

Recovery Support Programme Exit Criteria: Lancashire & South Cumbria Integrated Care Board (June 2025)

Appendix A

	No	Exit Criteria	Evidence of Satisfaction of Criteria		Progress	Comment	Reporting Mechanism
FINANCE	1	Deliver the financial plan submitted and agreed in April 2025 and the Waste Reduction Programme savings in May 2025	A	A 2025/2026 financial outturn break-even position and overall financial deficit of no more that the £54.8m planned	On-going	To be monitored monthly through the finance reporting to Finance and Contracting Committee	<ul style="list-style-type: none"><li>Monthly financial reporting including income and outcome, and run rate deficit support position and staffing expenditure. Reporting actual position against plan</li><li>Monthly System Delivery Meeting / IAG reports and meeting letters to identify CIP identification and delivery against plan and progress against key expenditure categories and service re-design changes</li><li>Delivery of workforce reduction plan agreed with NHS and monitored through monthly System Delivery meeting</li></ul>
			B	Achievement of the planned Waste Reduction Programme (WRP) £142.6m savings with fully developed cost improvement plans (ie Board signed PIDS) in excess of £142n to offset any under delivery.	On-going		
			C	Delivery against key expenditure categories as outlined in the financial plan and WRP in particular AACC, commissioning, corporate functions, estates and facilities, MH, prescribing, primary care and community services	On-going		
			D	Development and implementation of an AACC Turnaround plan agreed by the board and IAG with appropriate leadership, governance and oversight controls	On-going	The development of the action plan is complete. Monitoring of delivery on-going through the year	
			E	A reduction in whole time equivalent (WTE) staffing in line with in the WRP/ICB Blueprint -	On-going		
	2	Delivery quarter-on-quarter run rate improvement throughout 2025/26	A	Quarter-on-quarter improvement in the underlying run rate based on the Simon Worthington model throughout 2025/26	On-going		<ul style="list-style-type: none"><li>Quarterly regional reporting as part of Regional Support Group oversight</li><li>Monthly System Delivery Meeting / IAG reports and meeting letters</li></ul>
			B	Robust expenditure controls in line with PwC recommendations	On-going	To be monitored quarterly through Finance and Contracting Committee	
	3	Develop a medium-term financial recovery plan covering the period post 2025/26	A	A Board and IAG approved plan for financial recovery and maintenance beyond 2025/26 by the end of Q3	In progress	2025/26 plans agreed.  Timeline for agreeing commissioning intentions and plan agreed by Board.	<ul style="list-style-type: none"><li>Monthly System Delivery Meeting / IAG reports and meeting letters</li></ul>
Leadership & Governance	4	Demonstrate effective financial and organisational governance structures and mechanisms	B	Executive participation in Recovery Support Team (RST) well led governance reviews	Complete	Review completed and report including recommendations received	<ul style="list-style-type: none"><li>Monthly IAG reports which identify participation in governance and leadership activity</li><li>By end of July presentation of a governance and leadership action plan to the IAG and</li><li>monthly review of progress</li></ul>
			C	A Board/Improvement and Assurance Group agreed governance and leadership action plan following the publication of the RST review outcomes and recommendations and progress towards delivery of the agreed actions	Complete	Plan will be framed around the board self-assessment. High-level report to board on 24 July and then IAG on 29 July	
			D	Evidence of full engagement in an externally commissioned Board development programme which addresses the well led review recommendations	On-going	First session of development programme held on 26 June. First executive leadership development session planned for 22 July.	
			E	Identification of financial and organisational risks and effective controls as evidenced in Board Assurance Framework and Risk Management processes and triangulation via Triple A reporting at subcommittee and Board level	On-going	Full review of BAF underway. Dedicated session held with Executives on Thursday 3 <sup>rd</sup> July. Session with Audit Committee on 23 July and the Board in September	
			F	Management of executive team vacancies in line with agreed ICB change programme mandates and through notification to and involvement with the NHS England regional team	On-going	NHS E are aware and supportive of all recent acting up arrangements. Interviews for substantive CEO being held on 14 July. NHS E on the panel.  Other interim arrangements to be recruited to substantively in line with approved structure of the reconfigured ICB	

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			G	Demonstrable assurance that any risk to quality and patient safety through the delivery of CIPs is mitigated	On-going	Chief Nurse / Medical Director approve QIAs / EIAs and quality performance monitoring	
Recovery Support Programme	5	Full participation in the Recovery Support Programme					<ul style="list-style-type: none"><li>Monthly IAG reports which identify participation in the RSP</li></ul>
			A	Board attendance at monthly ICB Improvement and Assurance Group meetings	On-going	Yes – core attendance to be agreed with Turnaround Director ahead of IAG on 29 July	
			B	Engagement with the Turnaround Director and associated support executive team and response to requested actions including monthly reporting, financial planning and specific project deliverables	On-going	Monthly update reports provided to IAGs with responses to actions	
			C	Timely and accurate reporting of financial data	On-going monthly	Finance and Contracting Committee will receive monthly “Flash” reports from June onwards – AAA reporting to the board	