

**North East and North Cumbria Integrated Care Board
Annual General Meeting (AGM)
Wednesday 29 July 2026, 10:15am 1 Citygate, Newcastle, NE1 4WH**

Present: Professor Sir Liam Donaldson, Chair
Samantha Allen, Chief Executive
Levi Buckley, Deputy Chief Operating Officer (deputy for Jacqueline Myers)
David Chandler, Chief Finance Officer
Professor Sir Pali Hungin, Independent Non-Executive Member
Dr Hilary Lloyd, Chief Nursing Officer
Dr Saira Malik, Primary Medical Services Partner Member
Dr Neil O'Brien, Chief Medical Officer
Claire Riley, Chief Corporate Officer
David Stout, Independent Non-Executive Member

In Attendance: Richard Barker, Independent Non-Executive Member (subject to pre-employment checks)
Deborah Cornell, Director of Corporate Governance, Communications and Involvement (Board Secretary)
Jill Murray, Independent Non-Executive Member (subject to pre-employment checks)
Toni Taylor, Corporate Governance Officer (minutes)

AGM/2026/01 Welcome and Introductions

The Chair welcomed all attendees of the North East and North Cumbria Integrated Care Board Annual General Meeting including members of the public both present in the room and joining online.

AGM/2026/02 Chairs Reflections

The Chair reflected on the significant organisational change and the number of patients who continue to await care postponed during the pandemic, reflecting a challenge across the NHS.

The focus has remained on core NHS functions: providing the right treatment, in the right place, at the right time. Further work is needed as the population ages and the cost of care, demand and public expectations increase. Health challenges are generally more pronounced in this region than in other parts of the country.

Alongside providing care, the ICB must improve population health through strong partnerships, address health inequalities affecting its three million residents and deliver the best possible health services.

The organisation's evolving role will centre on strategic commissioning and neighbourhood health, enabling more coordinated care closer to home. The Chair's ambition is for the ICB to remain consistently connected to the realities faced by patients and the public. The organisation must use its substantial budget responsibly to secure the best possible care and be prepared to work differently, including with major hospital providers.

AGM/2026/03 Chief Executive's Reflections

The Chief Executive reflected on a further year of significant change. Since the ICB's establishment four years ago, it has undergone three major restructures, the most recent of which was prolonged and challenging for staff and resulted in colleagues leaving through retirement and redundancy. In line with the national requirement for all ICBs, running costs have been reduced by £32 million, enabling funding to be reinvested in frontline services. Against continued pressures across public services, the new structure is intended to strengthen the ICB's role as a strategic commissioner, with a less operational focus, and will be tested and refined over the coming year.

The Chief Executive paid tribute to colleagues who had left and thanked those who remained, noting a renewed sense of optimism and commitment among staff. She highlighted the opportunity to work with local authorities, NHS partners and the voluntary, community and social enterprise sector to improve population health and outcomes at scale.

Highlights of our year included:

- Recognition of the strong partnerships established with the combined authorities, reflecting the close relationship between health and economic prosperity and the importance of improved transport links and job creation.
- Significant investment secured through WorkWell to address factors affecting population health, with early evidence of impact.
- Over the past 20 years, smoking prevalence has fallen by 19% to its lowest recorded level in the region, contributing to better respiratory health and cancer outcomes. Further progress will require sustained investment, accessible support in every NHS trust and an ongoing commitment to Making Every Contact Count.
- Thanks were extended to all general practice colleagues across the region, who deliver 85,000 appointments each day and achieve the highest patient satisfaction rates across the North East and North Cumbria.
- Following patient and public feedback about access difficulties and increased emergency department attendances, significant investment has expanded urgent dental care. Twenty-three urgent dental access centres can now be booked online or through NHS 111, alongside increased dental activity providing a further 109,000 appointments each year across the region. However, registering with an NHS dentist remains challenging.
- Expansion of targeted lung health checks, with 63,845 completed

during the year and 427 people receiving an earlier cancer diagnosis. The checks can also identify other cancers.

- Alcohol care teams are now in place in every NHS trust.
- Sunderland and Stockton have been selected as pioneer areas for neighbourhood health teams.
- The BOOST learning community has grown to almost 30,000 members, supporting the sharing of learning and improvement through events involving neighbourhood health teams.
- An 18% increase in uptake of the COVID-19 vaccination offer among targeted groups. Work continues to improve uptake across all vaccination programmes, particularly childhood immunisations such as measles and meningitis, which remain essential to protecting communities.
- Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust and the ICB received the NHS's first excellence award for staff mental health and wellbeing. The region employs 170,000 health and care staff. Supporting colleagues to remain well and in work is a priority, alongside reducing expenditure on temporary staffing.
- Winter planning has delivered sustained improvement in ambulance response and handover times. North East Ambulance Service has maintained the best category 2 response times nationally, while handover times have improved by 18%, equivalent to 7,000 fewer ambulances waiting 45+ minutes at emergency departments.

The Chief Executive highlighted the continued support provided to those caring for local communities. She noted the positive impact of the Staff Wellbeing Hub and its national recognition through an NHS Excellence Award, before introducing a short film illustrating its work.

AGM/2026/04 The Year Ahead 2026/27

Neighbourhood health is central to the ten-year plan, with a focus on accelerating its implementation across all communities.

The future model of care will prioritise cost-effective services outside hospital wherever appropriate, supported by continued partnership working.

A key measure of progress will be the shift in investment, resources and care towards services delivered closer to home, alongside reduced expenditure on hospital-based provision, including outpatient care.

AGM/2025/05 Performance and Improvement 2025/26

The Deputy Chief Operating Officer gave an overview the key performance and improvement highlights:

- Performance against the 18-week referral-to-treatment standard ranked consistently first or second nationally throughout the year. Success should be recognised while maintaining ambition for further improvement.
- Further improvement is required against 62-day and 28-day faster diagnosis standards for cancer.

- North East Ambulance Service frequently ranked first for category one and two response times.
- Emergency care performance remains among the strongest regionally and nationally, although continued focus is needed to sustain progress.
- A challenging year for cancer standards with 69.4% of patients treated within 62 days, below the national benchmark.
- General practice now delivers approximately 89,000 appointments each day, exceeding the previously reported figure of 85,000.
- There will be a stronger focus on care outside hospital, using proactive prevention and early intervention to avoid complex and costly admissions.
- 79% of people on the GP learning disability register received an annual health check, exceeding the national average; further improvement will remain a priority.
- Dental health initiatives include expanding water fluoridation and supervised toothbrushing in schools.
- The Pharmacy First model will continue to deliver a broad range of early interventions, including 8,000 contraception consultations each month.
- Improving mental health outcomes and access to treatment will be a priority for the year ahead, supported by investment in ADHD services.
- The ICB will remain focused on its ambitions and the next steps needed to improve outcomes and patient experience.

AGM/2025/06 Review of Financial Performance 2025/26

For the year end 31 March 2026, the ICB delivered all of its statutory financial duties and the wider NENC Integrated Care System (ICS) also delivered a slight surplus financial position overall.

Changes in expenditure over the past two years included:

- A 26% increase in expenditure on All Age Continuing Care packages.
- Increased spending across primary care, mental health and acute services, driven by price inflation and targeted interventions.
- Additional investment in autism and ADHD assessments.
- Reported community investment of 2%, rising to approximately 7% when centres are recoded.
- A 16% reduction in running costs, with 0.5% of expenditure used to operate the ICB itself.

The NENC ICB accounts were audited by Forvis Mazars and an unqualified audit opinion was received for the ICB for 2025/26.

- Financial Statement Opinion – Unqualified
- Regularity Opinion – Unqualified
- No matters to report on annual report
- Value for Money arrangements – no significant weaknesses identified.

AGM/2026/07 Questions from the public

None received.

Written feedback from NHS England's assessment had been received and would be published on the ICB website alongside the Annual Report which could be accessed under the publications section of the ICB website. The assessment recognised the ICB's strong performance and mature organisational capability.

The AGM closed at 11:00

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