

**North East and North Cumbria Integrated Care Board  
Executive Committee (Public)**

**Minutes of the meeting held on Tuesday 14 January 2025, 10:45hrs in the  
Joseph Swan Suite, Pemberton House, Colima Avenue, Sunderland**

**Present:** Sam Allen, Chief Executive (Chair)  
Kelly Angus, Interim Chief People Officer  
Levi Buckley, Chief Delivery Officer  
David Chandler, Chief Finance Officer  
Graham Evans, Chief Digital and Infrastructure Officer  
Dave Gallagher, Chief Contracting and Procurement Officer  
Jacqueline Myers, Chief Strategy Officer  
Dr Neil O'Brien, Chief Medical Officer (Vice Chair)  
Ann Fox, Interim Chief Nurse and AHP Officer  
Claire Riley, Chief Corporate Services Officer

**In attendance:** Rebecca Herron, Corporate Committees Manager (Committee Secretary)  
Deborah Cornell, Director of Corporate Governance and Board Secretary  
Hilary Lloyd, Group Chief Nurse, Director of Infection Prevention and Control, University Hospitals Tees  
Jon Rush, Non-Executive Director

**EC/2024-25/263      Agenda Item 1 - Welcome and introductions**

The Chair welcomed all those present to the meeting and confirmed the meeting was quorate.

**EC/2024-25/264      Agenda Item 2 - Apologies for absence**

Apologies for absence were received from Nicola Hutchinson, Chief Executive, Health Innovation North East and North Cumbria (NENC).

No further apologies for absence were received.

**EC/2024-25/265      Agenda Item 3 - Declarations of interest**

Members had submitted their declarations prior to the meeting which had been made available in the public domain.

The Chief Finance Officer declared an interest under item 11.1 NENC ICB and ICS Finance Report – M8 2024/25 due to their spouse being a decision maker at Gateshead Health Foundation Trust.

The Chair noted the declaration of interest and the Chief Finance Officer can receive the report and attend the meeting but must refrain from taking

part in the discussion or decision on this item. The Director of Finance (Corporate) has been nominated as Deputy for item 11.1.

There were no additional declarations of interest made at this point in the meeting.

**EC/2024-25/266      Agenda Item 4 - Minutes of the previous meeting held on 10 December 2024**

**RESOLVED:**

**The Executive Committee AGREED that the minutes of the meeting held on 10 December 2024, were a true and accurate record.**

**EC/2024-25/267      Agenda Item 5 - Matters arising from the minutes and action log**

Minute reference EC/2024-25/178 Child Health and Wellbeing Group Terms of Reference

The Chief Corporate Services Officer informed the Committee discussions are ongoing with the Chief Strategy Officer to develop standard purpose bullet points to be included within the terms of reference for new and pre-existing subgroups. Action ongoing.

Minute reference EC/2024-25/227 New Risks to add to the Risk Register

The Interim Chief People Officer informed the Committee a risk around the delivery of the Oliver McGowan training programme has been developed and included on the risk register. Action complete.

Minute reference EC/2024-25/261 New Risks to add to the Risk Register

The Chief Finance Officer informed the Committee a review of the financial position risk has taken place. Action complete.

Minute reference EC/2024-25/224 Communications Strategic Plan

The Chief Corporate Services Officer informed the Committee feedback from Board members regarding the Communications Strategic Plan has been obtained. Action complete.

Minute reference EC/2024-25/248 Integrated Delivery Report

The Chief Corporate Services Officer informed the Committee this action is complete.

The Chair requested all Executive Committee members review and update their remaining allocated actions.

**ACTION:**

**All Executive Directors to review and update their allocated actions on the action log within one week**

**EC/2024-25/268      Agenda Item 6 - Notification of urgent items of any other business**

The Chief Contracting and Procurement Officer requested an item regarding Dental Access Recovery be included under any other business.

No further items of any urgent business were received at this point in the meeting.

**EC/2024-25/269      Agenda Item 7.1 – Board Assurance Framework and Risk Management Report Quarter 3**

The Chief Corporate Services Officer introduced the report which provided the Committee with the refreshed Board Assurance Framework (BAF) for quarter three of 2024/25 and the updated corporate risk register for review and consideration.

The Chief Corporate Services Officer informed the Committee:

- The risk score for risk 0031 – Managing capital spend within the confirmed capital funding allocation has decreased and the risk no longer meets the criteria for inclusion on the corporate risk register and will be managed locally
- The risk score for risk 0032 – Management of ICB running costs position has decreased and the risk no longer meets the criteria for inclusion on the corporate risk register and will be managed locally
- The risk score for risk 0082 – Medicines team capacity has decreased and the risk no longer meets the criteria for inclusion on the corporate risk register and will be managed locally
- Five new corporate risks have been added to the corporate risk register
  - 0086 - Failure to prioritise equality, diversity and inclusion
  - 0087 - Risk of losing dental underspend for 2025-2026
  - 0090 - Weight loss injections and Right to Choose providers
  - 0091 - Pharmacy Collective Action
  - 0047 - High rates of suspected suicides - The risk was temporarily closed whilst the owner reviewed the description and controls and has been reopened on the corporate register for this reporting period
- Risk 0079 - Patient safety concerns - complex care case management in Tees Valley has been closed

The Interim Chief Nurse noted there is a need to ensure that the right discussions are being held in the Quality and Safety Subcommittees by the risk owners at place, to safeguard the intelligence flow through to the Quality and Safety Committee for those risks.

The Chief Delivery Officer informed the Committee a refresh of goal four is required in collaboration with the Child Health and Wellbeing Network. A meeting is scheduled for the end of February 2025 with the network to review goal four within the BAF.

The Interim Chief People Officer noted a review of the people and culture risk is required to ensure the risks are captured correctly.

The Chair noted the strategic risk around primary care engagement and enquired if there is a need to amplify this risk. The Chief Corporate Services Officer assured the Committee the Director of Communications is involved with the primary care engagement work.

**ACTION:**

- 1) **The Chief Delivery Officer to review goal four of the BAF with the Childrens Health and Wellbeing Network**
- 2) **The Interim Chief People Officer to review the people and culture risks**

**RESOLVED:**

- 1) **The Committee AGREED the BAF accurately reflects the principal risks to achieving our objectives as well as their current mitigations**
- 2) **The Committee RECOMMENDED the approval of the BAF for quarter three 2024/25 to the Board**
- 3) **The Committee RECEIVED the corporate risk register for assurance**
- 4) **The Committee NOTED that the breakdown of risks identified at placed-based level is included within the Chief Delivery Officer's report**

**EC/2024-25/270      Agenda Item 7.2 – Living and Ageing Well Subgroup Terms of Reference**

The Chief Delivery Officer introduced the report which provided the Committee with the proposed Living and Ageing Well Partnership (LAWP) Subgroup Terms of Reference.

The Chief Delivery Officer informed the Committee further discussions have taken place with the Living and Ageing Well Subgroup members and it has been identified that the focus of the Subgroup can be both simplified and reframed around the neighbourhood working and the three shifts.

Following discussions the Committee noted:

- The governance reporting was not correctly identified
- The membership required further work.
- This Subgroup needs to orientate around the programme and delivery approach

**ACTION:**

**The Chief Delivery Officer to redraft the Living and Ageing Well Subgroup Terms of Reference with governance team input**

**RESOLVED:**

**The Committee REJECTED the Living and Ageing Well Subgroup Terms of Reference**

**EC/2024-25/271 Agenda Item 8.1.1 – Boost Development Improvement Programme Highlight Report**

The Chief Strategy Officer introduced the report which provided the Committee with an update of the development of the ICB Improvement approach, Boost Development Programme and the outlined key projects and milestones within the programme for 2025.

**RESOLVED:**

**The Committee RECEIVED the report for assurance**

**EC/2024-25/272 Agenda Item 8.1.2 – Cancer Alliance Highlight Report**

The Chief Strategy Officer introduced the report which provided the Committee with the Northern Cancer Alliance Subgroup work plan for 2024/25.

**RESOLVED:**

**The Committee RECEIVED the report for assurance**

**EC/2024-25/273 Agenda Item 8.1.3 – Clinical Effectiveness and Governance Subcommittee Highlight Report**

The Chief Medical Officer introduced the report which provided the Committee with the decisions made at the December 2024 Clinical Effectiveness and Governance Subcommittee.

The Chief Medical Officer informed the Committee the newly formed ethics group requires further clarity regarding its membership and purpose. Two core functions of the group are:

- To finalise the ethical decision making framework for the ICB which will be considered at the Quality and Safety Committee
- How we embed the framework into our commissioning processes

The first meeting of the ethics group discussed Ritlecitinib for treating severe alopecia, and tier three weight management service referral criteria standardisation.

The Director of Corporate Governance and Board Secretary requested a member of the governance team is involved with the establishment and Terms of Reference development of the ethics group.

It was noted the Clinical Effectiveness and Governance Terms of Reference requires further clarity regarding the role of this Committee and the role of the Quality and Safety Committee. The Chief Medical Officer agreed for the Deputy Director of the Medical Directorate to liaise with a

member of the governance team to review the Clinical Effectiveness and Governance Terms of Reference prior to resubmission for approval to the Committee.

It was noted that work with the governance team is required prior to submitted Terms of Reference to the Committee for approval.

**ACTION:**

**The Deputy Director of the Medical Directorate to liaise with the governance team to clarify the role of this Committee and the role of the Quality and Safety Committee within the Clinical Effectiveness and Governance Subcommittee Terms of Reference**

**RESOLVED:**

**The Committee RECEIVED the report for assurance**

**EC/2024-25/274      Agenda Item 8.1.3.1 – Clinical Effectiveness and Governance Subcommittee Terms of Reference**

**RESOLVED:**

**The Committee REJECTED the update Clinical Effectiveness and Governance Subcommittee Terms of Reference**

**EC/2024-25/275      Agenda Item 8.1.4 – Foundation Trusts Provider Oversight Highlight Report**

The Chief Contracting and Procurement Officer introduced the report which provided the Committee with an update regarding provider oversight meetings that have been held since April 2024, the associated minutes of these meetings and a proposal for the frequency and priority of upcoming provider oversight meetings.

The Chief Contracting and Procurement Officer proposed a quarterly update of the Foundation Trusts Provider Oversight meetings. The Committee agreed with the recommendation of quarterly reporting.

The Chief Digital and Infrastructure Officer noted that this was a useful report and it would be useful to consolidate learning as a result of each of the conversations and identify the emerging themes.

**RESOLVED:**

- 1) The Committee RECEIVED the report for assurance**
- 2) The Committee APPROVED a quarterly reporting cycle**

**EC/2024-25/276      Agenda Item 8.2 – Place Subcommittee Minutes**

South Tyneside - noted for information and assurance only.

Darlington - noted for information and assurance only.

South Tees - noted for information and assurance only.

North Cumbria - noted for information and assurance only.  
North Tyneside - noted for information and assurance only.

The Chief Corporate Services Officer informed the Committee there is a piece of place development work ongoing and that a session is being planned to meet with the chairs of the place subcommittees and the local delivery team members.

The Chair enquired if it was possible to review what has gone through the place subcommittees during 2024/25. The Chief Corporate Services Officer assured the Committee there is an overarching governance review taking place which will identify effectiveness and any quoracy issues at the place subcommittees. A report will be presented to the Committee following completion of the review.

**RESOLVED:**

**The Committee RECEIVED the Subcommittee minutes as listed above for assurance.**

**EC/2024-25/277      Agenda Item 8.3 – Mental Health, Learning Disabilities and Autism Subcommittee Minutes**

Noted for information and assurance only.

**RESOLVED:**

**The Committee RECEIVED the Mental Health, Learning Disabilities and Autism Subcommittee minutes for assurance**

**EC/2024-25/278      Agenda Item 8.4 – People and OD Subcommittee Minutes**

Noted for information and assurance only.

**RESOLVED:**

**The Committee RECEIVED the People and OD Subcommittee minutes for assurance**

**EC/2024-25/279      Agenda Item 8.5 – Pharmaceutical Services Regulatory Subcommittee Minutes**

Noted for information and assurance only.

**RESOLVED:**

**The Committee RECEIVED the Pharmaceutical Services Regulatory Subcommittee minutes for assurance**

**EC/2024-25/280      Agenda Item 9.1 - Executive Area Directors Update Report January 2025**

The Chief Delivery Officer provided a summary of items outlined in the report. The Committee was asked to particularly note from the report:

- Gateshead and Newcastle
  - The George Street Safe Haven has increased its operating hours to cover 7 days per week.
- North Tyneside and Northumberland
  - A special school in North Tyneside continues to be concerned about the care of some children with complex needs in their school. The Local Delivery Team and Nursing Directorate are working together with the school to understand the needs and support the care of the children in school
- North Cumbria
  - A £12m capital bid for a new Urgent Treatment Centre and wider Urgent Emergency Care model in Carlisle has been agreed
- County Durham
  - The Acute Hospital Discharge Service has been successful in supporting people who have been admitted to hospital but have issues linked to homelessness, finance or mental health. The project has helped to reduce delays in the discharge process from County Durham and Darlington Foundation Trust and Tees, Esk and Wear Valleys Foundation Trust and has achieved positive outcomes for service users. The service is being extended for a further two years
  - St Cuthbert's Hospice has made public the financial challenges they are facing as an organisation. The hospice has highlighted the supported provided by the ICB and has made an appeal to the public for their support
- Tees Valley
  - Four of the five Local Authorities across Tees Valley have now concluded their CQC inspections for Adults Social Care. Darlington's on-site inspection will commence in January. The Directors of Adults Social Services are keen to share the learning form the inspection
  - South Tees Hospitals NHS Foundation Trust has reported issues recently with samples sent to the biochemistry department for Hb1A1c testing. They have been working collaboratively with neighbouring Trusts to enable a limited testing service. The department confirmed on 12 December 2024 that they are now able to resume on-site testing. However, a backlog of samples has built up due to limited testing availability at the beginning of December

The Chief Corporate Services Officer informed the Committee the George Street Social is a fantastic facility and encouraged members to visit. The Chief Corporate Services Officer noted item 3.3.1 and the issues with



vasectomy provision in Tees Valley and that data from the Women's Health programme is indicating a rise in terminations, could there be a connection.

It was noted that funding has been secured to collaborate with the Directors of Public Health and Local Government to increase sexual health campaigning across the patch.

The Chair noted that this will be affecting the referral to treatment 18 week targets and requested the Chief Delivery Officer to compile a report regarding the availability of contraceptive service and present the report to the Committee in late spring.

**ACTION:**

**The Chief Delivery Officer to compile a report regarding the availability of contraceptive service and present the report to the Committee in late spring**

**RESOLVED:**

**The Committee RECEIVED the report for assurance and NOTED the decisions and assurance logs included within the report**

**EC/2024-25/281**

**Agenda Item 10.1 – Targeted Lung Health Checks**

The Chief Medical Officer introduced the report which provided the Committee with an update on the Targeted Lung Health Check (TLHC) Programme.

The Chief Medical Officer informed the Committee:

- The ICB took a decision to go further, faster and deliver this programme earlier than the national timetable
- in 2021, Newcastle Gateshead launched as one of ten national pilot sites.
- Since the mobilisation of Newcastle Gateshead, the NCA has led on the implementation of 3 further projects across the NENC, and as of October 2024, the region has 4 distinct projects,
- more than 182,000 invites have been issued,
- 91,000 LHCs have been completed,
- 49,000 low dose CT scans have been carried out,
- 537 lung cancers have been diagnosed.
- Full population coverage across the whole of the NENC is expected by March 2028.

The Chair expressed that this is a positive piece of work.

The Chief Medical Officer noted there is a risk around targeting patients who are not registered with a GP and that the GP collective action is beginning to affect the roll out of the programme. The Committee were assured targeting patients is being supported through the Healthier and

Fairer programme and discussions will be held with relevant Local Medical Committees if the collective action does impact on delivery.

It was noted that patient feedback regarding the programme is very positive.

The Chief Corporate Services Officer suggested as the impact is very positive this would be a good news story to take to the local Health and Wellbeing Boards. The Committee agreed for the Local Delivery Teams to provide the local Health and Wellbeing Boards with this update.

The Chief Strategy Officer noted that there is quite a significant variance of the referral rate from GP practices. The Cancer Alliance team have been requested conduct some targeted work with to resolve the low referral rates in some practices.

The Chief Corporate Services Officer proposed it would be beneficial to schedule a Cancer Deep Dive session with the Board at a forthcoming meeting. The Committee agreed with the proposal.

**ACTION:**

- 1) **The Chief Delivery Officer to liaise with Local Delivery Team to provide the local Health and Wellbeing Boards with the TLHC update**
- 2) **The Chief Corporate Services Officer to add a Cancer Deep Dive session to the Board forward plan**

**RESOLVED:**

**The Committee RECEIVED the report for information**

**EC/2024-25/282      Agenda Item 11.1 - NENC ICB and ICS Finance Report Month 8**

*At 11:44am the Director of Finance (Corporate) joined the meeting via MS Teams.*

The Chief Finance Officer declared an interest under this item due to their spouse being a decision maker at Gateshead Health Foundation Trust.

The Chair noted the declaration of interest and the Chief Finance Officer can receive the report and attend the meeting but must refrain from any decision making on this item. The Director of Finance (Corporate) has been nominated as Deputy for this item.

The Chief Finance Officer introduced the report which provided the Committee with an update on the financial performance of the North East and North Cumbria Integrated Care Board (NENC ICB) and NENC Integrated Care System (ICS) in the financial year 2024/25 for the eight months to 30 November 2024.

The ICS is reporting a year-to-date deficit of £18.56m compared to a planned deficit of £19.85m, a favourable variance of £1.29m. This is an improvement from the previous month largely due to a one-off tax rebate benefit within one of the provider trusts.

Net unmitigated financial risk across the ICS is now estimated at £161m across the system. This largely relates to the delivery of required efficiency plans which are higher than those delivered in 2023/24.

At month 8 this unmitigated financial risk is estimated and has been reported to NHSE at £47.5m (reduced from £61m at month 7) although work continues across the system to review this. This includes unmitigated net risks of just under £5m for the ICB, predominantly relating to prescribing, Continuing Healthcare and delivery of efficiencies.

ICB running costs:

- The ICB is reporting an underspend position against running cost budgets of £1.92m year to date and a forecast underspend of £4.60m, mainly due to vacancies

ICB Revenue:

- The ICB is reporting a year-to-date surplus of £38.81m, slightly ahead of plan and a forecast surplus of £53.6m in line with plan.

ICS Capital:

- ICS capital spending forecasts are currently in line the confirmed capital allocation

The Chief Finance Officer noted a concern that prescribing spend has increased and the system workforce numbers are not decreasing.

The Interim Chief People Officer informed the Committee all providers have been tasked with reducing their sickness absence by 1% and work is continuing to establish the collaborative workforce bank.

The Director of Finance (Corporate) informed the Committee under the current NHS finance regime there are no cash or revenue benefits of an ICB generating a surplus as long as the system overall is in balance, but there are cash impacts of NHS providers having a deficit or cash shortfall, with potentially significant borrowing costs for providers (and hence the system).

In light of this, and similar to the approach taken in 2023/24, it is proposed that the ICB forecast outturn surplus is reduced non-recurrently in quarter four with relevant NHS Foundation Trust (FT) providers within the ICS improving their positions by an equivalent amount, ensuring no change in the overall ICS position.

Currently the forecast ICB surplus position is £53.6m. It is proposed that £50m could be transferred to relevant FT providers, leaving the ICB with a smaller year end surplus of £3.6m, with no change to the overall ICS net position.

In 2024/25, it is recognised that at least one FT provider that is not currently in a deficit position is at risk of needing to borrow cash, incurring associated costs. A number of options have been considered for allocation of any ICB surplus transfer, including based on relative deficit positions and relative cash positions (using cash balances and operating expenditure to estimate the number of days 'cash on hand').

It is proposed to use a blended approach, allocating any transfer of ICB surplus based on:

- 50% allocated to the four FT providers with planned deficits, based on planned deficit value at month 9
- 50% allocated based on relative cash positions. This would allocate funding to the four FT providers with planned deficits plus one FT provider currently forecasting a breakeven position

The Committee were assured all provider Director of Finance are supportive of the approach.

The Committee agreed that perception is key and that a decision has not been taken to stop spending £50 million within the ICB to offset a pressure elsewhere. It was acknowledged that there are pressures across the system and there is little flexibility in terms of uncommitted resources.

The Chair noted this would be discussed in further detail at the Board meeting on 28 January 2025.

The Committee supported the proposed approach to redistribute a proportion of the forecast ICB surplus across the ICS.

The Committee recognised the financial risks and the ongoing work to mitigate the risks.

**RESOLVED:**

- 1) **The Committee NOTED the latest year to date and forecast financial position for 2024/25,**
- 2) **The Committee NOTED there are a number of financial risks across the system still to be managed**
- 3) **The Committee RECOMMENDED the proposed approach to redistribute a proportion of the forecast ICB surplus across the ICS, be presented to Board for approval**

*At 12:13pm the Director of Finance (Corporate) left the meeting.*

The Chief Strategy Officer introduced the report which provided the Committee with an overview of quality and performance, highlighting any significant changes, areas of risk and mitigating actions.

The Committee was informed of the key messages as follows:

- Urgent and Emergency Care
  - Ambulance handovers improved in November 2024 and risks remain around the volume of handover delays across 6 of our 8 Acute Providers.
  - Category two mean response times have improved in November 2024 compared to October 2024 but year to date performance remains ahead of plan. As a result of deteriorating performance North East Ambulance Service (NEAS) have remodelled their forecast position and reported to NHSE that the average 30mins national ambition, across 2024/25, will not be achieved, forecasting to report 31:24 mins. NEAS national ranking for Category two performance remains 2/11.
  - The Accident and Emergency four-hour wait performance was at 75.7% and remains above the national average of 72.1%, however this is behind the NENC November 2024 plan of 78.9%.
- Electives
  - 65 week waits have decreased from 329 in September 2024 to 301 in October 2024 making five consecutive reporting decreases
  - NENC ICS continue to be the best performing nationally in October 2024 for Referral to Treatment performance with 68.8% of people on the waiting list for elective (non-urgent) treatment waiting less than 18 weeks. This compares to national performance of 58.9%
  - In October 2024, the ICB reported two 104+ week waiters
- Cancer
  - Cancer 62-day performance increased from 65.8% in September 2024 to 68.9% in October 2024; though falls short the operational planning trajectory of 69.8%
  - Cancer faster diagnosis standard increased from 77.4% in September 2024 to 79.6% in October 2024 and is in line with the national expectations of 77%

The Chief Digital and Infrastructure Officer noted the data quality issues around morality have been resolved and enquired how long will it take to see an improvement in the data. The Chief Medical Officer informed the Committee due to the time lag in mortality data it could potentially take twelve to eighteen months to see the improvements in the data.

The Chair noted Units of Dental Activity are low against the benchmark. The Chief Strategy Officer assured the Committee there is further work to do to refine our performance against the metric.

A query was raised regarding Perinatal Services around are we on track to hit our target in quarter four. The Chief Strategy Officer will follow this up outside of the meeting.

The Chair noted it was good to see the detail of the Foundation Trust Provider Oversight meetings and suggested it would be beneficial to link the meetings with provider recovery trajectory plans.

**ACTION:**

- 1) **The Chief Strategy Officer to clarify if the Peninatal Services will hit the set target in quarter four**
- 2) **The Chief Contracting and Procurement Officer to consider how to link the Foundation Trust Provider Oversight meetings with provider recovery trajectory plans**

**RESOLVED:**

**The Committee RECEIVED the report for information and assurance**

**EC/2024-25/284**

**Agenda Item 12.2 – Emergency Preparedness, Resilience and Response (EPRR) Assurance**

The Chief Strategy Officer introduced the report which provided the Committee with an overview of the NHS England EPRR annual core standards programme for 2024.

The Chief Strategy Officer informed the Committee NENC ICB have moved from a position of non-compliance (49%) in 2023 to a much improved position of partial compliance (77%) in 2024 whilst all Trusts have also seen a significant improvement in compliance rating.

The Committee were assured the annual assurance EPRR self-assessment is a range of standards that are set by NHS England and has been checked and challenged at a regional level and a significant exercise on business continuity has been undertaken.

It was noted it is disappointing that we did not achieve a fully compliant status, however, there has been significant improvement since last year. The Committee thanked the team for the work accomplished to obtain the 77% status.

The Chair noted a piece of work regarding the extensive recommendations that came out of the Manchester Arena inquiry. The Chief Strategy Officer informed the Committee that to fully comply with those recommendations. A substantial investment in the tens of millions in a number of our services would be required. Given our financial position we have decided to await

national decision making as it an issue that is unique to our ICS. During this period, we will conduct a detailed risk assessment of what our vulnerabilities and exposures are and identify what gaps there could be in our mitigations.

The Chief Strategy Officer informed the Committee a goal has been set to reach substantial assurance at the next assessment.

**RESOLVED:**

- 1) **The Committee NOTED this report which details the outcome of NENC ICB and its commissioned Foundation Trusts EPRR Core Standards self-assessment process**
- 2) **The Committee NOTED that a workplan is in place, overseen by the Local Health Resilience Partnership and Regional Health Resilience Partnership, to ensure rapid progress in further enhancing EPRR Core Standards in 2025**
- 3) **The Committee RECOMMENDED to Board to approve submission to the EPRR self-assessment to NHSE**

**EC/2024-25/285      Agenda Item 13 – Commissioning**

No update for this item.

**EC/2024-25/286      Agenda Item 14.1 – Health and Growth Accelerator Delivery Plan**

The Chief Corporate Services Officer introduced the report which provided the Committee with the delivery plan for the ICB's Health and Growth Accelerator Programme (2025/26).

The Chief Corporate Services Officer informed the Committee NHS North East and North Cumbria ICB has been designated as a 'Health and Growth Accelerators,' alongside the ICBs in South Yorkshire and West Yorkshire. We will receive £18M of funding to deliver a programme of work to boost people's health alongside tackling the conditions that most impact people's ability to work.

The high level delivery plan was submitted to NHS England on 20 December 2024. Their feedback commended the plan for its detail, data driven population health approaches and use of existing local infrastructure and governance structures. They suggested that we highlighted the largest employers in area as key stakeholders, especially in the NHS, education providers, and the private sector, especially in the automotive and chemical industries.

The next phase of the plan is to clearly identify the programmes, the investment required within those programmes and the processes for them. The operational deadline is 1 April 2025.

The Committee were assured that engagement is taking place with Health and Wellbeing Boards and Directors of Public Health. The programme will link with the Working Well Steering Group and be governed by the Healthier and Fairer Subcommittee.

The Chief Delivery Officer noted there will be an expectation of Local Delivery Team support and there is a need to understand the scale of that. The Director of Policy, Involvement and Stakeholder Affairs is attending a meeting to discuss the support required.

The Chief Digital and Infrastructure Officer noted that with the five emerging pillars of inequality, links are already in place with our digital inclusion programme.

**RESOLVED:**

**The Committee APPROVED the Health and Growth Accelerator delivery plan**

**EC/2024-25/287      Agenda Item 15.1.1 – HR02 - Health at Work Policy**

The Interim Chief People Officer informed the Committee the Health at Work Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Health at Work Policy.

**RESOLVED:**

**The Committee APPROVED the HR02 - Health at Work Policy**

**EC/2024-25/288      Agenda Item 15.1.2 – HR02A – Supporting Attendance Policy**

The Interim Chief People Officer informed the Committee the Supporting Attendance Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Supporting Attendance Policy.

**RESOLVED:**

**The Committee APPROVED the HR02A – Supporting Attendance Policy**

**EC/2024-25/289      Agenda Item 15.1.3– HR02B - Addictions and Dependency Policy**

The Interim Chief People Officer informed the Committee the Addictions and Dependency Policy has been reviewed and updated through the normal review process.



The Committee is asked to approve the updated Addictions and Dependency Policy.

**RESOLVED:**

**The Committee APPROVED the HR02B - Addictions and Dependency Policy**

**EC/2024-25/290      Agenda Item 15.1.4 – HR02C - Mental Wellbeing and the Workplace Policy**

The Interim Chief People Officer informed the Committee the Mental Wellbeing and the Workplace Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Mental Wellbeing and the Workplace Policy.

**RESOLVED:**

**The Committee APPROVED the HR02B - Mental Wellbeing and the Workplace Policy**

**EC/2024-25/291      Agenda Item 15.1.5 – HR02D - Menopause Policy**

The Interim Chief People Officer informed the Committee the Menopause Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Menopause Policy.

**RESOLVED:**

**The Committee APPROVED the HR02D - Menopause Policy**

**EC/2024-25/292      Agenda Item 15.1.6 – HR03B - Incremental Pay Progression Policy**

The Interim Chief People Officer informed the Committee the Incremental Pay Progression Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Incremental Pay Progression Policy.

**RESOLVED:**

**The Committee APPROVED the HR03B - Incremental Pay Progression Policy**

**EC/2024-25/293      Agenda Item 15.1.7 – HR04 - Work Life Balance Policy**

The Interim Chief People Officer informed the Committee the Work Life Balance Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Work Life Balance Policy.

**RESOLVED:**

**The Committee APPROVED the HR04 - Work Life Balance Policy**

**EC/2024-25/294      Agenda Item 15.1.8 – HR05 - Annual Leave Policy**

The Interim Chief People Officer informed the Committee the Annual Leave Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Annual Leave Policy.

**RESOLVED:**

**The Committee APPROVED the HR05 - Annual Leave Policy**

**EC/2024-25/295      Agenda Item 15.1.9 – HR07 - Recruitment Policy**

The Interim Chief People Officer informed the Committee the Recruitment Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Recruitment Policy.

**RESOLVED:**

**The Committee APPROVED the HR07 - Recruitment Policy**

**EC/2024-25/296      Agenda Item 15.1.10 – HR07A - Recruitment and Retention Premia**

The Interim Chief People Officer informed the Committee the Recruitment and Retention Premia has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Recruitment and Retention Premia.

**RESOLVED:**

**The Committee APPROVED the HR07A - Recruitment and Retention Premia**

**EC/2024-25/297      Agenda Item 15.1.11 – HR11 - Special Leave Policy**

The Interim Chief People Officer informed the Committee the Special Leave Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Special Leave Policy.

**RESOLVED:**

**The Committee APPROVED the HR11 - Special Leave Policy**

**EC/2024-25/298    Agenda Item 15.1.12 – HR12 - Secondment Policy**

The Interim Chief People Officer informed the Committee the Secondment Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Secondment Policy.

**RESOLVED:**

**The Committee APPROVED the HR11 - Secondment Policy**

**EC/2024-25/299    Agenda Item 15.1.13 – HR13 - Freedom to Speak Up Policy**

The Interim Chief People Officer informed the Committee the Freedom to Speak Up Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Freedom to Speak Up Policy.

**RESOLVED:**

**The Committee APPROVED the HR13 - Freedom to Speak Up Policy**

**EC/2024-25/300    Agenda Item 15.1.14 – HR15 - Managing Conduct and Concerns Policy**

The Interim Chief People Officer informed the Committee the Managing Conduct and Concerns Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Managing Conduct and Concerns Policy.

**RESOLVED:**

**The Committee APPROVED the HR15 - Managing Conduct and Concerns Policy**

**EC/2024-25/301    Agenda Item 15.1.15 – HR17 - Managing Work Performance (Capability)**

The Interim Chief People Officer informed the Committee the Managing Work Performance (Capability) Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Managing Work Performance (Capability) Policy.

**RESOLVED:**

**The Committee APPROVED the HR17 - Managing Work Performance (Capability) Policy**

**EC/2024-25/302 Agenda Item 15.1.16 – HR18 - Respect at Work Policy**

The Interim Chief People Officer informed the Committee the Respect at Work Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Respect at Work Policy.

**RESOLVED:**

**The Committee APPROVED the HR18 - Respect at Work Policy**

**EC/2024-25/303 Agenda Item 15.1.17 – HR19 - Grievance and Resolution Policy**

The Interim Chief People Officer informed the Committee the Grievance and Resolution Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Grievance and Resolution Policy.

**RESOLVED:**

**The Committee APPROVED the HR19 - Grievance and Resolution Policy**

**EC/2024-25/304 Agenda Item 15.1.18 – HR25 - Armed Forces, Reserves and Cadets Policy**

The Interim Chief People Officer informed the Committee the Armed Forces, Reserves and Cadets Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Armed Forces, Reserves and Cadets Policy.

**RESOLVED:**

**The Committee APPROVED the HR25 - Armed Forces, Reserves and Cadets Policy**

**EC/2024-25/305 Agenda Item 15.1.189 – HR52 - Health at Work Policy**

The Interim Chief People Officer informed the Committee the Pay Protection Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Pay Protection Policy.

**RESOLVED:**

**The Committee APPROVED the HR52 - Pay Protection Policy**

**EC/2024-25/306      Agenda Item 15.2.1 – ICBP029 – Moving and Handling Policy**

The Chief Digital and Infrastructure Officer informed the Committee the Moving and Handling Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Moving and Handling Policy.

**RESOLVED:**

**The Committee APPROVED the ICBP029 – Moving and Handling Policy**

**EC/2024-25/307      Agenda Item 15.2.2 – ICBP030 – Physical Security Policy**

The Chief Digital and Infrastructure Officer informed the Committee the Physical Security Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Physical Security Policy.

**RESOLVED:**

**The Committee APPROVED the ICBP030 – Physical Security Policy**

**EC/2024-25/308      Agenda Item 15.2.3 – ICBP034 – Provision and Use of Work Equipment Policy**

The Chief Digital and Infrastructure Officer informed the Committee the Provision and Use of Work Equipment Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Provision and Use of Work Equipment Policy.

**RESOLVED:**

**The Committee APPROVED the ICBP034 – Provision and Use of Work Equipment Policy**

**EC/2024-25/309      Agenda Item 15.2.4 - ICBP041 – Violence and Aggression Abuse Management Policy**

The Chief Digital and Infrastructure Officer informed the Committee the Violence and Aggression Abuse Management Policy has been reviewed and updated through the normal review process.

The Committee is asked to approve the updated Violence and Aggression Abuse Management Policy.

**RESOLVED:**

**The Committee APPROVED the ICBP041 - Violence and Aggression Abuse Management Policy**

**EC/2024-25/310      Agenda Item 16.1 – Dental Access Recovery**

The Chief Contracting and Procurement Officer introduced the report which provided the Committee with the proposed non-recurrent funding allocation to support the continuations of 2024/25 non-recurrent schemes into 2025/26.

The proposal is to allocate £3,600,878 non-recurrent funding from the dental ring-fenced budget to support the extension of the following short-term 2024/25 dental access initiatives into 2025/26 to maintain access for patients:

- Incentivised access scheme - £2.6m
- Additional out of hours capacity - £707,692
- Additional minor oral surgery capacity (North Cumbria) - £293,186

The Committee were assured the proposal was considered at the Primary Care Strategy and Delivery Subcommittee on 10 January 2025, where it was supported and recommended to the Committee given the financial value.

**RESOLVED:**

**The Committee APPROVED the allocation of £3,600,878 non-recurrent funding from the dental ring-fenced budget to support the extension of the following short-term 2024/25 dental access initiatives into 2025/26**

There were no further items of any other business for consideration.

**EC/2024-25/2311      Agenda Item 16.2 - New Risks to add to the Risk Register**

No further risks were identified.

**EC/2024-25/312      Agenda Item 17 - CLOSE**

The meeting was closed at 12:40hrs.

**Date and Time of Next Meeting**

Tuesday 11 February 10:30am.



**Samantha Allen**  
**Executive Committee Chair**  
**11 February 2025**