

## Integrated Care Board

Date of meeting	19 March 2025	
Title of paper	Committee Escalation and Assurance Reports (a) Primary Care Commissioning Committee (b) Quality Committee (c) Finance and Performance Committee	
Presented by	ICB Committee Chairs: (a) Debbie Corcoran, Primary Care Commissioning Committee (b) Sheena Cumiskey, Quality Committee (c) Roy Fisher, Finance and Performance Committee	
Author	Board Secretary and Committee Officers	
Agenda item	11	
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 January 2025 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>There is no inclusion for the Public Involvement and Engagement Advisory Committee due to no further meetings having taken place further to the last report to Board which included the Triple A from the meeting held on 18 December 2024 and the approved minutes from 25 September 2024.</p> <p>As the next meeting of the Northwest Specialised Services Committee was held on 6 March 2025, an update will be provided at the May 2025 meeting of the ICB Board.</p>		
Recommendations		
<p>The Board is asked to:</p> <ul style="list-style-type: none"><li>• Note the Alert, Advise and Assure within each committee report and approve any recommendations as listed</li><li>• Note the summary of items or issues referred to other committees of the Board over the reporting period</li><li>• Note the ratified minutes of the committee meetings.</li></ul>		
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			✓	
<b>Where paper has been discussed</b> (list other committees/forums that have discussed this paper)				
<b>Meeting</b>	<b>Date</b>		<b>Outcomes</b>	
Various committee meetings as listed within the report.	During January and February 2025		To provide the Board of committee business during this period.	
<b>Conflicts of interest associated with this report</b>				
Not applicable.				
<b>Impact assessments</b>				
	Yes	No	N/A	Comments
Quality impact assessment completed			✓	
Equality impact assessment completed			✓	
Data privacy impact assessment completed			✓	
<b>Report authorised by:</b> ICB Committee Chairs				

# Integrated Care Board – 19 March 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 15 January 2025 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 Primary Care Commissioning Committee

<b>Date: 16 January 2025</b>		<b>Chair: Debbie Corcoran</b>
<b>Key Items Discussed</b>		
<b>Item</b>	<b>Issue</b>	<b>Action</b>
<b>Alert</b>		
-	-	-
<b>Advise</b>		
General Practice Quality Contract (GPQC) 2024/25 update	The committee was advised of current and forecast year-end delivery, and impact to date, of the GPQC in 2024/25 at practice and place level. Support in place for practices to optimise delivery by year-end.	Ongoing support to maximise contract delivery and address variations by place and package type. Consideration of approaches should under-delivery lever funding for redistribution in-year, reflecting place, demand and need.
PC Integrated Performance Report	Review of the integrated report for metrics relevant to the Committee's responsibilities.	Further development and strengthening of the framework and review of relevant Committee oversight of metrics
Primary Care Finance Report 2024/25 Q2	The Committee was advised of the position in respect of locally commissioned primary care services and delegated co-commissioning (primary medical, dental, ophthalmic and pharmacy budgets) at the end of quarter 2 of the financial year.	Format and timings reviewed to support currency of the report.
Capital Development Session Summary Report	The Committee was advised of learning and next steps from the development session, and current position in relation to spend.	-

<b>Assure</b>		
Group Escalation and Assurance Report	Assurance that the 5 groups supporting the Committee in relation to the delegated budget areas have met in accordance with their terms of reference and advised the Committee of business transacted at their meetings.	
<b>Date: 13 February 2025</b>		<b>Chair: Debbie Corcoran</b>
<b>Key Items Discussed</b>		
<b>Item</b>	<b>Issue</b>	<b>Action</b>
<b>Alert</b>		
-	-	-
<b>Advise</b>		
<b>Review of Primary Care Commissioning Committee (PCCC) Groups Decision Making Matrix - Review</b>	Recommendations received on changes to the decision-making matrix (delegations) from the Committee to the 5 sub-groups for the 5 areas of delegated budgets overseen by the Committee (primary medical services, primary dental services, pharmaceutical services, primary optometric services and capital).	Recommendations supported and will be considered in the corporate governance review reporting to the ICB Board in March 2025
<b>Planning and Policy Update: NHSE Operational Planning Guidance 2025/26</b>	Update received and considered on the relevant aspects of NHSE operational planning guidance for 2025/26. 2 key commissioning priorities noted relating to general practice access and urgent dental care. All parts of the health and care system tasked with working closely to progress neighbourhood health, standardising the following six core components: <ul style="list-style-type: none"> <li>• Population health management</li> <li>• Modern general practice</li> <li>• Standardised community services</li> <li>• Neighbourhood multi-disciplinary teams</li> <li>• Integrated intermediate care with a 'Home First' approach</li> <li>• Urgent neighbourhood services</li> </ul>	Recognition of ICB Board responsibility for strategic approach, set out in Commissioning Intentions, with cascade of information/consideration noted. Relevant aspects to be considered in forward planning and decision-making of the Committee thereafter.
<b>Dental Commissioning Plan 2025/26</b>	Draft Dental Commissioning Plan for 2025/26 and following 4 years considered, including an update on delivery of the original programme, potential refreshed programme to address dental access challenges	Committee insight to be considered, Dental Commissioning Plan priorities to be set out and considered by the ICB Board within Commissioning Intentions.

	and oral health inequalities over the next five years, and associated national allocation and funding profile for the programme.	
<b>Assure</b>		
<b>Risk Management Report</b>	Update received on the management and oversight of risks relating to Committee responsibilities – no related risks on the Board Assurance Framework, and the 3 risks on the Operational Risk Register (ORR) reviewed and confirmed.	
<b>Primary Care Integrated Performance Report</b>	Updated report received and latest performance position considered for those indicators within the Committee's responsibility. Positives include the number of general practice appointments delivered in a month exceeding 1 million for the first time ever (31% higher than in September, however still below the national target); 177/197 practices achieving the target threshold for the prescription of broad-spectrum antibiotics being below 10%; closing the gap in the prescribing of high dose opioids and the ICB achieving the Q3 milestone of 60% of children seeing an NHS dentist in the past 12 months (61.8%).	Further refinement of the report, including updated mapping of various Committee's oversight of indicators.  Impact through continued actions to address unwarranted variation in delivery across Places e.g. Acute Respiratory Infection Hub (ARI) appointments and the number of general practice appointments per 10,000 weighted patients
<b>Group Escalation and Assurance Report</b>	The Committee was assured that the groups have met in accordance with their terms of reference and were advised on business transacted.	

- **Appendix B** – Approved minutes of the Primary Care Commissioning Committee meeting held on 20 December 2024: [Apex B - Approved Part 1 ICB PCCC Minutes - 20.12.24.pdf](#)
- **Appendix C** – Approved minutes of the Primary Care Commissioning Committee meeting held on 16 January 2025: [Apex C - Approved minutes - PCCC 16.01.25.pdf](#)

## 2.2 Quality Committee

<b>Date: 22 January 2025</b>		<b>Chair: Sheena Cumiskey</b>
<b>Key items discussed</b>		
<b>Item or issue</b>	<b>Issue</b>	<b>Action</b>
<b>Alert</b>		
<b>Mechanical Thrombectomy</b>	<p>Quality Committee received a further update regarding the ongoing gap in service. There have been new reports of patient safety incidents in one Trust, occurring weeks commencing 30 December 2024 and 6 January 2025.</p> <p>Discussions and patient safety reviews continue between the Trust, ICB and NHS England.</p>	Committee not assured regarding this service provision and requested further escalation via the Improvement Assurance Groups with a formal letter to Specialised Commissioning seeking assurance that this will be dealt with. Committee oversight to be maintained until assurance received.
<b>Patient Experience - transition and transfer of care and communications</b>	<p>The Quality Committee considered a patient experience and noted that a core feature as in all experiences reviewed at committee was ineffective communication between services and gaps in transition/transfer of care between services.</p> <p>Committee discussed need for solutions and suggested development on Integrated Neighbourhood Teams (INT) / Neighbourhood health may be part of solution.</p>	Request ICB team leading on INT / neighbourhood health to consider how improvements in co-ordination of services and communication are made and how this becomes a key improvement measure for these teams.
<b>Court of Protection Deprivation of Liberty Safeguards (COPDOL)</b>	The Quality Committee noted that the ICB are not meeting national targets for COPDOL renewals, causative factors include volume of demand, staff training, gaps in staffing on transfer of service from Midlands and Lancashire Commissioning Support Unit.	Quality Committee to alert Board to challenge. Mitigations are in place: staff training, update of ICB processes, team now fully staffed and training of ACC teams in place. QC to continue to monitor
<b>Histopathology at East Lancashire Hospitals Trust</b>	Quality Committee received an update regarding the backlog of histopathology tests and results and noted the mutual aid from other trusts and improvements made. However, the committee were not assured that the improvements made through mutual aid were sustainable and until the backlog is cleared the risk of harm remains.	ICB patient safety team to continue to monitor harm with Trust at Improvement and Assurance Group. Further update to be provided to committee in March.
<b>Advise</b>		
<b>Learning disability and autism</b>	<p>Committee assured of improvements in key areas. In-patient rates for adults remain high but is steadily reducing and waiting times for adult autism assessment remain a local and national challenge.</p> <p>Discussion regarding system challenge that</p>	Team to continue with improvement work and monitor through committee reporting.

	health outcomes (mortality and morbidity) are not improving for people with learning disability and autism despite improvement work on health checks, etc. In terms of health inequalities people with learning disability and autism are some of most vulnerable and the committee agreed they should be prioritised for population health work.	Ask ICB Board to commit to prioritising people with a learning disability and or autism for population health and inequalities strategies / work.  DASS committee representative to report back to ICB Quality Committee on work on the Learning Disability and Autism Strategy.
<b>Discharge safeguarding responsibilities and functions</b>	The committee received the safeguarding dashboard providing positive assurance on the discharge of statutory duties. However, noted ICB training rates were not in line with targets; mitigations and actions are in place.	Safeguarding to continue to develop training needs analysis and work with HR to improve training compliance.
<b>Patient Safety Update</b>	Quality Committee received patient safety update and assurances of ongoing learning and oversight of incidents. Changes to one Trust's PSIRF policy were approved.  Legacy serious incidents have now reduced to 27 across the system, concerns were raised about lack of progress at one trust since September, but this has improved since the committee meeting.	Patient safety team to continue supporting Trust and system work  Continue to monitor clearing of legacy serious incidents and report progress at next committee meeting.
<b>Provider Quality Assurance (community and small providers)</b>	The committee received the quality assurance report and noted a gap in service for wound care provision in the North of the patch, which has now been mitigated with a new provider. The fragile workforce in some small providers was noted.	No escalations or actions identified.
<b>Triple A reports</b>	The Quality Committee received and noted Triple A reports for Improvement Assurance Groups (IAG), Primary Care Quality Group and Public Involvement and Engagement Advisory Committee.  There were some concerns that the revised IAG process with a priority focus on finance may not address all key quality issues.	Chief Nurse and Medical Director to ensure quality concerns in commissioned services continue to be flagged with providers at IAGs and that IAG is seeking assurance of QIA process within each provider.
<b>Assure</b>		
<b>All age continuing care (AACC)</b>	High level of assurance provided to committee regarding quality premium and quality targets, with performance being at over 90% consistently.  Financial pressures within AACC were noted by the committee.	Committee commended the work that had improved delivery of quality within AACC  Finance and Performance Committee continue to review financial pressures within AACC.



	DASS represented wanted committee to note areas of dispute between ICB and local authorities.	Importance of continued joint working across packages of care health and social care noted by committee.
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- **Appendix D** – Approved minutes of the Quality Committee meeting held on 18 December 2024: [Apx D - Approved - Quality Committee Minutes - 18 December 2024.pdf](#)

## 2.3 Finance and Performance Committee

Due to reporting timescales a verbal update from the meeting held on 12 March 2025 will be provided by the committee chair at the ICB Board meeting on 19 March 2025. For consistency the content of the Triple A report will be included in the escalation report to ICB Board in May 2025.

**Appendix E** – Approved minutes of the Finance and Performance Committee meeting held on 6 January 2025:

[https://www.healthierlsc.co.uk/application/files/6717/4178/6814/Apx\\_E - APPROVED FP Committee Minutes - 6 January 2025.pdf](https://www.healthierlsc.co.uk/application/files/6717/4178/6814/Apx_E_-_APPROVED_FP_Committee_Minutes_-_6_January_2025.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
<b>Quality Committee 22 January 2025</b>	<b>Safeguarding training</b> – To ensure ICB are compliant with training and to look at how to increase this	People Committee	
<b>Primary Care Commissioning Committee 16 January 2025</b>	<b>PC Integrated Performance Report</b> Performance Report to be shared with People Committee given metrics relate to workforce, skills and capacity e.g. performance against General Practitioner appointments per General Practitioner FTE remains below benchmark	People 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  
January 2025**