

Integrated Care Board

Date of meeting	15 January 2025	
Title of paper	Committee Escalation and Assurance Reports (a) Public Involvement and Engagement Advisory Committee (b) Primary Care Commissioning Committee (c) Quality Committee (d) Finance and Performance Committee	
Presented by	ICB Committee Chairs: (a) Debbie Corcoran, Public Involvement and Engagement Advisory Committee (b) Debbie Corcoran, Primary Care Commissioning Committee (c) Sheena Cumiskey, Quality Committee (d) Roy Fisher, Finance and Performance Committee	
Author	Board Secretary and Committee Officers	
Agenda item	12	
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 13 November 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>The Triple A from People Committee held on 30 October 2024 was reported to ICB Board on 13 November 2024 along with the 31 July 2024 minutes. There is not an inclusion within this report for People Committee as the next meeting is scheduled for 29 January 2025.</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 November and December 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:	ICB Committee Chairs			

Integrated Care Board – 15 January 2025

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 13 November 2024 to alert, advise and assure the Board.
- 1.2 Each summary report also highlights any issues, items referred or escalated to other committees or to the Board.
- 1.3 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.

2. Committee Reports and Approved Minutes

2.1 Public Involvement and Engagement Advisory Committee

Date: 18 December 2024		Chair: Debbie Corcoran
Key Items Discussed		
Item or issue	Issue	Action
Alert		
Nil		
Advise		
'Your health. Your future. Your say.' engagement programme and public insights.	Summary report considered from broad programme of public engagement, providing the ICB with insight from the public regarding the vision for improving health and care and what is important to local people in relation to transformation of health and care. Summary noted to align to key public insights reports completed in past 18 months, providing valuable insights for consideration in the ICB's commissioning intentions and delivery of the recovery and transformation programme for Lancashire and South Cumbria.	The ICB's commissioning intentions and 2030 Roadmap programme to consider public insight and perceptions, to form a set of 'you said, we've listened' statements.
Assure		
Engagement in priority wards – population health improvement	Assurance on ICB and system engagement and involvement with communities through partnership work at ward level around population health improvement, with rich examples of insight and collaboration to tackle health inequity and assurance of alignment with the ICB strategy for working in partnership with people and communities.	Continued systematic multi-agency work in place-based areas and demonstration of engagement and involvement adding impact

Citizen's Health Reference Group (CHRG)	Update received on the panel of citizen's advisors established by the ICB as part of a range of mechanisms to improve engagement and involvement of local people in service improvement and transformation. Assurance received on the approaches in place to embed lived experience in service transformation and change, with evidence of the advisors being involved in a range of service improvement programmes across the ICB.	Ensure patient/public voice and lived experience from the CHRG is considered and contributes to the recovery and transformation and priorities of the ICB
Healthwatch	Update report received from Healthwatch with key insights shared and heard by the ICB, and triangulating with ICB reports and activity. Partnership agreement with Healthwatch is supporting collaboration and will evidence impact.	Continued work with local Healthwatch to listen, and consider, the experiences and insight from the public and patients
Shaping Care Together	Update from the ICB Consultation Working Group assured on the approach and levels of engagement from the pre-consultation and engagement programme for 'Shaping Care Together' and approach to involvement during the options appraisal process – with levels and analysis of engagement and involvement to-date reviewed.	Updates on progress and plans for formal consultation to be developed working in partnership with Cheshire and Merseyside ICB and presented to the joint committee for the programme.
New Hospitals Programme for Lancashire and South Cumbria.	Update from the ICB Consultation Working Group assured on the approach and plan for a programme of pre-consultation and engagement for the New Hospitals Programme – with the approach aligning with a framework for pre-consultation and engagement previously reviewed and supported by PIEAC.	Delivery of a programme of pre-consultation engagement in early 2024 with report of the activity and findings being shared with PIEAC in March 2025.

- **Appendix A** – Approved minutes of the Public Involvement and Engagement Advisory Committee meeting held on 25 September 2024: [Appx A - FINAL PIEAC minutes 25 Sept 2024 Ver.3.pdf](#)

2.2 Primary Care Commissioning Committee

Date: 25 November 2024		Chair: Debbie Corcoran
Key Items Discussed		
Item	Issue	Action
Alert		
-	-	-
Advise		
Dill Hall Practice	Options considered for continued provision of primary medical services at Dill Hall practice in Accrington, with approval of a 12-month contract extension for the existing provider (East Lancashire Alliance) while the full Options Appraisal for long-term service	-

	provision is progressed.	
Special Allocation Scheme (SAS)	6-month short-term contract extension approved for existing provider of the SAS (Compass Medical Practice) to ensure continued access to primary medical services for patients while progressing the Most Suitable Provider process under the Provider Selection Regime to secure long-term provision	-
Assure		
-	-	-

Date: 20 December 2024		Chair: Debbie Corcoran
Key Items Discussed		
Item	Issue	Action
Alert		
-	-	-
Advise		
Relocation requests approved for 2 primary care practices	2 relocation requests considered and approved: a) Relocation of P81726 King Street Medical Centre (from 43 King Street, Accrington, BB5 1QE to Acorn Primary Health Care Centre, 421 Blackburn Road, Accrington, BB5 1RT) b) Relocation of P81166 from Dill Hall Surgery (6-8 Church Street, Accrington, BB5 4LF to Acorn Primary Health Care Centre, 421 Blackburn Road, Accrington, BB5 1RT)	-
Approval of General Practice Improvement Grants (GPIG) for 2 practices	2 applications for GPIG approved: a) Aughton Surgery in Ormskirk (grant totalling £143,500) b) Lockwood Surgery in Poulton-Le-Fylde (grant totalling £127,073)	-
Assure		
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- **Appendix B** – Approved minutes of the Primary Care Commissioning Committee meeting held on 10 October 2024: [Appx B - App Part 1 ICB PCCC Minutes - 10.10.24.pdf](#)
- **Appendix C** – Approved minutes of the Primary Care Commissioning Committee meeting held on 25 November 2024: [Appx C - Approved Part 1 Minutes - 25.11.24.pdf](#)

2.3 Quality Committee

Date: 20 November 2024		Chair: Sheena Cumiskey
Key items discussed		
Item or issue	Issue	Action
Alert		
Maternity	LMNS noted a 'cluster of neonatal deaths' at one trust and a review is underway to ascertain if there is any cause for concern	Committee requested an update in December as assurance required. Quality team to triangulate concerns with wider patient safety and quality metrics within the trust. Update to December Committee
Patient Safety	Committee alerted to 2 Never Events and a death in AED reported in line with PSIRF. ICB Quality visits regarding UEC due to start before end November in line with NHSE recent request regarding safety in urgent care.	Committee to receive feedback on quality visits in December and assurance regarding oversight by Trust Quality Committees for Never events and challenges in UEC.
Mechanical Thrombectomy	Committee received an update given the high level of patient safety risk in this clinical pathway. The gap in provision and patient safety risk remains, although there have been no reported patient harms associated with the gaps in service. Discussions are ongoing between the trust, ICB and NHSE to find a solution.	Committee not assured regarding this service provision and requested that teams maintain pressure to find a solution. Alert Board of ongoing risk and maintain committee oversight until assurance received.
Histopathology	Significant backlog of histopathology tests at one Trust with some evidence of patient harm. Rapid quality review has been undertaken involving system colleagues and some mitigations have been put in place to manage the risks. However, some actions remain outstanding, and assurance is required that clinical prioritisation is occurring to ensure that histopathology blocs for people on the 2-week pathway are being analysed quicker through the backlog.	Committee not assured regarding this service risk and require further information. Alert Board to ongoing patient safety risks. Receive an update in January and maintain committee oversight until assurance is received regarding impact of mitigations.
Nice Technology Appraisal [TA]	Committee received a paper on medicines optimisation and medicines safety which alerted them to the challenge of implementing some NICE TAs due to the associated costs including some new weight loss medications.	Board to be alerted to cost associated with some NICE TAs and to be informed of all options and impacts to enable informed decisions.
Advise		
Risk Report	Reviewed 3 BAF risks and 10 Corporate risks relevant to Quality Committee.	Quality Committee to re-assess risk regarding

	Risk in relation to SEND is currently being reassessed. Referrals for education health and care plans (EHCP) have significantly increased and there is a risk that statutory duties are not being met and EHCPs are not being reviewed in a timely manner.	primary care quality in December. Committee noted concerns regarding SEND duties and will review risk in December.
Infection Prevention and Control	Committee received comprehensive report regarding IPC activity across system. Noted ongoing actions being taken by a Trust to address high numbers of Cdiff infection and whilst some progress being made it is not as yet improving the rates. Committee noted risk to infection rates of high numbers of patients on UEC pathways and need for a system approach to prevention. Noted requirement for ingoing system 'push' regarding flu & covid vaccinations	Continue to monitor impact of actions regarding Cdiff rates at one trust
Medicines Management Update	Committee received an update on medication safety work across system and noted key work on Opioid prescribing and establishment of a single formulary in LSC.	Noted significant progress regarding medicines safety
Maternity	Update received regarding LMNS oversight and quality improvement work. Each of the 4 maternity services in L&SC continue to provide reports alongside the quality and safety programme of work. The programme of quality assurance visits for maternity incentive scheme, reviewing evidence and supporting, continue.	Further updates to be provided to Quality Committee to understand the impact of the work being undertaken.
Patient Safety	Work continues by the Patient Safety Team to support those independent providers not engaging with the Patient Safety Incident Response Framework.[PSIRF] The team remain focussed on processing the close down of the remaining legacy serious incidents and continue to engage with providers to ensure learning is identified and implemented. Concerns emerging regarding a procedure being undertaken in the paediatric ophthalmology service at one Trust which they are not commissioned to undertake. Action being taken jointly with NHSE to gain assurance that the services are safe and equitable.	Committee require further updates on Independent providers compliance with PSIRF as still not assured. Committee to receive a further update and assurance from Spec Com (NHSE).
Approved policies	The ICB Quality Committee supported the approval of some provider Patient Safety Incident Response Framework policies, plans for ADHD Northwest and St Mary's Hospice.	Committee approved several policies

Assure		
Care Sector report	<p>Committee received a report regarding the overarching ICB Adult care Sector programme of work with key priorities aligned to risks. They noted the improvement work undertaken and were assured that the overall number of L&SC care home beds rated as good is higher than the national average, however, there is significant variation across the patch and this was noted.</p> <p>Recruitment and retention of staff remains a challenge in this sector.</p>	<p>Quality Committee were assured regarding improvement work in this area and overall position of the sector but noted the variation within Place.</p> <p>Quality Committee to refer recruitment and retention in the care sector to the People Committee.</p>

Date: 18 December 2024	Chair: Sheena Cumiskey
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Key items discussed

Item or issue	Issue	Action
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Alert		
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Children & Young People & SEND	<p>Committee were alerted to 3 key areas of risk:</p> <p>Waiting times across Neurodevelopment pathways for children remain very long. A statutory inspection for Lancashire has just completed and the formal report in January will flag waiting times and timeliness of EHCPs as an area of concern for the ICB.</p> <p>There is a gap in dysphagia support for children over 5 years in Central Lancashire, whilst some mitigations are in place the long run impact on children is unclear and a risk.</p> <p>The length of Occupational Therapy waits at one provider is causing concern.</p>	<p>To alert Board to the ongoing risk of harm associated with long waits across therapy and the Neurodevelopment Pathways for CYP and the risk of regulatory action from a formal SEND inspection.</p> <p>To request that Board give careful consideration regarding increasing the allocation of resources to this agenda (recognising this may require a shifting of resources from another area) and of prioritising CYP especially in the areas of therapy waiting times.</p> <p>ICB CYP team to continue working with providers to manage long waiting times for OT.</p> <p>ICB CYP team to complete review of Neuro Developmental Pathway and bring recommendations to Board. The team to also ensure consideration of</p>
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		how to engage the 3 rd sector more in provision across these pathways.
Patient Safety	<p>Committee were alerted to three ongoing safety concerns in commissioned services:</p> <p>Ongoing Histopathology test backlog at one trust. Despite some mutual aid from other trusts the backlog remains very high and there is some evidence of patient harm. Commissioners and committee are not yet assured regarding recovery plan and mitigations.</p> <p>Primary Care PSIRF guidance is now published BUT delivery across primary care will require a step change in practice and this has not been included in the contract so committee alerted to the risk that many GP practices will not deliver the PSIRF without funding.</p> <p>Ongoing risks associated with the MHRA (Medicines and Health Care products Regulatory Agency) patient safety alert regarding Valporate prescribing because of gaps in capacity at one trust to implement the new guidance. Plans have been formulated whereby primary care will support the trust however these mitigations will only be implemented from April so the patient safety risk remains a concern.</p>	<p>Alert Board to ongoing risk. Committee requested assurance that commissioners are supporting the trust and asked to receive updated recovery plan in January.</p> <p>Patient safety and primary care teams to continue to support practices to review significant events as they do now and support pilots of the PSIRF in those practices willing to test guidance.</p> <p>Ask Primary Care Team to raise issue of PSIRF not being included in contract with regional and national colleagues.</p> <p>ICB teams to continue to support the trust and through the Valproate steering group monitor impact on patients.</p>
Advise		
Patient Safety	<p>Committee were advised regarding new Never Events (NE) since the last meeting. These included a maladministration of insulin in one trust (no harm) and a retained swab in maternity services in another trust. There was a general discussion about the rise of NE nationally and across LSC where on average there are 2 NE a week. Committee noted factors from learning such as staff fatigue and pressure on services due to volume of demand.</p> <p>Committee were advised of an inpatient death</p>	<p>Committee requested to understand extent of patient safety and human factors training across providers and for ICB team to check what insulin safety training is currently being used in trusts.</p>

	in one trust and that a Quality Round table would be taking place with this trust	Committee to receive a report regarding this in January
Quality Deep Dive	<p>Committee received a report regarding one trust where there have been several concerns. This review has been shared with the trust and regional colleagues who are undertaking a 'deep dive'. There were 3 areas that the committee were keen to receive further information on to understand what support was required at the trust:</p> <ol style="list-style-type: none"> 1. Mortality – it is not clear if the rise in mortality is actual or a data issue. 2. Histopathology backlog 3. UEC pathways and number of patients having to be cared for on corridors. 	Committee requested a further report in January with a focus on the three areas and to receive an update on what support was being provided to the trust and to ask Place colleagues what impact their initiatives are having on UEC pathways
National Quality Board (NQB) Guidance	Committee received a report containing an ICB self-assessment against the NQB guidance. Further work is needed on the patient experience section and clinical effectiveness was flagging as the area requiring most development. An action plan and mitigations are in place.	A further update will be received at February Committee
Primary Care Quality	Committee received the triple A report from Primary Care Quality Group and noted the risk in one part of the ICB regarding the impact of GP collective action on wound care. The primary care team are working with providers to mitigate the risk	Committee requested an update at the January meeting
System Quality Group (SQG)	<p>Committee received the triple A report from SQG and noted two concerns flagged by Place teams:</p> <ol style="list-style-type: none"> 1. South Cumbria flagged the gap in Neurology services. 2. East Lancashire flagged some risks of continuity of hospice provision 	Committee were reassured that commissioners were aware of both issues and asked that these concerns are shared with the relevant commissioners
Assure		
ICB Quality Governance Framework	Committee received the ICB Quality Governance Framework which outlines the system and processes within the ICB that ensure there is robust oversight of commissioned services and that the ICB is meeting its statutory duties pertaining to quality.	Committee were assured of the processes regarding ICB oversight of quality and endorsed the Quality Governance Framework

Appendix D – Approved minutes of the Quality Committee meeting held on 25 October 2024: [Appx D - Approved - ICB Quality Committee - 25 October 2024.pdf](#)

Appendix E – Approved minutes of the Quality Committee meeting held on 20 November 2024: [Appx E - Approved - ICB Quality Committee Minutes - 20 November 2024.pdf](#)

2.4 Finance and Performance Committee

Date: 9 December 2024		Chair: Roy Fisher
Key items discussed		
Item or issue	Issue	Action
Alert		
Projected Outturn	The month 7 financial report indicates that the ICS is on target to deliver the 2024/25 full year breakeven plan. However, the plan assumes the delivery of several high-risk projects, as reported to the Board throughout the year and it is likely that not all will be delivered by the end of the year. The NHSE Nominated Lead for the I&I process has estimated that a best-case scenario is that the system has a risk of £149m against the plan, (the worst-case scenario is a £237m risk to plan). Further work is underway to mitigate the risk as far as possible by the end of year.	Board to note
Advise		
Future CIPs/QIPPs	The Committee acknowledged the need to immediately commence planning for the delivery of the projected 2025/26 control targets. This process needs to incorporate enhanced clinical leadership in identifying service solutions and greater collaboration across the system. Consideration also needs to be given to adopting a multi-year approach to financial recovery	Develop ideas and present to Board in due course
Assure		
ICB Procurement and Contracting Policy	The Committee approved the ICB's Procurement and Contracting Policy, noting that further changes will be required early next year when certain regulations are amended.	

Date: 6 January 2025		Chair: Roy Fisher
Key items discussed		
Item or issue	Issue	Action
Alert		
Month 8 Financial Performance	The financial report shows that at month 8 not only are system efficiency savings £37.7m behind plan but significant delivery risks are emerging around the achievement of the planned savings for the rest of year. In total, the ICS has delivered efficiencies totalling £197m at month 8 whilst the target for the year is £531m, ie, £334m is still to be delivered.	Situation to be closely monitored and system-wide support to be provided where possible.

	<p>The impact of the current levels of spend on cash drawings was discussed and it was noted that this could impact upon the ability of some organisations to make payments in a timely fashion if the position continues unchecked.</p> <p>The need to review the outlook for 2025/26 was raised and it was agreed that a preliminary assessment will be brought to the next meeting.</p>	<p>Will update the Board after the next Finance and Performance Committee meeting.</p>
Activity Levels	<p>There has been a continuation of the volumetric data trends outlined in the Committee's October AAA report. At month 8 the comparison of 2024/25 activity with 2023/24 indicates that: -</p> <ul style="list-style-type: none"> • Elective Cases +13.2% • Day Cases +9.3% • Non-Elective Cases +0.9% • A&E Attendances +6.4% • Outpatient Attendances +8.9% • Diagnostic Tests +10.7% • Cancer Referrals +11.7% • Total Elective Waits -2.8% • GP Attendances +4.9%. 	<p>Board to note when considering both performance and financial information.</p>
Urgent and Emergency Care	<p>Local Providers have faced significant pressures over the last few weeks with December 27th and 31st being particularly challenging. It is anticipated that patients being admitted with flu will peak in the next few days, adding even greater pressure to an already very stretched system.</p>	<p>Close liaison arrangements are in place.</p>
Advise		
Commissioning	<p>A helpful update on the 2025/26 commissioning process was provided. Members suggested that the fundamental principle of affordability be made more explicit in all discussions.</p>	<p>Board to note.</p>
Assure		
Risk Management	<p>The committee was assured by the content of the quarter 3 report that outlined the ongoing work in respect of the risks linked to finance and performance. It was noted that there is a need for a complementary assessment of the extent to which strategic objectives are delivering the intended outcomes.</p>	<p>Board to review delivery of the strategic objectives.</p>
Neonatal Quality	<p>A more detailed and up-to-date assessment of neonatal quality is being undertaken on a regular basis by the Quality Committee. However, given the high profile of the service,</p>	<p>Consider how to ensure all members are updated on key qualitative indicators.</p>

	it was felt that regular updates should be provided to all Board members.	
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Appendix F – Approved minutes of the Finance and Performance Committee meeting held on 28 October 2024: [Appx F - Approved FP Committee Minutes - 28 October 2024.pdf](#)

Appendix G – Approved minutes of the Finance and Performance Committee meeting held on 9 December 2024: [Appx G - Approved FP Committee - 9 December 2024.pdf](#)

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

Committee	Item or Issue	Referred to	Progress Update
Quality Committee – 20 November 2024	<i>Social care workforce recruitment and retention</i> <i>To look at cross system working, including joint careers for people working in health and social care, in order to improve recruitment and retention in social care.</i>	People Committee	<u>23 December 2024</u> OD team member who leads on Apprenticeships in Social Care and undertakes support of providers liaising with our Trusts to support placements to provide regular updates.

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
January 2025**