

Item: 11.3

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

BOARD

25 MARCH 2025

Report Title:

Finance, Performance and Investment (FPI) Committee Approved Minutes

Purpose of report

To provide the Board with an overview of the key points and approved minutes from the FPI Committee meetings held on 3 December 2024 and 6 February 2025.

A meeting was held on 6 March and these minutes will be presented to the June Board after being approved at the April meeting but a brief overview will be provided by the Chair.

Key points

The Finance, Performance and Investment Committee, chaired by Jon Rush, Non-Executive member of the Board, met on 3 December 2024 and 6 February 2025

The key points to bring to Board's attention from the meetings are set out below.

3rd December Meeting

Finance:

- Update on latest 2024/25 financial position at month 7 including potential financial risks and progress being made in identifying further mitigations to manage the system position
- Update on the refresh of the ICS medium term financial plan (MTFP), including the latest underlying deficit position and model scenario's for the next 3 years which will be hugely challenging.

Performance

- The number of adults with learning disabilities and autism in in-patient care (both secure and ICB commissioned) had improved from 181 as at end of Q2 to 171 as at end Oct 24, demonstrating good progress towards the plan of 157 by end of Q3. However whilst the ICB element of this trajectory is improving the specialised commissioning (secure) element remains static and below plan.
- A deterioration was noted for UEC performance with specific reference to A&E 4 hour waits, ambulance handovers and response times. It was noted that remedial action is in train at a system and individual provider level.
- Discussion took place regarding the utilisation of virtual wards since their inception during the COVID pandemic. It was explained that their implementation had been rapid and based on a limited clinical model, future models will be dependent on clinical evaluation and funding allocations.
- It was agreed that both virtual wards and A&E 4 hr waiting times would be the subject of future deep dive topics

Infrastructure Board Update

- Outline of planning and potential overspends management

2025/26 Financial and Operational Planning:

- Update on the latest position in respect of 2025/26 planning processes and arrangements, noting that formal planning guidance is still awaited.

6th February Meeting

Finance

- The Committee were updated on the month 9 position. Whilst from an ICS perspective there was a current deficit of £24.9m, plans were in place for this to be back on track by month 10. The ICB were slightly ahead of plan due to various rebates. Capital spend was in line with plan. We are awaiting NHSE approval to reduce the ICB surplus to help support the wider ICS.
- **Financial sustainability group update** - the Committee received assurance on the work of the group to date and the robust processes in place to support breakeven for 2024/25.
- The current update for the Finance and Performance planning process for 2025-26 was outlined

Performance

- Similar challenges to the previous month but the Committee **focused on the deep dive presentation regarding virtual wards**. This demonstrated variance across the ICS in approach and work was underway to work out the best approach for patients.
- **Weight loss drugs risk presentation**, the Committee received a presentation from the Clinical Director regarding the financial challenges faced with prescribing of GLP1 agonists, which are drugs used to lower blood sugar, reduce appetite and hunger and slow digestion. There will be further liaison with NHSE regarding how this would be managed across England

Risk Register and Board Assessment Framework

- The committee received and commented on the quarterly update

The Committee met on 6 March and the confirmed minutes will come to the May Board meeting. The Chair will highlight the key points from this meeting in the overview slide, which include:

- Deep dive on 4 hour waits
- ICB Performance
- ICB Financial Performance
- Infrastructure Strategy Update

Risks and issues

- A number of risks have been successfully managed across the system during 2024/25.
- Significant underlying recurrent financial pressures continue to be evident, which present a challenge to delivery of balanced financial plans for 2024/25.
- There is an overarching risk of failure to deliver operational planning objectives as outlined in the corporate risk register.

Assurances

- ICB finance teams will monitor and report monthly on the risks
- The financial position of both the ICB and the wider ICS will continue to be reviewed in detail on a monthly basis by the Finance, Investment and Performance Committee
- Work is progressing on the 2025/26 financial plan

Recommendation/action required

The Board is asked to receive the confirmed minutes of 3 December 2024 and 6 February 2025 for assurance purposes.

Acronyms and abbreviations explained

ERF – Elective Recovery Fund
 Exec – Executive
 FPI – Finance, Performance and Investment
 FT – Foundation Trust
 ICB - Integrated Care Board
 ICS – Integrated Care System
 NENC – North East and North Cumbria
 NHSE – NHS England
 PFI – Private Finance Initiative
 SOF – System Oversight Framework
 WTE – Whole Time Equivalent
 YTD – Year to Date

Sponsor/approving executive director	Jon Rush, Independent Non Executive Member and Chair of Committee
Date approved by executive director	13 March 2025
Report author	Jen Lawson, Head of Corporate Governance

Link to ICP strategy priorities (please tick all that apply)

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? (please tick)	Yes		No	✓	N/A	
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Equality analysis completed (please tick)	Yes		No		N/A	✓
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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	✓
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Essential considerations

Financial implications and considerations	N/A
Contracting and Procurement	N/A
Local Delivery Team	N/A
Digital implications	N/A
Clinical involvement	N/A
Health inequalities	N/A
Patient and public involvement	N/A

Partner and/or other stakeholder engagement	N/A
Other resources	N/A