

Integrated Care Board

Date of meeting	17 September 2026
Title of paper	Chair's Board Report
Presented by	Emma Woollett, Chair, Integrated Care Board
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Agenda item	6
Confidential	No

Executive summary

This report aims to provide an update for the Board on the engagement and work undertaken by the Chair and any current and pertinent issues.

The report includes key areas to consider over the period since the previous Board meeting and, where appropriate, a verbal update will be provided where things have occurred after the report was published.

Public and Stakeholder Engagement

The report covers examples of stakeholder and public engagement by the Chair.

Recommendations

The Lancashire and South Cumbria Integrated Care Board is requested to note the updates provided.

Which Strategic Objective/s does the report relate to:

		Tick
SO1	To improve population health and reduce inequalities through effective strategic commissioning.	✓
SO2	Commission high quality, safe and accessible services that deliver better and more equitable outcomes and patient experience.	✓
SO3	To develop and sustain the workforce, leadership and organisational capability required to operate as an effective strategic commissioner.	✓
SO4	Improved financial sustainability through directing available resources to deliver the greatest possible value.	✓
SO5	To deliver agreed national and local outcomes through a balanced focus on performance, improvement and long-term system resilience.	✓

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
N/A	N/A			
Conflicts of interest associated with this report				
N/A				
Impact assessments				
	Yes	No	N/A	Comments
Quality impact assessment completed			✓	
Equality impact assessment completed			✓	
Data privacy impact assessment completed			✓	
Report authorised by: Emma Woollett, Chair, Integrated Care Board				

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Chair's Board Report

1. Introduction

- 1.1 This report provides the Board with engagement and activity undertaken by the chair, together with any current and pertinent issues of relevance.
- 1.2 The report highlights key areas of activity during the period and will be supplemented by a verbal update where any material matters have arisen since the paper was finalised.
- 1.3 It also includes significant updates relating to Integrated Care Board (ICB) and system governance, together with any decisions taken under Chair's Action for formal ratification by the board.

2 Engagement

- 2.1 Later this month we have our regular partnership meeting with our local MPs where we will be discussing our progress in developing Mental Health Emergency Departments and Neighbourhood Mental Health Centres in Lancashire and South Cumbria. These will ensure that people experiencing mental health problems will get faster, more joined-up care closer to home.
- 2.2 Just after our last Board meeting, Government announced its decision on Local Government Reorganisation (LGR) in Lancashire, subject to Parliamentary approval. It is considered to represent the biggest change in local government in more than 50 years. Local Government Reorganisation is part of a wider national programme intended to create simpler and more effective council structures. The announcement stated that four new unitary councils will be created, replacing all 15 existing councils in Lancashire, Blackburn with Darwen and Blackpool. The plans for Lancashire have since been paused by Government whilst a review is undertaken.
- 2.3 The ambitions set out by the ICB in the operating model narrative and direction of travel for being an effective strategic commissioner includes close working with Local Authorities. Our operating model is flexible so that if there are any future changes to proposals we can adjust accordingly. We remain committed to strengthening relationships with Local Authorities and wider partners in our operating model and to make progress in greater collaboration and joint commissioning solutions which support improving health and wellbeing outcomes and reducing health inequalities.

- 2.4 The Executive Team has worked closely with senior leaders in the organisation to consider the feedback from local partners and staff from the recent consultation to develop and strengthen the organisation's operating model. This has been and will continue to be discussed through the Transition and Change Committee.

3 Board Matters

- 3.1 I am pleased to share that Dr Andy Knox and Dr Andy Curran have been appointed as the substantive co-medical directors. They both remain front line practicing clinicians as Andy Knox is a GP with strong experience in population health, while Andy Curran is a consultant in emergency medicine at our major trauma centre in Preston.
- 3.2 I am also delighted to announce the appointments of two new non-executive Board members. Evelyn Asante-Mensah OBE has joined as deputy chair and Tracey Bleakley as non-executive member. These appointments could not be at a more important time as both Evelyn and Tracey will strengthen the Board with extensive experience in NHS leadership, governance, social justice and organisational transformation.
- 3.3 In late July we held a Board seminar around neighbourhood health. The aims of the session were to gain the board's understanding and consensus on shaping our ambition, strategy and approach to neighbourhood health as the key vehicle to delivery of the 10-year plan. The day also focused on board organisational development, actively welcoming new board members and a focus on consolidating and applying useful board behaviours through conversations.

4 Governance

4.1 Chair's Action: Special Payment Settlement

- 4.1.1 I undertook a Chair's Action in July 2026 to approve a settlement agreement relating to a legal claim in relation to a matter previously concluded through the appropriate processes. The proposed settlement constituted a special payment and therefore required approval in accordance with the ICB's Operational Scheme of Reservation and Delegation before it could be finalised.
- 4.1.2 I received a detailed briefing on the circumstances of the case, the advice provided by NHS Resolution, and the governance requirements associated with the proposed settlement. In view of the timescales involved, Chair's Action was taken to enable the matter to be concluded appropriately and in accordance with the ICB's governance framework.
- 4.1.3 This action is reported to the Board for information and will also be reported in full to the Audit Committee on 26 September as part of the routine reporting of Chair's Actions and special payments.

4.2 Transition and Change Committee: Revised Membership

4.2.1 Since establishment of this committee, there have been changes to both Board and executive arrangements, including the appointment of new non-executive members and the further development of executive portfolios in support of the ICB's transition programme.

4.2.2 The committee membership has therefore been revised to reflect the recent non-executive member appointments; the evolution of executive portfolios in support of the transition to the model ICB and organisational transformation responsibilities; strengthen independent oversight; and to ensure that the committee continues to provide effective assurance to the Board during a period of significant organisational change. The proposals do not alter the committee's purpose, authority, delegated responsibilities or quoracy arrangements. The changes are:

- ICB Deputy Chair as Chair of the Transition and Change Committee
- An additional non-executive member
- The Chief Strategy and Planning Officer be added to committee membership.
- The Chief Executive Officer be removed from committee membership
- The provision for the ICB Chair to attend as an ex-officio member be removed.

4.2.3 The revised membership arrangements took effect from 1 September 2026.

4.3 NHS England Annual Assessment of ICB's Performance in 2025-26

4.3.1 NHS England has a legal duty to annually assess the performance of each ICB in respect of each financial year. In July we received a letter from Louise Shepherd, Regional Director (North West) NHS England, setting out the annual assessment for Lancashire and South Cumbria ICB performance and capability during 2025/26.

4.3.2 The letter recognises that this has been a particularly challenging year for ICBs, marked by significant system-wide pressures; continued organisational change and the need to maintain stability and continuity across systems during a period of transition.

The assessment acknowledges improvements in urgent and emergency care, planned care delivery, governance, strategic commissioning and our approach to population health and reducing inequalities.

4.3.3 There was recognition of the progress made through the recovery and support programme and the strengthening of our leadership, governance and partnership arrangements.

We recognise the areas identified for further improvement, particularly financial sustainability, cancer performance, diagnostics and the need to

ensure that our strengthened governance and commissioning arrangements consistently translate into improved outcomes for our population.

The ICB has seen an improvement in the effective interventions cancer metric, and work will continue to drive further improvement, with performance closely monitored to ensure delivery of this ambition. These will remain key priorities for the Board during 2026/27.

- 4.3.4 The outcome letter will be published alongside the ICB's 2025/26 Annual Report at our Annual General Meeting in September.

5 Recommendations

- 5.1 The Board is requested to:

1. Note the contents of the report.
2. Approve the proposed action.
3. Receive a further report at its meeting in November 2026.

Emma Woollett
September 2026