

Integrated Care Board

Date of meeting	27 November 2025			
Title of paper	Quality and Outcomes Committee Escalation and Assurance Report			
Presented by	Sheena Cumiskey, Quality and Outcomes Committee Chair			
Author	Board Secretary and Committee Officers			
Agenda item	10			
Confidential	No			
Executive summary				
<p>This report highlights key matters, issues, and risks discussed at the Quality and Outcomes Committee meeting held since the last report to the Board on 25 September 2025 to alert, advise and assure the Board.</p> <p>The summary report also highlights any issues, items referred or escalated to other committees or to the Board.</p> <p>Minutes approved by the 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>				
Public and Stakeholder Engagement				
N/A				
Recommendations				
<p>The Board is asked to:</p> <ul style="list-style-type: none"> • Note the Alert, Advise and Assure and approve any recommendations as listed. • Note any 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	
Quality and Outcomes Committee	5 November 2025		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 Chair
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Integrated Care Board – 27 November 2025

Quality and Outcomes Committee Escalation and Assurance Report

1. Introduction

- 1.1 This report highlights key matters, issues, and risks discussed at ICB Quality and Outcomes committee held since the last report to the Board on 25 September 2025 to alert, advise and assure the Board.
- 1.2 The summary report also highlights any issues, items referred or escalated to other committees or to the Board.
- 1.3 Minutes approved by the 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. Quality and Outcomes Committee Report and Approved Minutes

Date: 5 November 2025		Chair: Sheena Cumiskey
Key Items Discussed		
Item	Issue	Action
Alert		
East Lancashire Hospitals Trust (ELHT) Histopathology	The committee notes significant workforce shortages, increasing sample volumes, and ongoing risks to patient safety. This had led to a surge in sample volumes and delays in processing, with urgent referrals from general practice being used to expedite results for patients.	The committee noted the ongoing fragile position and the requirements for continued oversight, system-level coordination, and strategic planning to ensure patient safety and service sustainability.
Special Educational Needs and Disabilities (SEND)	The committee reflected on the difficulties in securing alternative provision, the critical importance of speech and language services, and the need for system-wide investment and joint commissioning. The committee also noted the risks around special school nursing. The committee noted provider withdrawals and the fragility of current commissioning arrangements.	Assurance will be sought from commissioning regarding future plans and resource allocation in an attempt to mitigate the risks associated with this agenda.
Children and Young People (CYP) Quality Update	The committee recognised the complexity and scale of the challenges facing CYP services, particularly in relation to waiting times, safeguarding, and service	The committee agreed to escalate concerns regarding long waits, safeguarding, and data collection to the relevant commissioning

	<p>redesign.</p> <p>There was consensus on the importance of integrated approaches, robust data collection, and ongoing monitoring of risks and mitigations.</p> <p>The committee raised concerns regarding long waiting times, neurodevelopmental pathway delays, safeguarding pressures and provider withdrawal from multi-agency youth justice arrangements.</p>	<p>teams and Executives, including limitations and assurance gaps.</p>
<p>Infection Prevention and Control Annual Report 2024/25 – Workforce Concerns</p>	<p>The committee acknowledged system pressures due to an early flu season and reduced COVID vaccine eligibility. Workforce capacity and vaccination uptake were flagged as critical risks.</p>	<p>The committee noted learning from last winter in relation to workforce well-being, capacity and system readiness for winter surge and outbreak management.</p> <p>Refer to People and Culture Committee related to vaccination uptake.</p>
<p>Learning Disabilities and Autism (LD&A) Update</p>	<p>The committee reflected on the importance of integrating clinical and social care teams at the place level, advocating for neighbourhood-based working and maximising value for residents.</p>	<p>The committee agreed to alert the Board to the opportunity for improved outcomes through further integration.</p> <p>Specific escalations include:</p> <ul style="list-style-type: none"> • strategic commissioning gaps and the need for neighbourhood level integration • the challenges posed by the Right to Choose pathway and the financial risks associated with variable assessment costs • concerns regarding adult autism assessment waiting times and financial risks to the Board.
<p>Patient Experience and Complaints Report</p>	<p>The committee emphasised the importance of learning from complaints to drive continuous quality improvement and advocated for ‘closing the loop’ on actions arising from complaints and concerns.</p> <p>There was an acknowledgement of the operational pressures within the service and the need for a strategic review of the operating</p>	<p>The committee agreed to escalate workforce well-being, operational capacity concerns to the ICB People and Culture Committee.</p> <p>There is a need for a strategic review of the complaints handling/ strategic operating model to ensure ICB assurance and learning.</p>

	model, which requires improvement to ensure assurance against statutory responsibilities and triangulation of patient experience.	
Safeguarding Dashboard Quarter 2 2025/26	The committee noted that Local Authorities were facing similar challenges as the ICB in relation to the Deprivation of Liberty (DoL), backlogs and expressed concern about the lack of progress pending Liberty Protection Safeguards reform.	The committee agreed to escalate DoL backlog risks and the associated system-wide implications.
Advise		
Intensive and Assertive Treatment Response to the Independent Mental Health Homicide Review (Nottingham) – Update Report	<p>The committee emphasised the need to continue monitoring the impact of improvements and to escalate any risks or issues as they arose.</p> <p>The committee reviewed progress on the action plan and stressed the need for graphical representations in future reports, to aid clarity.</p>	<p>Advise the ICB Board that there will be continued monitoring of improvements.</p> <p>The committee requested that future updates include visual tracking.</p> <p>The next report is due at the 10 June 2026 ICB Quality and Outcomes Committee.</p>
Assure		
Patient Safety Incident Response Framework (PSIRF) Provider Policy & Plan Update	The committee made clear the need for continued monitoring and assurance to ensure that the policy was having the desired impact on patient safety.	Assurance was provided that the framework is being embedded, and monitoring of its effectiveness will continue.
Clinical Policies for approval from Clinical Effectiveness Group (CEG)	<p>The committee reflected on the efficiency of the current process and the value of risk stratification in all policy reviews.</p> <p>The need for clear communication of changes and the importance of regional alignment was highlighted.</p>	<p>The committee was assured that the policies reflected current evidence-based interventions and that clarity in policy language had been prioritised and aligned with region.</p> <p>Approval of the eighteen clinical policies as recommended by CEG was given noting that no material changes had been made.</p>
ELHT Pathology and Biochemistry Escalation Resolution	The committee received assurance that previous escalations regarding delayed blood biochemistry results at ELHT had been addressed. Mitigations included increased transport, staffing business cases, and regular meetings with General Practice and Quality Leads.	The committee was assured that the issue was now resolved. In order to be fully assured monitoring will be undertaken on the sustainability of the actions. Any future concerns will be escalated via the AAA report from the Primary Care Subcommittee.

- **Appendix A** – Approved minutes of the Quality and Outcomes Committee held on 3 September 2025. [Item 10 - Appx A - Approved Minutes of the ICB Quality and Outcomes Committee 3 September 2025 ver. 2.0.pdf](#)

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

Committee	Item or Issue	Referred to
Quality and Outcomes Committee	<p>Patient Experience and Complaints Report</p> <p>Due to the operational pressures within the service and the need for a strategic review of the operating model, which requires improvement to ensure assurance against statutory responsibilities and triangulation of patient experience, the committee agreed to escalate workforce well-being and operational capacity concerns to the ICB People and Culture Committee</p>	ICB People and Culture Committee
Quality and Outcomes Committee	<p>Infection Prevention and Control Annual Report 2024/25</p> <p>Concerns were raised regarding the uptake of flu vaccinations for staff and the capacity to deliver such programmes.</p>	ICB People and Culture Committee

4. Conclusion

4.1 The committee has conducted their business in line with their terms of reference and associated business plans.

5. Recommendations

5.1 The Board is requested to:

- Note the Alert, Advise and Assure within the 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 Chair
November 2025**