

Integrated Care Board

Date of meeting	17 July 2024
Title of paper	Reporting from Committees: Escalation and Assurance Report
Presented by	<p>Committee Chairs:</p> <ul style="list-style-type: none"> • Jim Birrell, Audit Committee • Sheena Cumiskey, Quality Committee • Jim Birrell, Finance and Performance Committee • Debbie Corcoran, Primary Care Commissioning Committee • Jane O'Brien, People Committee • Debbie Corcoran, Public Involvement and Engagement Advisory Committee <p>North West Specialised Services Committee</p> <ul style="list-style-type: none"> • Craig Harris, Senior Responsible Officer
Author	Board Secretary and Committee Officers (on behalf of the ICB Committee Chairs and the North West Specialised Services Committee SRO)
Agenda item	7
Confidential	No

Executive summary		
<p>This report highlights key matters, issues, and risks discussed at ICB committee meetings held since the last report to the Board on 15 May 2024 to alert, advise and assure the Board.</p> <p>Each summary report also highlights any issues, items referred or escalated to other committees or to the Board.</p> <p>Minutes approved by each committee to date are presented to the Board to provide assurance that they have met in accordance with their terms of reference and to advise the Board of business transacted at their meetings.</p> <p>From the 1 April 2024, the Lancashire and South Cumbria ICB along with the two other North West ICBs became responsible for the commissioning of 59 specialised services.</p> <p>A number of services that have been delegated need to be planned for the population of the NW region. A North West Specialised Services Joint Committee (NWSSJC) has been formed as a committee of the three NW ICBs Boards. A summary report is also included the Joint Committee's meeting held on 6 June 2024.</p>		
Recommendations		
<p>The Board is asked to:</p> <ul style="list-style-type: none"> • Note the Alert, Advise and Assure within each committee report and approve any recommendations as listed. • Note the summary of items or issues referred to other committees of the Board over the reporting period. • Note the ratified minutes of the committee meetings. 		
Which Strategic Objective/s does the report relate to:		Tick
SO1	Improve quality, including safety, clinical outcomes, and patient experience	✓
SO2	To equalise opportunities and clinical outcomes across the area	✓

SO3	Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential employees				✓
SO4	Meet financial targets and deliver improved productivity				✓
SO5	Meet national and locally determined performance standards and targets				✓
SO6	To develop and implement ambitious, deliverable strategies				✓
Implications					
		Yes	No	N/A	Comments
Associated risks			✓		
Are associated risks detailed on the ICB Risk Register?				✓	
Financial Implications				✓	
Where paper has been discussed (list other committees/forums that have discussed this paper)					
Meeting	Date	Outcomes			
Various committee meetings as listed within the report.	During May and June 2024	To provide the Board of committee business during this period.			
Conflicts of interest associated with this report					
Not applicable.					
Impact assessments					
		Yes	No	N/A	Comments
Quality impact assessment completed				✓	
Equality impact assessment completed				✓	
Data privacy impact assessment completed				✓	
Report authorised by:		Committee Chairs/ North West Specialised Services Committee Senior Responsible Officer			

Integrated Care Board – 17 July 2024

Committee Escalation and Assurance Report

1. Introduction

- 1.1 This report highlights key matters, issues, and risks discussed at ICB committee meetings held since the last report to the Board on 15 May 2024 to alert, advise and assure the Board. This report highlights key matters, issues, and risks discussed at ICB committee meetings held since the last report to the Board on 15 May 2024 to alert, advise and assure the Board.

Each summary report also highlights any issues, items referred or escalated to other committees or to the Board.

Minutes approved by each committee to date are presented to the Board to provide assurance that they have met in accordance with their terms of reference and to advise the Board of business transacted at their meetings.

- 1.3 From the 1 April 2024, the Lancashire and South Cumbria ICB along with the two other North West ICBs became responsible for the commissioning of 59 specialised services.

A number of services that have been delegated need to be planned for the population of the NW region. A North West Specialised Services Joint Committee (NWSSJC) has been formed as a committee of the three NW ICBs Boards. A summary report is also included the Joint Committee's meeting held on 6 June 2024.

2.0 Committee Reports and Approved Minutes

2.1 Extraordinary Audit Committee

Date: 19 June 2024		Chair: Jim Birrell
Key Items Discussed		
Item	Issue	Action
Alert		
External Auditor's draft Annual Report	As part of its Value For Money assessment, KPMG has concluded that the high level of financial risk within the ICB's initial 2023/24 financial plan constitutes a "significant weakness". Looking ahead, they have recommended that the ICB should only approve financial plans that have reasonable levels of risk.	Board to consider as part of its review of the 2023/24 Annual Report and Audited accounts.
Business Case process	KPMG's annual report to the Audit Committee notes that the ICB lacks a formalised business case process or documentation to support	Chief Finance Officer to action

	decision-making on future investments.	
Data Quality	There is an outstanding internal audit high priority recommendation regarding the need for an ICB Data Quality policy	Chief Digital Officer to action
Advise		
Completed internal audit reviews	<p>Six completed reviews were received –</p> <ul style="list-style-type: none"> • <i>Continuing Healthcare</i>, (limited assurance) • <i>Healthcare Contract Management</i>, (moderate assurance) • <i>Fit & Proper Persons</i>, (moderate assurance) • <i>Single Oversight Framework review</i>, (substantial assurance) • <i>Delegated Primary Care Functions review of annual declaration</i> – assurance rating not applicable • <i>DSPT Phase 1</i> - feedback provided, assurance rating not applicable 	Board to note
Fraud awareness training for staff	In 2023/24 76% of staff received fraud awareness training, which is slightly below the target required to meet the Government Functional Standard for Counter Fraud. The MIAA Anti-Fraud service team will work with the ICB to achieve the target figure.	Progress to be monitored during 2024/25
Assure		
Audit of 2023/24 accounts	KPMG has issued an unqualified opinion on the ICB's accounts. This means that they give a true and fair view of the financial performance and position of the ICB.	Board to note
Continuing Healthcare	The MIAA review noted that 'good progress has been made in establishing an in-house team to deliver service turnaround, the approach to which has been sound, including utilising external assistance which has delivered a significant return on investment	Share encouraging and positive update with team members
External review of governance	Given the Committee's responsibilities in the area, it was pleasing to note that KPMG's conclusions included, 'based on the risk assessment procedures performed we have not identified a significant risk associated with governance'.	Ensure continuing application of strong governance arrangements

Appendix A – Approved minutes of the Audit Committee meeting held on 28 March 2024:
[Approved Audit Committee Minutes - 28 March 2024.pdf](#)

2.2 Quality Committee

Date: 22 May 2024		Chair: Sheena Cumiskey
Key Items Discussed		
Item	Issue	Action
Alert		
Quality Committee Frequency	There was concern amongst committee members regarding insufficient time available to review agenda items in depth due to the frequency change of committee meetings to bi-monthly and the reporting cycle.	To be reviewed at the September 2024 committee, at which time 3 committee meetings will have taken place within the new reporting cycle.
Statutory Function reports – Learning Disabilities and Autism	<p>The current trajectory for inpatient care in Lancashire and South Cumbria (LSC) is that by March 2025 no more than 30 per million adults with a learning disability and/or who are autistic and no more than 12–15 per million under 18s with a learning disability and/or who are autistic are cared for in an inpatient unit.</p> <p>The ICB is meeting the under 18s rate but are not meeting the adult trajectory resulting in out of area placements. There are longer run plans to address the gaps in specialist beds within LSC.</p>	Further work required to be assured that effective short- and medium-term plans are in place for integrated community LD services and specialist beds to ensure appropriate care in the correct places.
Statutory Function reports – Children and Young People and SEND	<p>There is a critical need to address very long waiting times in community services, particularly for children with neurodevelopmental needs. Workforce shortages and a fragmented service model contribute to the issues being seen.</p> <p>This is a quality (safety experience & effectiveness) risk for the ICB and an inspection risk.</p>	<p>Some additional resource has been approved to support waiting list initiatives BUT it won't resolve long waiting times. A whole pathway review is underway, and a business case will be developed by Autumn 2024.</p> <p>ICB Board to be alerted to risk.</p>
Community Services Provider Quality Assurance	Chronic wound care and Lymphoedema services / pathways are fragile due to historic commissioning and workforce challenges	These services are part of ongoing work to review fragile community services and operational teams continue to mitigate risks.

Quality Impact Assessment (QIA) 6 monthly position update	Committee received an update on QIA processes and whilst a lot of progress has been made, some teams are still not consistently conducting QIAs or using them to inform decisions.	There is a requirement for further cultural change and improvement in risk mitigation. Consideration is being given to embedding the process into a wider ICB Project Management Office (PMO) function and co-ordination.
Clinical Effectiveness Group Report (Triple A)	New medications for managing weight loss in obesity were noted to be available but concerns raised regarding the impact of this on financial recovery and the impact on primary care budgets and capacity (potentially consuming a third of resources).	Alert board. Develop system position statement and develop clear plans regarding prescribing.
Advise		
Patient and Safety Report including risk and PSIRF	There are currently 85 providers who have not submitted a policy or plan for the Patient Safety Incident Response Framework.	For those providers who are not engaging or offering a positional update on progress, escalation has been made formally through the contractual route to the Contract Team ensuring that Quality Assurance colleagues are fully sighted on the position. Updates will be provided to committee
Risk and Escalation	Two Prevention of Future Deaths notifications (Regulation 28) have been received by NHS Trusts, one relating to a discharge summary being factually incorrect regarding the cause of death. The second related to a death in 2022 with the coroner seeking further assurance that actions have been implemented.	Work is ongoing in both trusts.
LSCICB self-assessment against National Quality Board guidance and NHS England statutory quality requirements	Committee received a paper benchmarking the ICB against the guidance. The main gap relates to effectiveness including a requirement to develop strategies for implementing and discussing NICE guidelines with service providers and throughout the ICB. Further work is also required to ensure there is clear communication across all ICB functions regarding quality roles and responsibilities against the self-assessment national guidance.	To be discussed at an ICB Executive meeting to ensure roles are understood with an update back to committee in November 2024

Independent Review – Greater Manchester Mental Health Report NHS FT – Summary Report	Committee received a summary report with highlighted learning points.	Learning for ICB noted.
What matters to you? LSC Medicines strategy 2025-28	The committee approved the medicines strategy 2025-28, with the caveat that executives needed to review the resource limitations for implementation and simplification of the strategy document to improve clarity for the public regarding accessibility.	Concerns were noted about resource limitations that would require an executive discussion.
Assure		
Patient and Safety Report including risk and PSIRF	All provider Root Cause Analysis reports waiting for ICB review have been cleared. The current position as of 13 May 2024 is that there are 251 open Serious Incidents; this demonstrates a reduction of 98 since the last report. The ICB is compliant on the Patient Safety Training national syllabus.	Team to continue overseeing Serious incidents.
Statutory Function reports - AACC	Quality improvements continue with no fast-track breaches over the last 6 months but the service remains under financial pressure.	Service being recognised as an exemplar from region with the team being acknowledged for their positive impact. The risk relating to financial challenge remains on the Board Assurance Framework.
Statutory Function reports – Learning Disabilities and Autism	Monthly benchmarking confirmed that the number of LD health checks completed, and health action plans issued are higher than previous years with improvement being driven on the quality of these checks	Continue improvement work
Provider Quality Accounts	The 2023/24 Quality Accounts are required to be submitted to meet the publication date of 30 June 2024 and will include the ICB narrative response. Committee approved the proposed approach for review of Quality Accounts.	The quality team are working with provider colleagues and will bring a full and final position statement to committee in July 2024, which follows the same format as agreed in 2023.

Appendix B – Approved minutes of the Quality Committee meeting held on 17 April 2024:
[Approved Quality Committee Minutes - 17 April 2024.pdf](#)

2.3 Finance and Performance Committee

Date: 6 June 2024		Chair: Jim Birrell
Key Items Discussed		
Item	Issue	Action
Alert		
Financial plan update	<p>Whilst agreement is still to be reached on the ICB's 2024/25 financial control total, NHS England has outlined that it intends to recover deficits through a combination of reduced capital and revenue allocations. For Lancashire and South Cumbria, the 2024/25 capital allocation would be reduced by £10m whilst the revenue recovery, (which would not commence until next year), would be limited to 1% of the total allocation, which equates to c£44m.</p>	To be considered further when control total agreed.
System Recovery and Transformation Programme	<p>The programme has developed significantly in recent months and the committee noted progress on the development of system-wide projects, eg, transforming care in hospitals and developing new models of delivery that could increase short term capacity.</p> <p>The work includes oversight of projected 2024/25 savings in excess of £500m. However, it was highlighted that significant risks and challenges remain in delivering the package. The Finance and Performance Committee will monitor progress and highlight major financial concerns to the Board, (the Quality Committee will also be monitoring progress).</p>	Note position and update Board as and when appropriate.
Advise		
Quoracy at meetings	New quoracy arrangements that will make the Finance and Performance Committee consistent with other ICB assurance committees, were recommended for approval.	Board to approve.
Healthcare contracting	The Committee noted the ICB's enhanced, integrated approach to the oversight of healthcare contracts. Regular updates will be	Note position.

	provided on general progress and areas of concern.	
Assure		
Urgent and Emergency Care (UEC), Winter update	<p>The Committee reviewed the lessons learned from last winter and considered proposals for the 2024/25 UEC investment plan.</p> <p>Looking to the future, discussion will take place outside the meeting on how best to provide assurance to the Committee/Board on the effectiveness of the work being undertaken to deliver UEC.</p>	Board to approve proposed investment plan.
Urgent and Emergency Care (UEC), Winter update	<p>The Committee reviewed the lessons learned from last winter and considered proposals for the 2024/25 UEC investment plan.</p> <p>Looking to the future, discussion will take place outside the meeting on how best to provide assurance to the Committee/Board on the effectiveness of the work being undertaken to deliver UEC.</p>	Board to approve proposed investment plan.

Date: 1 July 2024		Chair: Jim Birrell
Key Items Discussed		
Item	Issue	Action
Alert		
Virtual Ward Utilisation	Virtual ward utilisation rate was 52% in May but with much variation across Places.	Continue to encourage greater use of the facility.
Transforming Care in Hospitals	Work on fragile service remediation is moving forward but progression is slow.	Consider ways of speeding up the exercise.
Advise		
ICS 2024/25 savings target	The ICS is seeking to achieve £531m savings this year. At month2 £42m has been delivered, which reflects the fact that a substantial proportion of the intended schemes are still to be implemented.	Continue close monitoring of progress.
Contract management	The first round of the Integrated NHS Trust Provider contract review meetings will take place later this month. The meetings will facilitate, inter alia, detailed operational and strategic contracting discussions.	Review feedback when available.
Integrated Performance Report	F&P will in future place greater reliance on the monitoring and associated follow-up work of the	Board to note Committee's proposed changed emphasis.

	contents of the IPR by the Business & Sustainability Group. This should enable the Committee to devote more time to broader, reflective analysis of performance.	
Assure		
2024/25 Financial Plan	At month 2 the ICS is on target to deliver the agreed 2024/25 financial plan.	Board to note.
Data Quality Policy	Subject to clarifying the role of F&P in the oversight process, the Committee supported the proposed Data Quality Policy.	Board to note policy.
Dental Activity	The Committee were encouraged by the increased volume of dental activity being undertaken across the ICB – the figure has grown has grown from 60% of expected levels in 2022/23 to 91.5% in April 2024. This is above both the national, (90.8%), and the north west, (87%), figures for April 2024.	Note improvement and continue to monitor activity.

Appendix C – Approved minutes of the Finance and Performance Committee meeting held on 29 April 2024:

[Approved Finance and Performance Committee Minutes - 29 April 2024.pdf](#)

Appendix D – Approved minutes of the Finance and Performance Committee meeting held on 6 June 2024:

[Approved Finance and Performance Committee Minutes 6 June 2024.pdf](#)

2.4 Primary Care Commissioning Committee

Date: 1 May 2024		Chair: Debbie Corcoran
Key Items Discussed		
Item	Issue	Action
Alert		
-	-	-
Advise		
Local Enhanced Services (LES) including General Practice Quality Contract (GPQC) Update	Update received on the LES and GPQC, following ratification of commissioning intentions by the Board for 2024/25. Primary Medical Services Group (PMSG) of PCCC is overseeing detailed operational implementation arrangements, and the General Practice Quality Committee (GPQC) continuing oversight of service reviews, developing the approach for next year.	

Withnell Procurement Evaluation Strategy (PES)	Approval of the Procurement Evaluation Strategy (PES) for Withnell procurement, with assurance that the PES complies with all Procurement Selection Regime (PSR) requirements, consideration of engagement and involvement with patients, and that the timeline is deliverable. Committee feedback incorporated on the threshold for an automatic pass.	
Primary Care Capital Report 2024-25	Approval of proposed initial apportionment of the defined and ring-fenced primary care capital allocation for 2024/25, which totals just over £3.1m. All investments are in line with national guidance and regulations and contingency plans are in place to ensure full investment of the allocated resources. Development session will be convened to review thoroughly the larger, more strategic, proposed infrastructure developments.	PCCC development session scheduled for 22 August 2024
Grasmere Local Pharmaceutical Services Contract Uplift	Approval of £15,000 annual uplift for LPS contractor, securing continued service provision.	
Assure		
Primary Care Assurance Framework Annual Submission	Approval of the ICB's self-declared submission against NHSE's assurance framework for those delegated areas within the Committee's remit in 2023/24. All four main domains (covering compliance with mandated guidance, service planning and provision, contracting and contractor or provider compliance and performance) RAG rated as fully compliant and evidenced.	
Draft Primary Care Commissioning Committee Business Plan 2024/25	Approval of 2024/25 Business Plans for the Committee and 5 working groups.	

Date: 13 June 2024		Chair: Debbie Corcoran
Key Items Discussed		
Item	Issue	Action
Alert		
-	-	-
Advise		
Dental Referral Management Service Procurement	Approval of request for information (RFI) process to test the market for a dental referral management service, given the current contract ends 31 March 2025. The service provides a single point of access for processing of referrals from primary care dentists and orthodontists, ensuring a consistent quality of referrals, ability to monitor volumes, support demand management and also triage referrals.	Outcome of RFI to be considered as future meeting
Q4 Finance Report	Received and noted, with development of future reports to include performance information.	Development of refined report
Pharmacy Access Programme	Overview received of the pharmacy access programme, one of the key work priorities for the primary and community care team – covering commissioning of services, the challenges facing community pharmacy and an overview of the pharmacy access programme. Access to and uptake of the main services prioritised varies (Pharmacy First, Medicine Supply Service, Hypertension Case Finding and Contraception) with a referral to Patient Involvement Engagement and Advisory Committee (PIEAC) to consider involvement and engagement in service delivery and promotion to local populations where available.	Referral to PIEAC
Assure		
Risk Management Report	Committee was updated on the management and oversight of risks held on the Operational Risk Register (ORR) relating to their responsibilities, as well as the business of the committee and the risk management activity undertaken during the reporting period. 3 new risks considered, relating to: Risk ID ICB038: High levels of oral health issues (dental caries)	

	<p>NEW Risk ID ICB044: GP Contract 2024/25 dispute – potential industrial action</p> <p>NEW Risk ID ICB050: Ability of the ICB to effectively identify and respond to quality concerns in primary care.</p> <p>Work completed to support the PCCC’s Groups to align their risk process to the ICB’s risk management framework and ensure a consistent approach to identifying, managing and reporting risks relating to the work of the Groups – with improved visibility of those risks in the Group Escalation Reports.</p>	
Committee Escalation and Assurance Report	Received and assurance noted, noting the refined approach to reporting risks through the PCCC Groups.	

Meeting Held 11 July 2024 – A verbal update will be provided.

Appendix E – Approved minutes of the Primary Care Commissioning Committee meeting held on 1 May 2024:

[Approved Primary Care Commissioning Committee Minutes 1 May 2024.pdf](#)

2.5 People Committee

The People Committee has not met since last reported to the Board. The next meeting will be held on 31 July 2024.

2.6 Public Involvement and Engagement Advisory Committee

25 April 2024 - A Development Session was held on 25 April 2024 – A verbal update will be provided.

Date: 26 June 2024		Chair: Debbie Corcoran
Key Items Discussed		
Item	Issue	Action
Alert		
-	-	-
Advise		
Committee Effectiveness: embedding learning from the development workshop in April 2024	The committee agreed a series of actions as a result of a development workshop which took place on 24 April 2024. The actions include the establishment of two subgroups to focus on reaching diverse communities and engaging with audiences who are digitally excluded.	-

ICB consultation working group	The committee reviewed terms of reference and an update for the newly established group focusing on progressing the process for formal consultation when needed for system transformation – with the group reporting into the ICB Programme Board as well as acting as a subgroup for this committee	-
Committee Effectiveness: embedding learning from the development workshop in April 2024	The committee agreed a series of actions as a result of a development workshop which took place on 24 April 2024. The actions include the establishment of two subgroups to focus on reaching diverse communities and engaging with audiences who are digitally excluded.	-
Assure		
Public engagement and involvement – February - May 2024	The committee were assured across a range of activities being delivered by the ICB and the learning being embedded. A series of webinars are being established to share expertise and best practice in engagement and involvement, and all ICB Board members will be invited. The committee noted that the forward view of upcoming engagement and involvement activities had consideration for current the pre-election period.	Board members to receive invites to attend the series of engagement and involvement webinars
Complaints annual report	The committee received and approved the annual report which all NHS organisations with a duty to handle complaints are required to submit to the Department of Health and Social Care (DHSC) each year.	The report will be shared with the Board for information
Involvement and engagement process and outcomes to support urgent and emergency care (UEC) strategy	The committee received a presentation and considered the engagement which has taken place regarding the UEC strategy, prior to its submission to the Board in July	-
Shaping Care Together: engagement on case for change	The committee received an overview and reviewed the involvement and engagement which has been undertaken prior to the Board receiving the updated case for change in July.	-

Appendix F – Approved minutes of the Public Involvement and Engagement Advisory Committee meeting held on 28 February 2024

[Approved minutes of the Public Involvement and Engagement Advisory Committee 28 February 2024.pdf](#)

2.7 North West Specialised Services Joint Committee

Date: 6 June 2024	Chair: Clare Watson, Assistant Chief Executive, NHS Cheshire and Merseyside	
Key matters, issues, and risks discussed at the NWSSC meetings held since the last report to the Board on 15 May 2024 is highlighted within this report.		
<i>Issues of interest to the Board from the 6 June Joint Committee Meeting include:-</i>		
<ul style="list-style-type: none"> • Lancashire Teaching Hospitals NHS Foundation Trust has been issued with a Contract Performance Notice regarding delivery of mechanical thrombectomy. A NW-wide Rapid Quality Review involving all three NW providers is planned. • The Thirlwall inquiry to review issues surrounding the Lucy Letby case will start hearing evidence in September. • For 2024/25, the current NW Specialised Commissioning team will continue to be hosted by NHS England, with budgets and commissioning responsibilities delegated to ICBs. A national Target Operating Model for retained specialised in development. This will inform the form and function of the NW regional Specialised Commissioning Team that will transfer to the Lancashire and South Cumbria ICB in April 2025. • Work is continuing on the pipeline for the introduction of new NHS Alzheimer’s drugs. 		
Key Items Discussed		
Item	Issue	Action
Alert		
Inter Arterial Thrombectomy Surgery for the treatment of Ischaemic Stroke	The thrombectomy service Royal Preston Hospital is generating media coverage as there have been a number of incidents whereby patients have experienced poorer outcomes as the service is not currently available 24/7.	A Rapid Quality Review is planned across all three North West ICBs around mechanical thrombectomy services given continuing challenges to deliver 24/7 services in Lancashire and South Cumbria.
Advise		
Thirlwall Public Inquiry update	Interviews will be conducted over the summer for September hearings relating to the Thirlwall Public Inquiry to examine events at the Countess of Chester Hospital and their implications following the trial, and subsequent convictions, of former neonatal nurse Lucy Letby of murder and attempted murder of babies at the hospital.	Communications handling - media coverage and interest expected.
NW Specialised Commissioning Team	For 2024/25, the current NW Specialised Commissioning team will continue to be hosted by NHS England, with budgets and commissioning responsibilities	A new operating model for the regional specialised commissioning team is in development. Vacancies have been made available to internal applicants initially and a full

	<p>delegated to ICBs. The recruitment freeze in NHSE has now been lifted.</p> <p>A national Target Operating Model for retained specialised in development. This will inform the form and function of the NW regional Specialised Commissioning Team that will transfer to the Lancashire and South Cumbria ICB in April 2025.</p>	<p>complement of staff should soon be in place.</p>
Complex Termination of Pregnancy Procurement	<p>The procurement process for a Complex Termination of Pregnancy service for the population of the NW has been halted and is being reviewed.</p>	<p>A new process is planned to start in Quarter 2 of 2024/25 under the Provider Selection Regime.</p>
Specialised Service Suitable but not ready for Delegation in 2024/25	<p>In March 2024 a national review of the 57 services 'suitable but not yet ready for delegation' was undertaken and identified that a further 25 services are now suitable for delegation to ICBs in April 2025.</p>	<p>The NWSSC will lead work to oversee the planning of these services throughout 2024/25.</p>
Assure		
Specialised Commissioning Contracts 2024/25	<p>Contract offers have been issued to all NW providers.</p>	<p>Detailed conversations are in progress to finalise 2024/25 contracts.</p>
Governance documents	<p>Signed Delegation and Commissioning Team Agreements have been fully executed by NHS England.</p>	<p>Documents to be circulated to ICBs.</p>
Risk processes	<p>To ensure consistency of how risks are reported through the respective Boards risk processes are being reviewed and aligned to ICB processes.</p>	<p>Clinical risk review meeting in planned with ICB and NHSE medical directors and directors of nursing.</p>
Pipeline for new drugs	<p>Work continues nationally on the NICE appraisal pipeline for new drugs for Alzheimer's disease.</p>	<p>NICE evaluation of the first two new drugs will be decided in the summer that will inform regional implementation plans.</p>
Risk: Advise the board which risks were discussed and if any new risks were identified.		
Ref.	Risk	Action taken/update
Thrombectomy service (L&SC)	<p>The Thrombectomy Service at L&SC is generating media attention due to a number of incidents whereby patients have experienced poorer outcomes as the service is not currently 24/7.</p>	<p>A Contract Performance Notice has been issued to Lancashire Teaching Hospitals NHS Foundation Trust.</p> <p>Plans for a North West regional rapid quality review relating to Thrombectomy availability focusing on access to the service. Improved coverage already in place.</p>

Adult Critical Care Transport Service Procurement	Work is underway to design, develop and implement a single Adult Critical Care Transfer Service (ACCTS) for the North West of England to ensure a sustainable, standardised model across the region from April 2025. ACCTS provides coordination, triage, decision-support and transfer of critically ill patients between hospitals for escalation to specialist care, repatriation and capacity reasons.	The project is being led by a dedicated project manager and clinical lead. Leadership and management oversight for the project is provided by the Adult Critical Care (ACC) network director in LSC. All three ACC networks have collaborated on service model options. A Procurement Group has been established comprising representatives from all three ICBs.
Cancer Waiting Time Standards	Risks of patient harm as a result of non-delivery of cancer waiting time standards for specialised cancer surgery/chemotherapy/radiotherapy	Work with cancer alliances on 24/25 cancer delivery plans and to support trusts to improve performance. Work through the performance tiering system led by regional and national teams for the highest risk Trusts.
Neurosciences	Poor recovery of GM neurosciences activity, including spinal surgery, could lead to patient harm.	Regular service level meetings with neurosciences providers to discuss actions being undertaken to improve their positions. Regular dialog and involvement with the system to review performance. Internal processes in place to monitor performance. Bimonthly board in C&M, Similar arrangements being established in LSC.
Cardiac Surgery	Poor recovery of cardiac surgery and complex cardiology waiting lists and unmet increased demand, which could result in patient harm.	Regular service level meetings with cardiac providers to agree action plans being undertaken to improve their positions. Regular dialog and involvement with the system to review P2 performance. Internal processes in place to monitor performance.
Retinopathy Prematurity Screening	Risk that premature babies will have avoidable childhood visual disability due to lack of skilled Retinopathy of Prematurity retinal screening staff in neonatal units across the NW.	A new clinical model is in development, led by the NW Neonatal ODN.
Thrombectomy service (L&SC)	The Thrombectomy Service at L&SC is generating media attention due to a number of incidents whereby patients have experienced poorer outcomes as the service is not currently 24/7.	A Contract Performance Notice has been issued to Lancashire Teaching Hospitals NHS Foundation Trust. Plans for a North West regional rapid quality review relating to

		Thrombectomy availability focusing on access to the service. Improved coverage already in place.
Adult Critical Care Transport Service Procurement	Work is underway to design, develop and implement a single Adult Critical Care Transfer Service (ACCTS) for the North West of England to ensure a sustainable, standardised model across the region from April 2025. ACCTS provides coordination, triage, decision-support and transfer of critically ill patients between hospitals for escalation to specialist care, repatriation and capacity reasons.	The project is being led by a dedicated project manager and clinical lead. Leadership and management oversight for the project is provided by the Adult Critical Care (ACC) network director in LSC. All three ACC networks have collaborated on service model options. A Procurement Group has been established comprising representatives from all three ICBs.

3.0 Summary of items or issues referred to other committees or the Board over the reporting period

Committee	Item or Issue	Referred to
Quality Committee	Community Services Provider Quality Assurance Committee to advise as to how the clinicians (e.g., Locums) who are not assigned to a GP practice would receive the medical examiners training further to the introduction of the statutory medical examiner system from 9 September 2024, which sees General Practices in England and Wales who are notified of a patient death working closely with medical examiners.	Primary Care Commissioning Committee
Audit Committee	Continuing Healthcare Audit (MIAA) As referenced above, the good progress made in establishing an in-house team to deliver service turnaround, the approach to which had been sound, including utilising external assistance which had delivered a significant return on investment would be referred to the Quality Committee.	Quality Committee
Primary Care Commissioning Committee	Pharmacy Access Programme The programme is one of the key work priorities for the primary and community care team. Access to and uptake of the main services prioritised varies (Pharmacy First, Medicine Supply Service, Hypertension Case Finding and Contraception). Referred to the Patient Involvement and Engagement Advisory Committee (PIEAC) to consider involvement and engagement in service delivery and promotion to local populations where available.	Public Involvement and Engagement Advisory Committee

4.0 Conclusion

4.1 Each of the committees has conducted their business in line with their terms of reference and associated business plans.

5.0 Recommendations

5.1 The Board is requested to:

- Note the Alert, Advise and Assure within each committee report and approve any recommendations as listed.
- Note the summary of items or issues referred to other committees of the Board over the reporting period.
- Note the ratified minutes of the committee meetings.

Committee Chairs

July 2024