

Item: 9.3.1

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

BOARD		
30 July 2024		
Report Title:	Executive Committee Highlight Report and Confirmed Minutes	

Purpose of report

To provide the Board with an overview of the discussions and decisions from the Executive Committee meetings in May and June 2024.

Key points

The Executive Committee met on 14 May and 11 June 2024.

The key points to bring to the Board's attention from each meeting are detailed in accompanying decision logs (Appendices 1 and 2). The confirmed minutes from each meeting are also attached for assurance (Appendix 3 and 4).

14 May 2024

The following items were submitted to the meeting of the Committee and details are contained within the attached decision log and confirmed minutes (Appendix 1):

- Sunderland Quality Premium Scheme
- Medicines Decisions TA942: Empagliflozin
- ICB Budget Delegation Arrangements 2024/25
- Counter Fraud Policy
- Procurement Policy.

11 June 2024

The following items were submitted to the meeting of the Committee and details are contained within the attached decision log (Appendix 2):

- Northumberland & South Tyneside Continuing Health Care (CHC) Team TUPE Business Case
- Northen Cancer Alliance 24/25 workplan including financial plan
- Long Term Conditions Group Alliance and Clinical Networks Structure and Approach
- Revised Contract Group Terms of Reference.

The confirmed minutes from the Executive Committee meetings held on 14 May and 11 June 2024 are attached as appendices 3 and 4, respectively.

Risks and issues



- The Committee discussed the North East and North Cumbria Integrated Care Board (the ICB) and Integrated Care Strategy (ICS) finance reports, noting there were financial risks across the system and acknowledged the ongoing work to mitigate these.
- The corporate risk register and board assurance framework was also presented to the Committee which outlined the key strategic risks facing the organisation.

Assurances

The Committee also received several items for assurance, and these included:

- Chief Delivery Officer report an information and assurance summary report of business within the respective place areas.
- Integrated delivery report an overview of quality and performance, highlighting any significant changes, areas of risk and mitigating actions.
- Risk management report an updated position on the risks facing the organisation for the reporting period.
- An options appraisal outline the direction of travel for funding of equipment via IFRs
- Safeguarding is Everyone's Responsibility an update on NENC ICB Safeguarding and Cared for Children's Arrangements.
- Executive Committee annual report and outcome of the annual effectiveness survey.
- A review of the draft ICB Annual Report ahead of submission to Board for approval.
- Governance Assurance Report an overview of the performance by exception in relation to the delivery of ICB's corporate governance functions during the period 1 January 2024 – 31 March 2024.
- Highlight reports and/or confirmed minutes from subcommittees and groups of the Executive were discussed to provide assurance from:
 - o Contracts Group
 - o Place subcommittee
 - Healthier and Faired Advisory Group
 - o Medicines subcommittee
 - Pharmaceutical Services Regulations subcommittee
 - o Primary Care Strategy and Delivery subcommittee.
 - o Mental Health, Learning Disabilities and Autism subcommittee
 - o People and OD subcommittee

Recommendation/action required

The Board is asked to:

- Receive the highlight report and decision logs for the Executive Committee meetings held on 14 May and 11 June 2024 for information and assurance (Appendices 1 and 2).
- Receive the confirmed minutes for the meetings held on 14 May and 11 June 2024 (Appendices 3 and 4).

Acronyms and abbreviations explained

NENC - North East and North Cumbria

ICS – Integrated Care System

ICB - Integrated Care Board

ICP - Integrated Care Partnership

LDT - Local Delivery Teams

GAR - Governance Assurance Report

GIRFT - 'Get it right first time'

CHC - Continuing Healthcare

QP - Quality Premium

LES - Local Enhanced Services

LIS - Local Incentive Schemes



IFR – Individual Funding Requests BCF – Better Care Fund NCIC – North Cumbria Integrated Care Foundation Trust NHSE – NHS England NAO – National Audit Office PSR – Provider Selection Regime HR – Human Resources TUPE - Transfer of Undertakings (Protection of Employment) AACC – All Age Continuing Care NECS – North East Commissioning Support SDF – Service Development Funding BAF – Board Assurance Framework SEND – Special Educational Needs and Disabilities						
Sponsor/approving executive director	S Allen, Chief	f Executiv	е			
Reviewed by	D Cornell, Dir	ector of C	Corporate Gover	rnance and Bo	ard Secr	etary
Report author	K Sutherland, Corporate Governance Manager					
Link to ICP strategy prio	rities (please t	ick all that	t apply)			
Longer and Healthier Lives	5					✓
Fairer Outcomes for All	Fairer Outcomes for All ✓			✓		
Better Health and Care Se	rvices					✓
Giving Children and Young	Giving Children and Young People the Best Start in Life ✓			✓		
Relevant legal/statutory	issues					
Note any relevant Acts, re	gulations, natio	nal guide	lines etc		1	ı
Any potential/actual con- interest associated with (please tick)	Yes	No		N/A	✓	
					T	
Equality analysis comple	eted	Yes	No		N/A	✓
(please tick) If there is an expected impact on patient outcomes and/or experience, has a quality impact assessment been undertaken? (please tick)		Yes	No		N/A	✓
Key implications						
Are additional resources	Are additional resources required? Identified as part of the committee minutes.					
Has there been/does the be appropriate clinical in						
Has there been/does the be any patient and public involvement?		need to Not applicable as highlight report only.				



Has there been/does there need to be partner and/or other stakeholder engagement?

Not applicable as highlight report only.



Appendix 1 – Decisions Log – Public Executive Committee – May 2024

Agenda Item	Description	Decision/action
Sunderland Quality Premium Scheme	This report provided the Committee with the proposed General Practice Quality Premium (QP) scheme for 2024/25. The QP is currently split into three areas:	The Committee approved the Core Sunderland General Practice QP Scheme for 2024/25 of £10.57 per head with the caveat that the QP+ required further clarification prior to approval.
	 70% indicators – these indicators are "must do" and are a pre-requisite for participating in the scheme. These indicators are monitored for performance but do not attract a financial penalty for non-achievement. 30% indicators – these indicators are monitored, and funding is based on performance against key targets. QP plus – these areas are activity based. 	
	The report proposed for 2024/25 that the indicators are split into three areas again as referenced above.	
Medicines Decisions - TA942: Empagliflozin	The NENC ICB Medicines Subcommittee met on 8 th April 2024. This Committee currently has no delegated authority from the ICB and has a financial approval threshold of £250k which is through the presence of the ICB Director of Medicines, and therefore the report asked the Executive Committee to: • Approve the medicines decisions made at the April 2024 meeting, which are above this financial threshold.	The Committee approved TA942: Empagliflozin for treating chronic kidney disease to be included within the formulary as a GREEN drug.
ICB Budget Delegation Arrangements 2024/25	The report set out the planned approach to budget delegation arrangements within the ICB for 2024/25, including a proposed approach to formal delegation of relevant budgets to Place Subcommittees during the year.	The Committee approved the proposed approach to budget delegation for 2024/25. The Committee approved the proposed delegation of
	The main changes compared to 2023/24 were: • Continuing healthcare and s117 budgets would be delegated to the Chief Nurse rather than being part of place / Local Delivery Team (LDT) budgets.	budgets outlined in appendix 1, to relevant executive directors initially.



Agenda Item	Description	Decision/action
	 All community services budgets would be delegated to place / LDT level (via the Chief Delivery Officer), including relevant NHS provider community contracts. 	
Counter Fraud Policy	Following the release of the 2023-2026 NHS Counter Fraud Authority (NHSCFA) strategy, the ICB's Counter Fraud, Bribery and Corruption policy has been reviewed and a number of relatively minor updates proposed.	The Committee approved the updated Counter Fraud Policy.
	These are largely relatively minor changes; the substance of the policy remains unchanged.	
	The updated policy was reviewed and agreed by Audit Committee on 22nd April 2024 for submission to Executive Committee for approval.	
Procurement Policy	The ICB Procurement Policy was updated to reflect the implementation of the Provider Selection Regime 2023 on 1 January 2024. The legislation details new processes to commission healthcare services in England: • Direct Award A • Direct Award B	The Committee approved the updates to the Procurement Policy with agreed amends.
	 Direct Award C Most Suitable Provider Process Competition Process 	



Appendix 2 – Decisions Log– Public Executive Committee – June 2024

Agenda Item	Description	Decision/action
Northumberland & South Tyneside Continuing Health Care (CHC) Team TUPE Business Case	This report provided the Committee with the proposal for the TUPE Transfer of Northumberland CHC team from Northumbria Health Care Foundation Trust and South Tyneside CHC team from the Joint Commissioning Unit into the ICB. This proposal will enable the ICB to take forward a one team, one function approach, mitigate the challenges form staff being employed in different teams, will address variation and standardise CHC assessments.	The Committee approved the progression of Northumbria and South Tyneside teams to TUPE/transfer employment into the ICB.
Northen Cancer Alliance 24/25 workplan including financial plan	This report provided the Committee with the proposed 2024/25 Northern Cancer Alliance workplan, and the SDF allocated by NHS England to deliver the plan. The Northern Cancer Alliance is now in the direct employment of	The Committee approved the 2024/25 Northern Cancer Alliance workplan, financial plan and the proposed spend in tables 3 and 4 of the report.
	the ICB. The proposed workplan has been developed by the subgroups and has been submitted to the Northern Cancer Alliance Board.	
Long Term Conditions Group Alliance and Clinical Networks Structure and Approach	This report provided the Committee with the proposed structure and approach to long term conditions. The closure of the Clinical Networks led by NHSE and reorganisation within the wider system created operational and organisational challenges in relation to national and local workstreams linked to long term conditions.	The Committee approved the proposed approach to long term conditions and development of the strategy and work plan.
	The ICB has put in a structure to support transition to a different way of working within the context of our Integrated Care and Clinical strategies.	
Revised Contract Group Terms of Reference	The report provided the Committee with the updated Contract Group Terms of Reference (ToR).	The Committee reviewed the updated Terms of Reference for the Contract Group and progression to formally establish as a subcommittee. The TOR will be updated to reflect this.



Agenda Item	Description	Decision/action
	Following ICB 2.0 and the formation of the contracting and procurement directorate, there is a need to update the ToRs to alter the scope, membership, and primary role of the group.	