

North East and North Cumbria Integrated Care Board

**Minutes of the meeting held on 25 July 2023
at 10:30, The Durham Centre, Belmont**

Present: Professor Sir Liam Donaldson, Chair
Samantha Allen, Chief Executive
Dr Hannah Bows, Independent Non-Executive Member
Ken Bremner, Foundation Trust Partner Member
Levi Buckley, Executive Area Director (North and North Cumbria)
David Chandler, Executive Director of Finance
Professor Graham Evans, Executive Chief Digital, and Information Officer
David Gallagher, Executive Area Director (Tees Valley and Central)
Professor Eileen Kaner, Independent Non-Executive Member
Annie Laverty, Executive Director of Improvement and Experience
Dr Saira Malik, Primary Medical Services Partner Member
Jacqueline Myers, Executive Chief of Strategy and Operations
Dr Neil O'Brien, Executive Medical Director
David Purdue, Executive Chief Nurse
Claire Riley, Executive Director of Corporate Governance, Communications and Involvement
Jon Rush, Independent Non-Executive Member
Dr Mike Smith, Primary Medical Services Partner Member
David Stout, Independent Non-Executive Member
Lisa Taylor, Voluntary Community and Social Enterprise Representative
Aejaz Zahid, Executive Director of Innovation

In Attendance: Deborah Cornell, Director of Corporate Governance and Board Secretary
Toni Taylor, Governance Officer (minutes)
Joseph Chandy Director of Primary Care Transformation (item 8.1)
Stewart Youngman, Senior Primary Care Manager Dental (item 8.1)
Peter Strachan, Chair, North East Ambulance Service (item 11)
Helen Ray, Chief Executive Officer, North East Ambulance Service (item 11)

B/2023/36 Welcome and Introductions

The Chair welcomed members to the meeting of North East and North Cumbria Integrated Care Board and specifically wished to welcome two new regular participants of the Board:

- Lisa Taylor, Voluntary Community and Social Enterprise Sector Representative
- Christopher Akers-Belcher, Healthwatch Representative (not in attendance)

It was acknowledged that the Executive Director of Innovation would be leaving the organisation on 11 August for a new role overseas. The Chair thanked the Executive Director of Innovation for his contributions to the Board and wished him luck for the future.

The following individuals were in attendance under public access rules:

- Rachel Farmer, Business Development Director, Liaison Workforce (NHS at work)
- Mell Dickson, Finance Division, Liaison Workforce
- Mark Cotton, Assistant Director of Communications, NEAS
- Roger Nettleship, Resident, South Tyneside

B/2023/37 Apologies for Absence

Apologies were received from Dr Rajesh Nadkarni, Foundation Trust Partner Member and Tom Hall, Local Authority Partner Member, Cath McEvoy-Carr, Local Authority Partner Member.

B/2023/38 Quoracy

The Chair confirmed the meeting was quorate.

B/2023/39 Declarations of Interest

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

The Chair noted the following conflicts already declared:

Item 8.1 – Hannah Bows' spouse is a Dentist.

Item 11 - Professor Graham Evans' son works as a commercial accounts and marketing manager for NHS North East Ambulance Service Foundation Trust.

The Chair noted the declarations but deemed it not to be material and therefore both members were able to take part in the discussions.

B/2023/40 Minutes of the previous meeting held on 30 May 2023

RESOLVED

The Board **AGREED** that the minutes of the meeting held on 30 May 2023 were a true and accurate record.

B/2023/41 Minutes of the extraordinary meeting held on 22 June 2023

RESOLVED

The Board **AGREED** that the minutes of the extraordinary meeting held on 22 June were a true and accurate record.

B/2023/42 Minutes of the extraordinary meeting held on 27 June 2023

RESOLVED

The Board **AGREED** that the minutes of the extraordinary meeting held on 27 June were a true and accurate record.

B/2023/43 Action log

There were no further updates to the action log.

B/2023/44 Matters arising from the minutes

There were no matters arising.

B/2023/45 Chief Executive's Report

The report provided an overview of recent activity carried out by the Chief Executive and Executive Directors, as well as some key national policy updates.

- i) Independent Review on North East Ambulance Service (NEAS)
Following a high-profile whistleblowing case relating to the coronial process within the North East Ambulance Service and subsequent criticism of the handling of the whistleblowing process, the Government commissioned Dame Marianne Griffiths to independently investigate the issues identified.

The report was published on the 12 July 2023 and was shared with the families referenced within the report on 11 July 2023.

The Chief Executive expressed thanks and heartfelt condolences to the families who participated in the independent review.

As part of the publication process, NHS England stipulated the requirement for NEAS and North East and North Cumbria (NENC) Integrated Care Board (ICB) to share the final report with Boards in private in advance of the publication date. In

addition, Boards were asked to approve a required Assurance Statement.

The Chair and Chief Executive of NEAS will attend the Board today and share the learning from the report and give an oversight on the progress with the recommendations from the report.

Dame Marianne Griffiths recommended that an independent board be established to have oversight of the recommendations and actions outlined in the report. The ICB has been working closely with NHS England who are managing the appointment of the Chair of that Board.

North West Ambulance Service serve the North Cumbria population and have confirmed they are reviewing their own practice and will be asked to provide assurance to the North Cumbria place sub-committee. To date no issues have been identified.

ii) Industrial Action

Junior doctors are undertaking their longest period of industrial action to date which will impact five days, from the morning of Thursday 13 to the morning of Tuesday 18 July 2023. Consultant Medical Staff have two days of industrial action planned for the morning of Thursday 20 to the morning of Saturday 22 July.

The provider trusts have developed detailed plans to manage the impact of this action and the ICB's Strategic Coordination Centre has been running with enhanced staffing to coordinate across the ICB and support the Trusts with any operational difficulties that arise.

The main impact of this and other recent strikes is the loss of elective (planned) patient appointments and operations, as fewer are scheduled on the days of action due to the reduced availability of medical staff.

Colleagues across the NHS and wider health and care systems, general practice and the community sector were thanked for their efforts in minimising the disruption to patients during this time.

iii) Winter Planning

System priority setting for winter 2023/24 is in its final stages following a system-wide event and three co-design sessions across the Integrated Care System (ICS), covering a wide spectrum of professions and geographies. This work is being led by the ICS Urgent and Emergency Care Board who have identified three priority areas of focus this year:

1. Getting people to the right place first time
2. Flow (how people move through the health and care system)
3. Improving discharges and transfers of care

From a current performance perspective, although the ICS is overall in a relatively strong position, one of the greatest opportunities for the urgent and emergency care (UEC) system is to reduce unwarranted variation across services and geographies, whilst tailoring services to meet local need. The current UEC operational plan for 2023/24 and the emerging five-year plan are both focused on achieving this for the population of the NENC.

iv) The NHS Workforce Plan

The long-term NHS workforce plan was published on the 30 June 2023, the plan is the first time that there has been a funded plan (2.4 billion) for NHS workforce and is focused on three main areas; Train, Retain, Reform.

The ICB People Plan mirrors the national plan priorities on supply, retention, new ways of working, wellbeing, inclusion and leadership. The ICB People Plan is scheduled to be published in September and will be one of the first items to be considered by the newly formed System Leadership Group.

Wider discussion took place on the training aspect of the workforce plan. It was noted that there is an opportunity in Teesside where two hospital trusts are working well together in a new collaboration and partnership. A Strategic Medical Workforce Group is being established with the first meeting scheduled for September. This group will look at issues including training and gaps in workforce.

v) Integrated Care Partnership

The third meeting of the Strategic Integrated Care Partnership was held in June where updates were received by the four Area ICP Chairs.

The NHS Joint Forward Plan, which sets out in detail how the strategic ambitions of the Integrated Care Strategy will be implemented, is currently out for consultation and will be approved at the next Board meeting in September.

ACTION

NHS Joint Forward Plan to be approved by the Board on 26 September 2023.

vi) Waiting Well

The waiting well project supports patients across the ICB on routine lists for surgery to prepare physically and psychologically

ahead of their procedure. 721 patients were contacted with 161 accepting support. The project is subject to evaluation, but early data reported improvements in overall quality of life.

vii) ICB Development

On 1 July 2023 NENC ICB marked one year since it became a statutory organisation. The first year has been focused on the transition from eight organisations in to one. It was acknowledged that there is a significant amount of work to be proud of including the work of communications and finance teams who have recently been recognised nationally with award winning success.

The ICB is required to make a 30% running cost reduction by 2025/26 with the first 20% of this delivered by the start of 2024/25. The ICB has established a programme to deliver this and has commenced engaging with staff across the ICB to enable staff to have the opportunity to be part of reshaping the ICB, transforming ways of working and developing the organisations operating model.

viii) System Leadership

The development of a leadership group across the system was supported at the last Joint Management Executive Group and nominations for membership have been received. The inaugural meeting will be a facilitated workshop to allow the group to come together and co-produce the purpose and way of working to ensure a collective and proactive role in shaping and delivering a vision for our health and care system.

RESOLVED:

The Board **RECEIVED** the report for information and assurance.

B/2023/46 Primary Care Dental Access Recovery: First Steps

The report outlined the proposed approach and next steps in relation to the plan for 2023-24 that will attempt to 'protect, retain and stabilise' local NHS primary care general dental services from its current state with a particular focus on CORE20 localities where need and inequality is greatest, noting that a more detailed paper outlining the full plan is being developed.

The Director of Transformation Primary Care and Senior Primary Care Manager for Dental joined the Board meeting to support the presentation of Primary Care Dental Access Recovery; First Steps.

It was reported that there are significant challenges for people accessing dentistry in North East and North Cumbria.

The following key points were highlighted:

- Dental services have struggled to recover from the impact of covid
- There are significant challenges with recruitment and retention of dentists
- There is widespread recognition that the national dental contract requires reform
- The number of contracts handed back in North East and North Cumbria has increased from three throughout 2020, to 12 in the first five months of 2023
- 20% of the 318 contracts in North East and North Cumbria are performing below 59%
- Local people are experiencing significant problems accessing NHS dentists particularly for residents in North and West Cumbria, North Northumberland, Darlington and parts of County Durham.

It was noted that NHS England has delegated responsibility to NENC ICB for commissioning dental services from 1 April 2023.

The Board were advised that the challenges will be tackled in three phases;

1. Immediate actions to stabilise services.
2. A more strategic approach to workforce and service delivery.
3. Developing an oral health strategy to improve oral health and reduce the pressure on dentistry.

£3m non-recurrent investment will be used to;

- Increase NHS 111 dental clinical assessment capacity
- Increase out of hours treatment services
- Extend access arrangements to provide an additional 27.5k patient treatments for the rest of 2023/4.

There is an opportunity to work with Health Education England North East (HEE) and University of Central Lancashire (UCLan) to look at joint initiatives to support the development of local workforce.

Fluoridation work is ongoing with the Department of Health and Social Care and the regional team. Funding has been identified for a feasibility study linked to the operationalisation of fluoridisation with the North East being identified as a pilot area for this.

NHS dental contracts in England and Wales are given a target of number of treatments to be performed within a 12-month radial span

measured in the form of Unit of Dental Activity (UDAs). This is adding additional pressure.

Conversations are underway with NHS England and ICB finance teams around dental contracts and finances.

National reform will address root cause issues. Locally, risk mitigating actions will be identified whilst reform is awaited.

A parliamentary report published July 2023 outlined the findings from a published independent review of the current position of NHS dentistry and included recommendations for ICBs.

The ICB is currently working on a 3-5 year plan to take forward the challenges within dentistry. Progress will be reported at future Board meetings.

ACTION

Primary Care Dental Access Recovery 3-5 Year Plan to be shared with the Board once available.

RESOLVED:

The Board **NOTED** the content of the report and the initial measures funded to help manage current service pressures in the context of developing a wider oral health strategy.

B/2023/47 Integrated Delivery Report

The report provided an overview of quality and performance, highlighting any significant changes, areas of risk and mitigating actions. The report also provided an overview of the ICS position on the NHS Oversight Framework and Care Quality Commission (CQC) ratings of organisations.

The Executive Director of Strategy and Operations drew the Board's attention to the following;

NHS England Escalation

North Cumbria Integrated Care was placed in Tier 2 for cancer backlog in summer 2022; a significant amount of work has been undertaken since then. The trust successfully delivered within their plan and has been removed from Tier 2 for cancer.

Newcastle Hospitals NHS Foundation Trust (NUTH) remains the only NENC trust in the elective tiering system, currently in Tier 1 for elective care.

CQC ratings

South Tees NHS Foundation Trust overall rating has improved from 'requires improvement' to 'good'. The CQC identified 13 "must-do"

actions. An interim improvement plan was developed which will now be reviewed following publication of the final report.

The CQC has found some improvements following an unannounced inspection of emergency and urgent care services run by NEAS in April and May. Following this inspection, the overall rating for emergency and urgent care improved from 'inadequate' to 'requires improvement'.

A number of maternity inspections have taken place as part of the CQC's maternity inspection programme and reports are awaited. Newcastle Upon Tyne Hospitals Foundation Trust (NUTH) maternity services were rated 'requires improvement' and a number of actions were identified.

Accident and Emergency 4-hour performance target

As a system a higher target than the benchmark for England was set. During May this target was not met, however there has been slight improvement since. Deep dives are being carried out within individual organisations and an improvement plan is in place with one trust.

Category two ambulance response target

NEAS remain a stronger performer nationally, ranking 1 out of eleven for category 1 and 4 response times. There was a slight deterioration in category 2 calls during May, resulting in NEAS ranking 7 out of eleven. An improvement plan is being developed. Nationally there are monies available to support improvement of category 2 performance, NEAS and NWAS have indicated they are submitting significant bids for this.

2-hour Urgent Community Response (UCR) target

The 2-hour UCR for primary and community care in North East and North Cumbria exceeds the target with an increased number of contacts delivered, highlighting effective responsive work.

Elective Care

Industrial action continues to impact elective care waiting lists which continue to increase month by month. Detailed work is underway looking at how to improve performance.

Maternity

Additional metrics are now included within the report. The Executive Chief Nurse requested a deep dive to look at variation behind the data and an update will be included in the report for the next meeting of the Board.

Adult Mental Health

The new national terminology for Improving Access to Psychological Therapies (IAPT) is now NHS Talking Therapies for Anxiety and Depression (TTAD).

Performance remains below target and short term actions have been initiated which include a recruitment drive for additional resource and a review of contracts.

In terms of out of area placements, inappropriate bed days have seen an overall decline but numbers remains above target. Work is underway to overhaul the management of complex cases and a review has been undertaken of providers in area and out of area.

It was suggested that it would be useful to include waiting times data on mental health conditions specifically Gender Dysphoria, as the current waiting times data focuses more on physical conditions. Waiting times exceed one to three years for referrals of diagnosis of Autism and ADHD. There are currently no national metrics for waiting times in Neurodiverse diagnostic pathways. The ICB are now receiving data on this from both mental health trusts.

ACTION:

The Executive Chief of Strategy and Operations to request waiting times data on Gender Dysphoria to include in future reports.

RESOLVED:

The Board **RECEIVED** the report for information and assurance.

B/2023/48 Finance Report

The Executive Director of Finance provided an update on the financial performance of the Integrated Care Board and Integrated Care System for the period up to 31 May 2023. The Board noted the following key points:

ICS Revenue Position

As at 31 May 2023, the ICS is reporting an overall year to date deficit of £30.46m compared to a planned deficit of £28.66m, an adverse variance of £1.8m.

The £1.8m year to date overspend compared to plan reflects pressures in provider positions relating to costs associated with strike action and achievement of elective recovery funding.

The forecast ICS position for the year is a deficit of £49.87m in line with the final financial plan submitted to and agreed by NHS England. We are currently on track to achieve this plan.

ICB revenue position

As at 31 May 2023 the ICB is reporting a year-to-date surplus of £5.38m, broadly in line with plan, with a forecast surplus for the year of £32.4m.

NHS England plan letter conditions and financial controls

A letter from received from NHS England in June 2023 provided feedback on the final 2023/24 plan submission and highlighting a number of conditions and expectations around financial controls across the system, given the planned deficit position.

The ICB Executive Director of Finance is leading discussions with Directors of Finance across the ICS to consider the most effective practical application of these controls and how assurance is provided as to the consistent operation of controls. In the majority of cases, appropriate controls are already in place within individual organisations, although these may need to be reviewed.

The financial controls and conditions outlined within the letter will be reviewed in detail and updates provided via the ICBs Finance, Performance and Investment Committee and Executive Committee.

Medium-term financial plan

Work has commenced on the development of a medium-term financial plan, incorporating a financial recovery plan. This is being developed across the ICS with support from Chief Executives and Directors of Finance, with the intention to develop a high-level plan by the end of September which will support NHSE requirements and support delivery of the 2023/24 financial position. Further detailed plans will be developed by the start of 2024/25 to support future years.

ACTION:

The medium-term financial plan to be submitted to the September Board for consideration.

RESOLVED:

The Board **RECEIVED** the report for information and assurance.

B/2023/49

Spring Booster Thematic Review and development plans for Autumn

The Executive Medical Director presented an update on learning from the Spring Booster Campaign.

Key points and learning were noted as follows:

- Vaccine supply issues at the start of the campaign impacted on overall uptake and inequalities

- The 2023 campaign had the largest amount of MP enquiries and complaints from patients all linked to access to an appointment
- The systems communication campaign was critical to enhancing awareness and driving uptake
- Further integration of seasonal vaccination programmes with other vaccination schedules
- Strength of local data will allow more focus on health inequalities.

Data and performance

North East and North Cumbria had a stronger performance in terms of uptake in comparison to NHSE England and North East and Yorkshire:

- Care home residents 78.1%
- 75 and over 74.9%
- Immunosuppressed 43.1%

In terms of health inequalities, data showed:

- System average uptake of 66.8%
- DeepEnd practice average of 60.4%
- Improved picture compared to Autumn 2022, narrowing the gap
- Minority ethnic groups saw a greater reduction in uptake in 2023 compared to 2022.

Vaccine supply

Over the period of the first 11 weeks of the campaign, there was a difference of 89,850 doses of vaccine which equates to 24% less vaccine than received by the ICS in Spring 2022.

The first two weeks saw delivery of a vaccine which is licensed for people 75 years and over only. However, the quantity of vaccine delivered and its time frame led to a reduced level of uptake over the 12 week campaign.

Demand and activity

Care Home and Housebound vaccination week on week was delivered at a faster rate compared 2022/23.

By week six, the system was short 39,000 doses compared to 2022. Quantity of supply led to the need for further Mutual Aid, 91 requests in total and 24,000 doses moved.

Communications and engagement

Activity included communication across social media, TV, radio and newspapers. Across the five radio networks with a total reach of 1,310,658 the total number of impacts was 6,654,933.

Next steps

A pilot proposal has been submitted that would see North East and North Cumbria receive 75% of its total vaccine upfront to improve vaccine supply.

There will be a continued focus on seldom heard groups and continued integration with other vaccination programmes.

A further update will be brought to the Board once the Joint Committee on Vaccination and Immunisation (JCVI) has agreed the Autumn Covid immunisation programme.

RESOLVED:

The Board **NOTED** the presentation for information and assurance.

B/2023/50

North East Ambulance Service (NEAS) Independent Investigation Report

The Chair and Chief Executive of NEAS attended to present an oversight on the progress and recommendations from the independent investigation report.

The independent review into the North East Ambulance Service resulted from a discussion in the Houses of Parliament in June 2022 and commenced in September 2022.

The investigation had full engagement of NEAS throughout. Actions already identified by the Trust were underway with oversight through a Quality Improvement Group (comprising of NHS England, Integrated Care Board and Care Quality Commission colleagues) from November 2022, and a supportive buddy arrangement with a neighbouring Trust from 2023. The report was published 12 July 2023. The Board of Directors wholly committed to deliver on the improvement outlined in the recommendations.

NEAS acknowledged and accepted contribution to the significant distress and ongoing grief for the relatives and friends of the four patients featured in the review.

The Board was advised that NEAS have published an assurance statement to clearly demonstrate the intention that the recommendations are being addressed or have already been addressed.

NEAS remain committed to ensuring improvements are embedded into the service and will continue to work with regulators to provide assurance to patients, public and stakeholders in this respect.

The Board was presented with a number of recommendations as outlined in the independent report and noted NEAS' responses to those recommendations.

Next steps for NEAS to undertake were acknowledged as follows:

- NEAS Public Board meeting in August 2023
- NEAS Council of Governors meeting in August 2023
- Attendance at both of the regional Overview and Scrutiny Committees in July and September 2023
- Continued regulatory oversight through NHS England / ICB
- Key focus in the coming weeks is to:
 - complete the review of professional accountability
 - understand when the Oversight Committee with family involvement will commence
 - secure medical examiner input into the Trust's processes
 - Hold a Nomination and Remuneration Committee
- All other recommendations are either completed or underway with oversight through the their Trust Board and/or the existing regulatory meetings with NHSE, the ICB and CQC.

The following recommendations had been made within the Independent Report which are specific to the NENC ICB.

- To endorse the proposal currently being put forward by the commissioners to change the commissioning framework moving forward to improve governance oversight arrangements
- To develop a coherent medium term resource plan with ambulance service commissioners to secure safe and sustainable services

The Executive Chief Nurse presented the ICBs assurance statement.

It was confirmed that the recommendations within the report which are specifically for NENC ICB have been actioned and the ICB continues to work with NEAS to monitor progress against all of the actions detailed within the report, alongside monitoring performance as part of the oversight role the ICB fulfils.

Further discussion took place to ensure the ICB were further assured and the following key points were highlighted:

- All ambulance trusts capture serious incident data in different ways, with no overarching framework. NEAS have already raised this issue through ACE (membership body) and have commissioned a piece of work with them review this and make a recommendation to NHS England of what measures could be adopted

Item: 5

- NEAS are the highest performer for Category 1 response times
- Interim report completed by AuditOne remains unpublished. The reason for this related to the report containing patient identifiable data
- NEAS involved patients in some aspects of how the service runs through patient groups. The dementia friendly ambulance was designed with patients and then adopted nationally. There are further opportunities for patients to be involved in changes to services.

The Board proposed an update on progress be given in six months' time unless by exception should the Board need to be appraised sooner.

ACTION:

NEAS progress update to be added to Board agenda for January 2024.

RESOLVED:

The Board **RECIEVED** the Independent Investigation Report. The Board **RECEIVED** an update and from NEAS and were **ASSURED** on the progress of recommendations being implemented.

B/2023/51

Governance Handbook (issue 7)

As part of a process of ongoing review of the documents within the Governance Handbook, further amendments had been identified to ensure the documents remain fit for purpose.

The Board was asked to note the proposed changes to the governance documents and approve the updated versions for insertion into the Governance Handbook (issue 7) as follows:

- Scheme of Reservation and Delegation – version 5.0
- Financial Limits – version 3.0
- Remuneration Committee Terms of Reference – version 2.0
- NENC ICB Committee Structure – version 4.0

RESOLVED:

The Board **NOTED** the proposed changes to the governance documents and **APPROVED** the updated versions for insertion into the Governance Handbook (issue 7).

B/2023/52 Highlight Report and Minutes from the Executive Committee held on 9 May and 13 June 2023

An overview of the discussions and approved minutes from the Executive Committee meetings in May and June 2023 were presented.

The Board's attention was drawn to the following key points:

Delivery of prescribing efficiencies 2023/24

The Committee was asked to consider the recommendations outlined in the report on how the ICB should manage the prescribing budget and associated resources to best receive assurance about delivery of prescribing efficiencies, as well as ensuring consistent, high-quality outcomes. The Committee supported the recommendations. A detailed item will be brought to the Board later in the year outlining the cost impact and actions around prescribing.

Covid Medication Delivery Units (CMDU) Update

The Committee approved a short-term solution to service continuity due to concerns raised regarding the proposed changes to the commissioning and delivery of a NENC CMDU, noting that funding has been withdrawn however, the expectation is that the service will continue to be delivered albeit providers wish to cease delivery of the service. Further discussions will take place with NHSE.

RESOLVED:

The Board **RECEIVED** the highlight report and confirmed minutes of the Committee meetings held on 9 May and 11 June 2023 for information and assurance.

B/2023/53 Highlight Report from the Quality and Safety Committee held on 11 May 2023

It was reported that the Quality and Safety Committee schedule has been aligned with Finance, Performance and Investment Committee to allow the synchronisation of data.

Work is ongoing to streamline and standardise information reports received by the Committee to help identify key risks and areas of focus.

Terms of reference for additional sub-committees/groups are being developed. The governance committee structure will be updated to include:

- SEND Assurance Sub-Committee
- Clinical Effectiveness Advisory Group

RESOLVED

The Board **RECEIVED** the update of the Committee meeting held on 11 May 2023 for information and assurance.

B/2023/54 Highlight Report and Minutes from the Finance, Performance and Investment Committee held on 4 May 2023

An overview of the key points and approved minutes of the Finance, Performance and Investment Committee meeting held on 4 May 2023 was presented.

- NHS England Cancer Alliance assurance meeting (11.05.23) outcome – fully assured
- Children & Young People Mental Health waiting times – work continues to bring visibility to system position on long waits
- Positives seen within performance
- Suggested that the Board look at the Integrated Delivery Report in a future development session to align elements of the report to the different Committees of the Board.

RESOLVED

The Board **RECEIVED** the confirmed minutes of the Committee meeting held on 4 May 2023 for information and assurance.

B/2023/55 Questions from the Public on Items on the Agenda

Three questions were received from a member of the public as follows;

1. Does your Joint Forward Plan for Durham set out the steps you propose to take to address the needs of victims and survivors of abuse?
2. You currently don't yet have the evidence-based IRIS/ADVISE programme in your area. How will your proposed steps to address the particular needs of victims of abuse in healthcare settings translate into commissioning services across your ICB footprint?
3. Steve Russell, Chief Delivery Officer at NHSE, recently wrote to you asking you to name an executive and working lead for Domestic Abuse and Sexual Violence. Who are your leads?

The Board acknowledged the questions, but noted as this was not relating to any items on the agenda the question would be responded to separately and made available on the ICBs website.

ACTION

The Executive Chief Nurse to respond to public questions in writing, which will be made available on the ICBs website under the Board meetings section.

Item: 5

B/2023/56 Any other business

There were no other items of business.

The meeting closed at 14:00

DRAFT