

North East and North Cumbria Integrated Care Board

**Minutes of the meeting held in public on 25 March 2025
at 10.45am, The Durham Centre, Belmont**

Present: Professor Sir Liam Donaldson, Chair
Samantha Allen, Chief Executive
Kelly Angus, Interim Chief People Officer
Levi Buckley, Chief Delivery Officer
David Chandler, Chief Finance Officer
David Gallagher, Chief Contracting and Procurement Officer
Tom Hall, Local Authority Partner Member
Professor Sir Pali Hungin, Independent Non-Executive Member
Professor Eileen Kaner, Independent Non-Executive Member
Dr Hilary Lloyd, Chief Nurse and AHP Officer
Dr Saira Malik, Primary Medical Services Partner Member
Jacqueline Myers, Chief Strategy Officer
Dr Neil O'Brien, Chief Medical Officer
Claire Riley, Chief Corporate Services Officer
Jon Rush, Independent Non-Executive Member
Dr Mike Smith, Primary Medical Services Partner Member
David Stout, Independent Non-Executive Member

In Attendance: Deborah Cornell, Director of Corporate Governance and Board Secretary
Christopher Akers-Belcher, Healthwatch Representative
Lisa Taylor, Voluntary Community and Social Enterprise Representative.
Toni Taylor, Board and Legal Officer (minutes)

B/2024/122 Welcome and Introductions (agenda item 1)

The Chair welcomed colleagues to the meeting of North East and North Cumbria (NENC) Integrated Care Board (ICB).

The following individuals were in attendance under public access rules:

- Stephen Doyle, Pfizer
- Dr Helen Groom, member of public
- Raj Purewal, C2-AI
- Carolyn Smith, Pfizer

B/2024/123 Apologies for Absence (agenda item 2)

Apologies were received from Ken Bremner Foundation Trust Partner Member, Professor Graham Evans Chief Digital and Infrastructure Officer, Dr Rajesh Nadkarni Foundation Trust Partner Member and John Pearce Local Authority Partner Member.

B/2024/124 Declarations of Interest (agenda item 3)

Members had submitted their declarations prior to the meeting which had been made available in the public domain.

B/2024/125 Quoracy (agenda item 4)

The Chair confirmed the meeting was quorate.

B/2024/126 Minutes of the Board Meeting held on 28 January 2025 (agenda item 5)

RESOLVED

The Board **AGREED** that the minutes of the Board meeting held on 28 January 2025 were a true and accurate record.

B/2024/127 Action log and matters arising from the minutes (agenda item 6)

Action 22 – B/2023/46

A dental recovery plan would be brought to June's Board meeting to describe the approach.

B/2024/128 Notification of items of any other business (agenda item 7)

None.

B/2024/129 Chief Executive's Report (agenda item 8)

The Board were provided with an overview of the recent activity carried out by the ICB, as well as some key national policy updates.

The Chief Executive drew the Boards attention to the following:

Financial position

The Integrated Care System (ICS) is still forecasting delivery of the planned financial position.

We expect 2025/26 to be the most challenging financially for the NHS. The ICS submitted a non-compliant draft plan in February 2025 and work is continuing to review further actions that will need to be taken to reduce the gap in financial plans for 2025/26 and ensure the system can live within its resources.

Women's Health

Resources have been secured to continue with the women's health hubs in 2025/26. There is a need to be more innovative in services commissioned by the ICB, research and evidence was being collected to inform the future of the hubs.

Health Select Committee

The Chief Executive gave evidence to the Health Select Committee on Community Mental Health Services.

An example of good practice was noted where Tees, Esk and Wear Valleys NHS Foundation Trust work with a range of community and NHS partners to provide a community health and wellbeing service. This was heralded as an excellent example at the Committee who were invited to visit this service.

Better Care Fund (BCF)

The 2025/26 BCF framework was updated and detailed the national policy direction and funding allocations for integrated health and care services. Local Authorities and ICBs must jointly agree on a plan, signed off by the Health and Wellbeing Board and the ICB to support BCF objectives by the end of March 2025.

Child poverty (dental)

The recent announcement from the Department of Health and Social Care about water fluoridation in the North East and future funding to help local authorities in the most deprived areas will have a positive impact on oral health.

Recognising the challenges we have in the NENC and the links between child poverty and poor oral health in children and young people, the ICB are working with combined authorities and councils in North Cumbria to supplement this through grants of £1.5m with the opportunity for matched funding for schemes to further improve oral health in those in greatest need. The Board would be kept updated on the outcomes from this funding.

NHS system changes

It was recently announced that ICBs would be required to reduce running and programme costs by a further 50% and that NHS England would be abolished with the functions merged into the Department of Health and Social Care (DHSC). It is anticipated that allocations to ICBs will be reduced to reflect this new reduction from quarter three in 2025/26. Further detail is awaited but it will mean a change in what we do and how we do it.

Further Board discussion highlighted;

- Despite a financially challenging year the North East and North Cumbria have continued to reduce waiting lists.
- There have been over one million contacts a month in general practice with the use of digital portals.

- Protecting patient safety is critical in decisions. The Quality Equality Impact Assessment process was reviewed and improved to ensure it was robust to support decision making.
- The Board will be kept updated on difficult decisions being considered and quality equality impact assessments carried out.
- Better Care Fund (BCF) schemes have had a much greater focus on the left shift moving more care from hospitals to communities.
- The national general practice contract for 2025/26 has had BMA support which was encouraging after a challenging year of GP collective action. Changes will include reducing the number of quality indicators, redistributing funding and a further increase in digital tools. Local enhanced services are also commissioned locally with general practices.
- The recent announcement suggested a 50% reduction for all ICBs despite the variation in size, scale and make up of the population. NENC is one of the largest ICBs with a high level of deprivation and is the most cost effective, it was queried whether this would be taken into consideration.

RESOLVED

The Board **RECEIVED** the report for assurance.

B/2024/130

Changes to the structure and funding for the NHS (agenda item 9)

The Chief Executive provided a further update on the recent announcements in relation to the structure and funding for the NHS.

The new 10-year plan for health is expected in June 2025 and will outline a new model of care aligned to the three shifts;

- Shift 1: Moving more care from hospitals to communities
- Shift 2: Making better use of technology in health and care
- Shift 3: Focusing on preventing sickness, not just treating it

There is a global shortage of health and care staff which was well evidenced in Lord Darzi's report on the state of the NHS in England and Dr Penny Dash's review into the operational effectiveness of the Care Quality Commission.

The government announced that NHS England will be abolished and integrated with the Department of Health and Social Care to reduce duplication. There is a workforce of approximately 15,000 staff.

Integrated Care Boards have also been requested to reduce the workforce as well as NHS providers.

There will be some structural change to services, some of which will require legislative changes to support this.

The ICB will work with staff and trade unions and in partnership with partners to minimise the impact of significant job reductions whilst maintaining focus on planning, commissioning and providing high quality safe services for our population.

Women's health is a good example where £7bn is spent buying health services for our population, of which 51% are women. We need to take the evidence and learning from the women's hubs and look at how we recommission services within the investment we are already making to better meet the needs of our population.

RESOLVED

The Board **RECEIVED** the update.

B/2024/131

Governance Handbook (agenda item 10)

The Board were provided with an updated Governance Handbook and Constitution, including amendments to the Scheme of Reservation and Delegation (SoRD), financial limits document and financial delegation documents.

The proposed amendments were in relation to the delegation of specialised commissioning responsibilities to Integrated Care Boards from 1 April 2025.

Following a review of financial delegations and amendments made to Finance Performance and Investment Committee responsibilities the financial delegation document was updated. The terms of reference for Finance Performance and Investment Committee and Executive Committee terms of reference would also be reviewed and updated to reflect these changes.

RESOLVED:

The Board **APPROVED** the changes and minor amendments to:

- The Scheme of Reservation and Delegation (Appendix A)
- Financial limits document (Appendix B)
- Financial delegations document (Appendix C)
- NENC ICB Constitution

The Board **NOTED** the establishment of a Specialised Commissioning Subcommittee (of the Executive Committee) and **RATIFIED** the subcommittee terms of reference for inclusion in the Governance Handbook (Appendix D).

B/2024/132

Highlight Report and Minutes from the Executive Committee held on 14 January and 11 February 2025 (agenda item 11.1)

An overview of the discussions and approved minutes from the Executive Committee meetings in January and February 2025 were provided. Detailed decisions logs were appended to the highlight report.

RESOLVED:

The Board **RECEIVED** the highlight report and confirmed minutes for the Executive Committee meetings held on 14 January and 11 February 2025 for information and assurance.

B/2024/133

Highlight Report and Minutes from the Quality and Safety Committee held on 9 January 2025 (agenda item 11.2)

An overview of the discussions and approved minutes from the Quality and Safety Committee meeting in January 2025 were provided.

RESOLVED

The Board **RECEIVED** the highlight report and confirmed minutes for the Quality and Safety Committee meeting held on 9 January 2025 for information and assurance.

B/2024/134

Highlight Report and Minutes from the Finance, Performance and Investment Committee held on 5 December 2024 and 6 February 2025 (agenda item 11.3)

An overview of the discussions and confirmed minutes from the Finance, Performance and Investment Committee meetings held in December 2024 and February 2025 were provided.

January 2025 meeting was stood down.

RESOLVED

The Board **RECEIVED** the highlight report and confirmed minutes for the Finance, Performance and Investment Committee meetings held on 5 December 2024 and 6 February 2025 for information and assurance.

B/2024/135

Highlight Report and Minutes from the Audit Committee (agenda item 11.4)

No report: next meeting 11 April 2025.

B/2024/136

Integrated Delivery Report (agenda item 12)

The NENC Integrated Delivery Report (IDR) provided an overview of quality and performance, highlighting any significant changes, areas of risk and mitigating actions.

The Chief Strategy Officer drew the Board's attention to the following performance highlights;

- Continued strong performance with NEAS ranked number one in England for ambulance response times.
- A&E four hour wait exceeded national target of 78.2% as of 23 March 2025.
- Cancer fast diagnosis (75.6%) exceeded the national average of 73.4%

- Planned elective care waits continue to reduce.
- NENC ICB was ranked 1/42 for people receiving treatment within 18 weeks from referral (69.1%) which exceeded the national average of 58.8%.
- Dementia diagnosis rate and the number of learning disability annual health checks completed improved significantly.
- Continued progress in reducing reliance on inpatient care.

The team were praised for the report and concept of deep dives into key areas of focus.

The importance of triangulation of information was recognised specifically on patient experience. The patient experience survey showed positive progress and featured as one measure of success this year, an analysis of key themes will be included in a future report.

It was suggested a consolidated picture of the Better Care Fund metric would be useful to reflect on 2024/25 and for inclusion in the report going forward.

RESOLVED

The Board **RECEIVED** the report for information and assurance.

B/2024/137

Finance Report (agenda item 13)

The Board were provided with an update on the financial performance of the North East and North Cumbria Integrated Care Board and Integrated Care System in the financial year for the ten months to 31 January 2025.

The Chief Finance Officer advised the Board we were on track to deliver the financial plan which included;

- ICB 30% running cost reduction
- Capital plan
- Breakeven position

The System Recovery Board will continue to oversee the delivery of the agreed financial recovery programme and receive assurance on the delivery of the organisational efficiency plans.

As previously highlighted, 2025/26 was expected to be a hugely challenging year financially.

A detailed update on the financial and operational plan 2025/26 will be brought to June 2025 Board meeting in public.

Directors of Finance across the system were thanked for their continued work on the financial plan.

RESOLVED:

The Board **NOTED** the latest year to date and forecast financial position for 2024/25.

The Board **NOTED** there were some financial risks across the system still to be managed although there was confidence the planned position could be delivered for 2024/25.

**B/2024/138 Questions from the Public on non-agenda items
(agenda item 14)**

One question was received from the public on a non-agenda item and a separate response was being prepared.

B/2024/139 Any other business (agenda item 15)

There were no items of any other business to discuss.

The meeting closed at 12:45