be presented at the ICB September Board and deep dive review completed by Quality and Performance Committee in August. Work is underway with NHSE Regional Team to reconfigure all partners performance and delivery group to oversee PUEC recovery metrics.
16/04/2024	The SCC team are currently reviewing system risks with our partners in MK Together and BCA
21/05/2024	2 new actions added (unscheduled care Hub and Decompression in Bedfordshire)
16/07/2024	Actions and controls remain but new actions added
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

Key Risk Indicators
<p>Community Referrals</p> <p>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</p>
<p>Non-Inpatient Ward Accommodation Usage</p> <p>Increased number of consecutive days exceeding a pre-defined threshold of patients bedded overnight in non-inpatient ward accommodation</p>
<p>Ambulance Cat 1 / Cat 2 Response</p> <p>Increase % in the length of response times for cat 1 and 2, resulting in delays in accessing appropriate pathways, over a given period</p>
<p>Rolling Discharge Deficit</p> <p>Increased backlog of patients waiting for discharge, indicating inefficiencies in patient flow and hospital bed utilisation.</p> <p>(i.e. if BHT need 215 P1-P3 discharges a week, and in week one deliver 210, week 2 deliver 200 and week 3 deliver 200, the rolling discharge deficit is 15.)</p>
<p>Ambulance Handover Time over 15 Minutes</p> <p>Increased % of ambulance handovers exceeding 15 minutes at Emergency Departments (EDs) over a 7-day rolling average.</p>
<p>Call Abandonment Rate</p> <p>Increased % of calls to the NHS 111 service and primary care that are abandoned.</p>
<p>MH Discharge Delays</p> <p>Increased number of CYP and adults requiring a MH discharge in Acute Trust or a discharge from inpatient MH Ward.</p>
<p>Critical System Safety thresholds occur: i.e. 8hr + ambulance offloads</p>

System Controls
BLMK Primary Care access programme (including pharmacy first) reducing burden on UEC services.
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
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.
SOs 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
SDEC Improvement
Operational delivery governance, including UEC and development of ICB operating framework, supporting the identification of and resolution of pressures reviewed for assurance.
Capacity of the winter care plan extended
Enhanced KRI Monitoring
Optimised Patient Transport Services to facilitate swifter discharge
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)
UCCH steering group with ICB, UCR teams and EFAST continues development of unscheduled care hub and associated admission avoidance pathways.
Forecasting Tool provides early warning signal of any surge in demand

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	Michael Ramsden	31/07/2025	A system wide transformation plan has been collated with the support of the STT. MK ISF and BCA are now reviewing the transformation plan and agreeing the priorities. An addition, the ICB will begin to lead on a admission avoidance programme and the MK ISF/BCA focusing on flow. A system wide winter learning event in May will ensure plans align to the operational planning assumptions made by Trusts
Review of Discharge to Assess Beds	ICB	Kaysie Conroy	27/06/2025	A D2A/rehab bed occupancy report has been written and proposes to close 13 due to under utilisation of community beds. This is being presented to system leadership on 27/05/25 for sign off.
UEC dynamic risk assessment and introduction of KRIs	ICB	Tammy Harding-Edwards	30/06/2025	Final review of actions and controls to be completed in upcoming UEC meeting

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. (EAST)
Unscheduled Care Hub (UCCH) in Bedfordshire
Senior leadership Group stood up for weekly/daily briefing and action (BBC)

Bedfordshire Actions				
Action	Lead Org.	Lead	Due Date	Update
Development of a 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	EEASt			
Completing regular deep dives looking at rejected calls from the 999 stack and reviewing rejections	EEASt			
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			

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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

System Actions				
Action	Lead Org.	Lead	Due Date	Update
Improving Health Equity Transformation Priority Programme (response to Denny including Women's Health)	ICB	Sarah Stanley	28/08/2025	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.
Dynamic Risk Assessment to identify whole system risk, actions and controls and review to further mitigate action	ICB	James Bielby	30/06/2025	No Update

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System Controls
Operational performance management process in place taking account of responses to operational pressures
The ICB Operational Group - manages immediate operational issues
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

System Actions				
Action	Lead Org.	Lead	Due Date	Update
Review transformation priorities as part of 25/26 planning to target resources and effort on the most beneficial transformation schemes and pause / re-schedule lower priority schemes to reduce the extent of change the system is seeking to deliver in parallel and increase the chances of success.	ICB	Matt Hollex	30/06/2025	A proposal for running a prioritisation/rationalisation session is being developed
Agree charters for the three system transformation priorities	ICB	Tara Dear	27/06/2025	Action complete for Children's Complex Care and End of Life. Admissions Avoidance and Discharge is in development following the system workshop on 16th May 2025. Adult Complex Care will be developed following the recommendation report from the BLMK review. All of which are due to be presented to 30th June ICB Board which will then close this action
Agree project resource for three system transformation priorities and four enablers	ICB	Tara Dear	30/06/2025	New action
Establish governance and progress and benefits realisation reporting for transformation priorities	ICB	Tara Dear	31/05/2025	Complete

Risk Owner	Risk Description	
Dean Westcott	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 Lead		
Stephen Makin		
Governance Board(s)		
Finance & Investment Committee		
Date of Last Review		
28/03/2025		
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 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.

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 (IOVG). 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 within 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
Development and implementation of system transformation, improvement and efficiency programmes across and between ICS partners as part of 25/26 operational planning and Joint Forward Plan refresh.	ICB	Tara Dear	28/05/2025	Closed: This has now become a control and is monitored/ reviewed through the governance cycle with Board and committees for assurance.
System Productivity Dashboard being developed to support targeted action on productivity	ICB	Frances Barnes	31/03/2025	Closed: Action complete

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

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
Environmental Sustainability ICS Leadership Group

System Actions				
Action	Lead Org.	Lead	Due Date	Update
Implement recommendations from Green Plan Health Impact assessment.	ICB	Tim Simmance	27/06/2025	No update
Refresh of Green Plan following sustainability seminar in November 2024.	ICB	Tim Simmance	31/07/2025	No update

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

System Actions				
Action	Lead Org.	Lead	Due Date	Update
Development of BLMK Infrastructure Strategy	ICB	Nikki Barnes	30/09/2025	No update

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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	Nicky Poulain	31/01/2040	Action in progress

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System Controls
Place link directors have 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
Develop 25/26 Operational Plan and Joint Forward Plan refresh in partnership, being transparent about difficult decisions and the impact on the population and partners, using existing governance structures	ICB	Dominic Woodward-Lebihan	18/06/2025	Closed: 25/26 operational plan approved by ICB board and partner boards

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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

System Controls

System Actions

Commented [JB1]: @HARDING-EDWARDS, Tammy (NHS BEDFORDSHIRE, LUTON AND MILTON KEYNES ICB - M114X)

Commented [TH2R1]: It's a complete action so can be

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.

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
ICB Stakeholder Management Plans developed for transformation programmes to support effective collaboration and information sharing

System Actions				
Action	Lead Org.	Lead	Due Date	Update
OD Initiatives to reduce reliance on key individual leaders such as Leading Beyond Boundaries	ICB	Bethan Billington	30/06/2025	Launch of springboard leadership programme with 2 cohorts planned for 2025, procurement for Ready Now leadership programme underway.
Develop a Place Maturity Framework based on learning from independent reviews of Milton Keynes and Bedfordshire	ICB	Michelle Evans-Riches	30/09/2025	No update – response wont be available until the end of September 2025
Clarify relationships, interdependencies, responsibilities and accountabilities for initiatives in the Portfolio Tool to remove duplication and improve clarity	ICB	Matt Hollex	30/06/2025	Creation of the May version of the Portfolio Report has started. The May version of the report will continue to support the identification of interdependencies and will connect people up
Undertake governance review for all ICB committees and partnership arrangements	ICB	Michelle Evans-Riches	27/06/2025	Due to be reported to Board on 27 June 2025. Response to review won't be available until end of September.
Strengthen Performance Reporting Processes to include outcome measures and implementation of the data pyramid.	ICB	Dominic Woodward-Lebihan	13/07/2025	The May update of the Portfolio report is complete and continues to support the identification of interdependencies and will connect people across the system

Bedfordshire Actions				
Action	Lead Org.	Lead	Due Date	Update
Commission independent review of Bedfordshire Care Alliance and the three places in Bedfordshire	ICB	Georgie Brown	20/04/2025	The Place feedback session(s) are being planned and the BCA feedback workshop is taking place on 20th March. Update pending.

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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 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

Accurate as of: 18/06/2025 15:56

Risk Owner	Risk Description	
Sarah Stanley	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:	
Risk Lead	<ul style="list-style-type: none"> 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 	
Felitta Burney-Nicol	<ul style="list-style-type: none"> Insufficient number of qualified, competent, skilled, and experienced midwives to ensure safe care. equipment checks are not performed and documented as per Trust policy. 	
Governance Board(s)		
Audit & Risk Assurance Committee/Quality & Performance Committee		
Date of Last Review	<p>There is a risk of</p> <ul style="list-style-type: none"> Increased incidence of avoidable harm Higher than expected mortality. Patient dissatisfaction 	
06/03/2025		
Risk Movement	<p>Resulting in</p> <ul style="list-style-type: none"> 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 	
➔ 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

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.

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 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 police 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.

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	30/09/2025	No update
Health Innovation East to support BHFT with one day per week to effectively implement NEWTT2 and MEWS across the whole trust not just maternity.	ICB	Felitta Burney-Nicol	24/07/2025	Support has been agreed and the additional resource has started working with the Trust 1 day a week. This arrangement (7.5) is to be formally agreed with the Trust, in terms of formal hours.
Tier 3 weight management 85 women with BMI over 40 have been referred, as a pilot. Will take 3 years for pilot	ICB	Sanhita Chakrabarti	31/08/2025	Ongoing - pilot will take 3 years
ICB to complete MNVP voice and equal partner recruitment. Agree work plans (date to be confirmed). MNVP to be full members of maternity improvement board.	ICB	Komal Gorania	31/05/2025	Complete: Control added. All posts recruited and staff in place from April. The what plan has been formulated and is being finalised with the Trust.
Establish a daily LMNS Mutual Aid Meeting for monitoring purposes.	ICB	Felitta Burney-Nicol	24/07/2025	The TOR for engagement have been completed and the KRI's have been agreed. These KRI will be established with Shredw to support dynamic risk assessment and TBC within 21 days. Staff will then be trained and the system will then be tested (approx. 2 months to complete). Support is being provided as required.
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	Felitta Burney-Nicol	31/08/2025	Ongoing

Accurate as of: 18/06/2025 15:56

Risk Owner	Risk Description	
Maria Wogan	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 Lead		
Dominic Woodward-Lebihan		
Governance Board(s)		
Audit & Risk Assurance Committee / Quality & Performance Committee / Finance and Investment Committee		
Date of Last Review		
22/05/2025		
Risk Movement		
★ New Risk		
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 Updates	
Date	Update

Accurate as of: 18/06/2025 15:56

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	17/07/2025	In progress
QEIAs to be populated and assessed by BHFT, MKUH, ELFT and CNWL internally to obtain CMO/CNO approval.	ICB	Matt Hollex	24/07/2025	In progress
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	24/07/2025	In progress
As a Category 2: Further regionally led intervention needed - BLMK will be supported by NHSE via additional assurance meetings with the regional teams.	ICB	Matt Hollex	24/07/2025	In progress
ICB Financial Improvement Group (FIG), BHFT and MKUH Financial Turnaround Teams to identify additional efficiencies schemes	ICB	Matt Hollex	24/07/2025	In progress
Deviation from plan to be picked up at established system collaborative forums including the 'Delivering our Financial & Operational Plan' meetings	ICB	Matt Hollex	31/07/2025	In progress
The finalisation and agreement of 2025/26 contracts will provide clarity on financial allocations, activity/outcome expectations and reporting requirements	ICB	Matt Hollex	22/08/2025	In progress

