

Item: 8

REPORT CLASSIFICATION	✓	CATEGORY OF PAPER	✓
Official	✓	Proposes specific action	
Official: Sensitive Commercial		Provides assurance	✓
Official: Sensitive Personal		For information only	✓

BOARD	
29 JULY 2026	
Report Title:	Chair's Report
Purpose of report	
The purpose of this report is to provide an update from the Chair in relation to changes to the Board composition and ensure the Board is sighted on key developments.	
Key points	
The report includes an update on: • Changes to the Board composition and key roles • Chief Executive role update • Independent non-executive member and partner member appointments • Fit and Proper Person Test (FPPT) submission to NHS England • Leadership Competency Framework submission (LCF)	
Risks and issues	
This report highlights the ongoing actions required to recruit to partner vacancies.	
Assurances	
This report provides assurance on the board composition and key roles, along with key updates from the Chair. The changes to the ICB Constitution were recently approved by the Board and remain reflective of the current legislation.	
Recommendation/action required	
The Board is asked to receive the report for information and assurance.	
Acronyms and abbreviations explained	
ICB – Integrated Care Board NENC - North East and North Cumbria NHSE - National Health Service England	

FPPT – Fit and Proper Persons Test INEMs - Independent Non Executive Members SID – Senior Independent Director						
Sponsor/approving director	D Cornell, Director of Corporate Governance, Communication and Involvement (Board Secretary)					
Date approved	22 July 2026					
Report author	T Taylor, Corporate Governance Officer					
Link to ICP strategy priorities						
Longer and Healthier Lives						✓
Fairer Outcomes for All						✓
Better Health and Care Services						✓
Giving Children and Young People the Best Start in Life						✓
Relevant legal/statutory issues						
Note any relevant Acts, regulations, national guidelines etc						
Any potential/actual conflicts of interest associated with the paper?	Yes		No	✓	N/A	
Equality analysis completed	Yes		No		N/A	✓
If there is an expected impact on patient outcomes and/or experience, has a quality impact assessment been undertaken?	Yes		No		N/A	✓
Key considerations						
Financial implications and considerations	Not applicable					
Digital implications	Not applicable					
Clinical involvement	Not applicable					
Health inequalities	Not applicable					
Patient and public involvement	Not applicable					
Partner and/or other stakeholder engagement	Not applicable					
Other resources	Not applicable					

Report of the Chair

1. Introduction

- 1.1 The purpose of this report is to provide an overview of changes to the Board composition and provide an update on key appointments and activities relating to the Board.

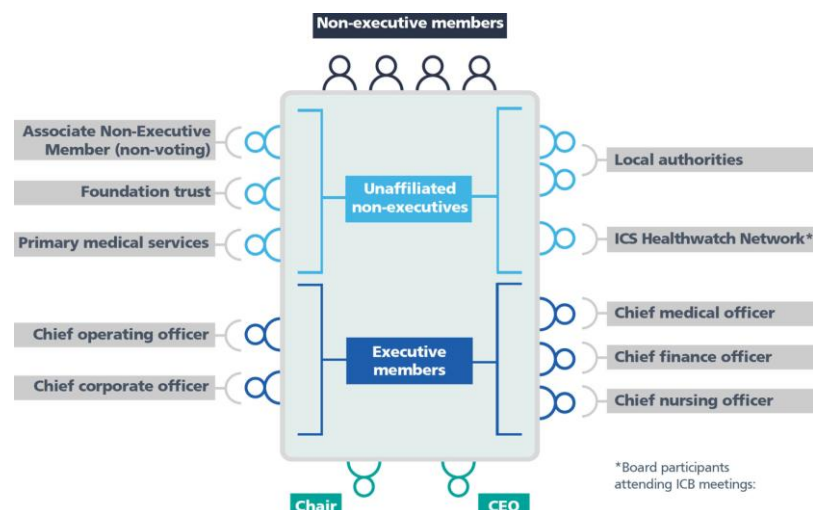
2. Board Composition

- 2.1 The NENC ICB Constitution sets out the composition and membership of the Board who are collectively accountable for the performance of the ICB's functions.

- 2.2 The Board recently reviewed and updated the ICB's Constitution to reflect current legislation and to support the ICB's transition to a strategic commissioning model. This meant a change to the executive roles and a reduction in the partner member roles on the Board. The Board composition is now as follows:

- Chair
- Four Independent Non-Executive Members
- Chief Executive
- Chief Finance Officer
- Chief Nursing Officer
- Chief Medical Officer
- Chief Operating Officer
- Chief Corporate Officer
- One Partner Member – NHS trusts and foundation trusts
- One Partner Member – primary medical services
- Two Partner members – local authorities (children and adult services)

- 2.2 The Board also includes a representative from Healthwatch as regular participant.



3. Chief Executive Role Update

- 3.1 Sam Allen, the ICB Chief Executive, has been seconded to support the NHS England North East and Yorkshire team as Interim Regional Director from 01 July 2026.
- 3.2 This was following a request from Sir James Mackey to provide support to NHS England North East and Yorkshire team as Interim Regional Director with immediate effect. This was discussed in detail with the ICB Chair, Sir Liam Donaldson, to ensure Sam would be able to support this role alongside continuing to fulfil her role as Chief Executive of the ICB.
- 3.4 It is important that the ICB supports its NHS partners whenever they need the help and support and this is one of those occasions. The Chair and Chief Executive are confident in the strength and depth of the executive and ICB leadership team to continue to drive forward the ICB's ambitious plans as a strategic commissioner and their ability to lead and support delivery of these plans.
- 3.5 This means there have been some practical changes to the ICB's corporate meetings to help manage diary commitments. Going forward, the formal corporate day will move from a Tuesday to a Wednesday, meaning that the Board and relevant key committees will move to this day as well.

4. Appointments Panel

- 4.1 An Appointments Panel was held on the 01 July 2026 to consider the appointments of non-executive and partner members detailed below.

4.2 Independent Non-Executive Members

- 4.2.1 The ICB had two independent non-executive member vacancies and following a robust recruitment process, two candidates were successful at interview. The necessary pre-employment checks are now underway.
- 4.2.2 The Appointments Panel considered and approved, subject to satisfactory pre-employment and Fit and Proper Person checks, the appointment of the two successful candidates.

4.3 Partner members

- 4.3.1 The Board recently reviewed and updated the ICB's Constitution to reflect current legislation and to support the ICB's transition to a strategic commissioning model. This change has meant a reduction in the partner member roles on the Board as set out below:

Primary Medical Services Partner Member

- 4.3.2 The ICB Constitution was updated to reduce the partner member roles for primary care from two to one.
- 4.3.3 Following a change in role linked to the ICB's transition to a strategic commissioning organisation, Dr Michael Smith, Primary Medical Services Partner Member, stepped

down from his Board role on 03 May 2026 to take up a position as Medical Director for the ICB.

- 4.3.4 Dr Saira Malik, Primary Medical Services Partner Member, accepted an offer of an extension to her appointment until 31 December 2026. This is subject to a further review of Board composition requirements following progress of the NHS Modernisation Bill through Parliament.
- 4.3.5 The Appointments Panel considered and approved the six-month extension to the term of office for Dr Saira Malik, from 01 July 2026 to 31 December 2026.

Local Authority Partner Members

- 4.3.6 The ICB Constitution was updated to reduce the number of local authority partner member roles from four to two.
- 4.3.7 The term of office for Tom Hall, Local Authority Partner Member (Public Health), came to an end on 30 June 2026. This role will not be replaced due to the reduction in partner members. On behalf of the Board, the Chair formally expressed his gratitude for Tom's valuable contribution and commitment during his tenure. As a public health specialist, Tom's insight and collaboration have played an important role in supporting the ICB's objectives and strengthening partnerships across the system.
- 4.3.8 The two remaining local authority partner member positions remain vacant at this present time.

Foundation Trust Partner Members

- 4.3.9 The ICB Constitution was updated to reduce the number of foundation trust partner member roles from two to one.
 - 4.3.10 Ken Bremner, Chief Executive of South Tyneside and Sunderland NHS Foundation Trust and current Foundation Trust Partner Member, expressed an interest in reappointment for a second term. As set out in the Constitution, trust chief executives across the North East and North Cumbria were contacted to confirm continued support for Ken Bremner's re-appointment for a further term as well as being invited to put forward alternative nominations for consideration. Ken received a number of endorsements, and no other candidates were put forward for consideration.
 - 4.3.11 The Appointments Panel approved Ken Bremner, Chief Executive of South Tyneside and Sunderland NHS Foundation Trust, for a six-month reappointment to serve a second term from 01 July 2026 to 31 December 2026.
 - 4.3.12 The term of office for Dr Rajesh Nadkarni, Foundation Trust Partner Member, came to an end on 30 June 2026. This role will not be replaced due to the reduction in partner members. On behalf of the Board, the Chair formally expressed his gratitude for Rajesh's valuable contribution and commitment during his tenure. Rajesh's insight, collaboration and specialist knowledge of mental health have played an important role in supporting the ICB's objectives and strengthening partnerships across the system.
- 4.4 As the NHS Modernisation Bill progress through parliament, the skills, knowledge and required experience of Board members will be kept under review to ensure that the Board can continue to effectively discharge its duties.

5. Fit and Proper Persons Test (FPPT)

- 5.1 Ensuring high standards of leadership in the NHS is crucial. Well-led NHS organisations are distinct when both strong teamwork and strong governance translate into greater staff wellbeing and better clinical care.
- 5.2 NHS England published its Fit and Proper Person Test (FPPT) Framework on 02 August 2023 in response to the recommendations made by Tom Kark KC in his 2019 review of the FPPT. The framework also considers the requirements of the Care Quality Commission in relation to directors being fit and proper for their roles.
- 5.3 The aim of the framework is to strengthen and reinforce individual accountability and transparency for board members, as well as prioritising patient safety, to enhance the quality of good leadership in NHS organisations. It will support board members to build a portfolio to provide assurance that they are fit and proper to undertake a board level position.
- 5.4 Chairs are accountable for taking all reasonable steps to ensure the FPPT process is effective. Their responsibilities include ensuring that:
- The NHS organisation has proper systems and processes in place so that it can make the robust assessments required by the FPPT.
 - The results of the full FPPT, including self-attestations for each board member, are retained by the employing organisation.
 - The FPPT data fields within the electronic staff record system are accurately maintained in a timely manner.
 - Board member references/pre-employment checks and a full FPPT are complete and adequate for each board member.
 - An appropriate programme is in place to identify and monitor board member development needs.
- 5.5 In line with national timescales, the ICB completed a full FPPT assessment and concluded that all Board members were fit and proper. The submission was made to NHS England on 30 June 2026 and receipt has been acknowledged.

6. Leadership Competency Framework (LCF)

- 6.1 The NHS Leadership Competency Framework (LCF) was published on 28 February 2024 for all Board members and NHS providers, ICBs and NHS England Board. The LCF provides a framework for board member recruitment and appraisal and will inform future board leadership and management training and development.
- 6.2 The LCF has six domains, each with a range of competencies. The six competency domains are incorporated into all NHS board members role descriptions and recruitment processes. They also inform a core part of board member appraisals and ongoing development of members and the Board.
- 6.3 The ICB Chair's appraisal was completed and submitted in June 2026 as part of this process.

- 6.4 The next steps are for all Board members to self-assess against the LCF and discuss findings with the Chair and Chief Executive as part of their annual appraisal. This will help guide Board members personal development plans for 2026/27.

7. Recommendations

- 7.1 The Board is asked to receive the report for information and assurance.

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Date: 22 July 2026