Lancashire and South Cumbria Integrated Care Board

Integrated Care Board

Date of meeting	27 November 2025
Title of paper	Report of the Chief Executive
Presented by	Aaron Cummins, Chief Executive
Author	Kirsty Hollis, Associate Director and Business Partner to the Chief Executive
Agenda item	7
Confidential	No

Executive summary

This report gives an updated from the new Chief Executive on a number of policy documents which have been published by NHS England and includes the work of the Executive Committee since the previous report.

It brings to the attention of the Board the outcome of their request for the Executive Committee to further consider the implementation of the Weight Management programme.

The report also provides an update on the ICB's implementation of the national model voluntary redundancy scheme which was supported by Treasury in early November.

Public and Stakeholder Engagement

Not applicable

Recommendations

The Board is requested to:

1. Note the contents of the report.
2. Note the publication of the strategic Commissioning Framework
3. Note the decision of the Executive Committee in relation to Weight Management Services
4. Be advised of the work of the Executive Committee during the period 30 September 2025 to 12 November 2025

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		✓		*Highlight any risks and where they are included in the report*
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**
Executive Committee	18 November 2025	The content of the paper was noted

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:	Aaron Cummins, Chief Executive

Integrated Care Board – 27 November 2025

Report of the Chief Executive

1. Introduction

1.1 At the time of writing, I have been in post as the Chief Executive of the ICB for a little under two weeks and I want to start by saying a huge thank you to every single person who has given me such a warm welcome. Some, I have known in my previous roles working in the Lancashire and South Cumbria system, but others, whom I have never met before, have reached out to welcome me and offer their support.

1.2 In the week before I started, I attended the all staff briefing to introduce myself. In that meeting I shared my desire to "mooch", to get out and meet as many of our people as possible, to see what they do and the impact of their work. It's been humbling to see that people have really taken me at my word and extended invitations for me to join them and their teams. It may take me a little time, but I will honor my commitment and get to see as many as I can as quickly as I can.

1.3 I would like to extend my sincerest thanks to my predecessor, Sam Proffitt, for the time and energy she gave me in ensuring I had a smooth handover and transition into the ICB. She took on the role of Acting Chief Executive at a really challenging time and it is testament to her hard work, tenacity, dedication and leadership that meant that I am able to step into the role of Chief Executive of an improving organisation. There is still a lot of work to do but we will continue on the promising trajectory that Sam set.

1.4 It would be remiss of me not to mention that as Sam retired, instead of personal acknowledgement or a retirement gift, she asked for donations to Derian House Children's Hospice. She raised over £750 for the charity which is testament to how well liked and respected Sam is, not just in Lancashire and South Cumbria but across the North West and beyond.

1.5 So, it is with a huge sense of pride that I take up this role, grateful for the opportunity to lead the ICB as its Chief Executive. I am under no illusions as to the challenges that this will bring but I am sure that together, we can set a course for success, building on the great work that has gone before and ensuring we strive to commission the services that meet the needs of our population and improve health outcomes.

2. Purpose of report

2.1 The purpose of this report is to bring to the Board's attention items of NHS policy, changes to regulation and governance processes, the decision making of the Executive Committee and the work of the Chief Executive since the previous meeting.

2.2 As this is my first report, I am bringing items which, in the main, have occurred prior to my commencement in post but which fulfil the purpose of this report as outlined above.

3. Provider Capability Approach

3.1 In August, we were updated by NHS England on the revised approach to assessing provider capability. The NHS Oversight Framework (NOF), published on 26 June 2025 outlined how, as part of their oversight of NHS providers will consider not only their delivery, as outlined by their NOF segment, but also their capability. The aim is to ensure that NHS England has a holistic view of providers, not just focused on delivery, but also capturing wider information relevant to grip and governance. It is also intended to be a development tool, helping boards to reflect on their competencies, develop robust approaches to internal assurance and encourage continuous improvement.

3.2 As part of this process, providers will be required to submit an annual self-assessment, including supporting evidence for their position.

3.3 Whilst ICBs will remain jointly responsible, and involved in provider oversight, NHS England will seek the views of ICBs on the submitted self-assessments for the providers in their systems. The Board will be kept appraised of this process as it develops.

4. Strategic Commissioning Framework

4.1 On 4th November 2025, NHS England published the Strategic Commissioning Framework. The operational framework which would support ICBs in turning the 10 Year Health Plan ambitions into a reality and support the work to determine and implement the model ICB blueprint for a strategic commissioning organisation.

4.2 At the time of writing, Executive's and officers of the ICB are working to understand and begin to deliver the requirements outlined in the document which need to be embedded as part of the NHS planning process for the financial year 2026/27.

4.3 We anticipate the launching of the strategic commissioning development programme which is due to be in place from Apil 2026 to help ICBs to develop as strategic commissioners. This will include the requirement to carry out a baseline assessment, timetabled for March 2026, against the framework to inform the development support we will require

5. Weight Management Services

5.1 At its private meeting in September, the Board received a paper on Specialist Weight Management Services and GLP-1 Prescribing, the outcome of which was to support the proposal for an end to end service including a phased approach to the prescribing of weight management drugs within initial affordable investment parameters. However, the Board did ask that the Executive Committee consider and approve the methodology for ensuring that this initial investment is targeted at the areas of our community with the highest need.

5.2 The Executive Committee received a paper at its meeting on the 28 October 2025, and supported the following eligibility criteria to patients to be prescribed GLP-1 medication:

- Members of the population with BMI of 40+ , with four qualifying conditions and living in an area of Indices of Multiple Deprivation (IMD) 1.

5.3 This is an interim agreement whilst a medium to longer term investment plan is developed and which will be presented to the Board in March 2026.

6. Executive Committee

6.1 Since the last report, the Executive Committee has met seven times and the role of the committee has continued in relation to its responsibilities in oversight of operational risks and the board assurance framework and the ICB transition to the model blueprint.

6.2 In addition, the following standing items have been added to the agenda to allow the executive team to maintain grip and control over key ICB workstreams, these are:-

- Oversight of the strategic improvement plan (SIP)
- Elective activity management and recovery against the key national targets
- Preparation for ICB oversight meetings

6.3 In the coming months, it is going to be very important for the Executive team members to spend significant blocks of time discussing and agreeing how to progress key pieces of work. To that end, going forward, I have asked that the final two hours of each meeting be dedicated to a specific topic. The first of these will be to reflect on the outcome of the ICB model blueprint and the new operating model roadshows. Through this engagement, we have captured colleagues ideas and suggestions and the working group have been able to distil these into a draft action plan. The Executive team now need to work with the senior leadership team to shape the work to progress those actions over the coming months as we move to the reconfigured ICB.

6.4 I will be working with colleagues to ensure that the programme of themes to be covered supports the delivery of key strategic pieces of work for example, building on the Board development session in how we use data to inform our strategic commissioning, planning and the development of the 10-year strategy.

6.5 At it's meeting on 07 October 2025, the Committee received an update from the Chief Finance Officer who in light of the financial position, recommended a review of all planned investments which were due to be made before year end. The committee supported the approach to pause all investments and consider them against a prioritisation matrix which was in development. The committee look forward to receiving an update with recommendations at a future meeting.

6.6 The Executive Committee was please to receive an update on the Get Lancashire Working plan. This item described the partner engagement work that had been undertaken to complete a submission to Government in response to the Get Britain Working White Paper. The update assured the Committee of the ICBs ability to fulfil the expectation that ICBs are co-partners in the development of these plans given that poor health directly impacts on people's ability to secure and then stay in employment.

6.7 Each month, Executive Committee receives recommendations from the Commissioning Resource Group (CRG) and makes decisions within the boundaries of the scheme of delegation. There have been two CRG meetings, since the last Chief Executive's report and only three out of the total eleven recommendations were supported. The others were all referred to either be considered as part of the investment prioritisation process described in section 5.5 or were deferred pending receipt of additional information. The decisions which were supported were to:-

- Support the ICB's required contribution to the South Cumbria Multi Agency Safeguarding Hubs (MASH)
- To temporarily pause all new referrals into the Auditory Processing Disorder Service for children and young people in Lancashire and South Cumbria, pending a review of the service, it's current waiting list and confirmation of the commissioning responsibility for this service.
- The decommissioning of the Orr medical Referral Quality Improvement Service due the service not having the desired impact on secondary care referrals.

The Committee also supported all the recommendations made by the Lancashire and South Cumbria Medicines Management Group on medicines commissioning policies.

6.8 Finally, the Executive Committee received recommendations from the Primary Care Sub Committee held on 10th October. Two of the three recommendations were approved. These were to:-

- To support the continued development of the business case for the re-designed Integrated Urgent Care (IUC) service offer and
- To take steps to remove a contractor from the pharmaceutical list due to none fulfilment of contractual obligations and quality concerns.

7. National Voluntary Redundancy Scheme

7.1 Board will be aware that on Friday 12th November 2025, ICB's received confirmation that a national voluntary redundancy (VR) scheme for NHS England and ICBs had been approved by the Treasury. This is to progress the reconfiguration of NHS England and the shift of purpose for ICBs to be Strategic Commissioning organisations as described in the model ICB blueprint. This will enable progress to be made in the delivery of the 10-year Health Plan and the implementation of neighbourhood health models.

7.2 NHS England have helpfully provided a nationally agreed model VR scheme. The scheme has been developed to support ICBs in reducing their workforce as they move to the new operating model, and in doing so, reduce costs in line with the requirement to spend no more than £19 per head of the ICB's population from 1st April 2026 on running costs.

7.3 Financial envelopes to fund costs of the voluntary redundancy will be distributed via NHS England regional teams. However, this will come with strict conditions for utilisation in the current financial year and is not expected to cover the full gross costs of redundancy. Therefore, some local mitigation will be required to meet these costs in full.

7.4 Approval to use the model VR Scheme was sought from the ICB' s Remuneration Committee on 18th November 2025. The next steps are:

- to secure NHS England North West regional approval and
- to commence engagement and consultation with local Trade union partners.

A verbal update will be given in the Board meeting.

8. Conclusion

8.1 My first few weeks have been somewhat of a whirlwind! Notwithstanding national announcements, I've attended two ICB assurance meetings and a full set of Provider Trust Improvement Assurance Groups.

8.2 I've been able to make time to "mooch" and begin to meet colleagues particularly those who have been here in County Hall and I look forward to meeting many more over the coming weeks and supported by colleagues are planning a series of visits to services across the length and breadth of our patch.

8.3 Finally, I would like to reiterate my heartfelt thanks to everybody who has given me such a warm welcome to the ICB – Thank You!

9. Recommendations

9.1 The Board is requested to:

1. Note the contents of the report.
2. Note the publication of the strategic Commissioning Framework
3. Note the decision of the Executive Committee in relation to Weight Management Services
4. Be advised of the work of the Executive Committee during the period 30 September 2025 to 12 November 2025

Aaron Cummins

11 November 2025