

Integrated Care Board Briefing

Staffordshire and Stoke-on-Trent
ICB Meeting

20 February 2025

NHS Staffordshire and Stoke-on-Trent Integrated Care Board

This briefing aims to keep partners informed of the discussions at the NHS Integrated Care Board (ICB) meeting in public. To watch the recording and read the papers [visit the ICB website](#).

ICB Chair and Chief Executive update

- David Pearson, Chair, and Peter Axon, Chief Executive Officer, presented the report.
- The Chair commented on his visit to North Staffordshire Combined Healthcare NHS Trust (NSCHT) invited by Chief Executive Dr Buki Adeyemo and team on 5 February 2025. The Chair noted that it was great to meet those who are working in the all-age crisis walk-in and crisis care access team, commenting that it was a fantastic facility that takes a large number of referrals and enquiries from people in the community.
- The Chair added that he also visited Ward 2 and met the team who are part of 'Project Chrysalis'. The Chair praised Sarah Larvin, Ward 2 Deputy Ward Manager, as great example of a leader in the NHS for providing a positive atmosphere despite the challenging circumstances.
- The Chair thanked Buki Adeyemo and team for the invite, along with the opportunity to participate in the strategy discussion at Port Vale the following week.
- Peter Axon commented on the planning process for the upcoming financial year, highlighting the challenging timelines and focus on cost improvement programmes, efficiency, and productivity within organisations, including the ICB and Continuing Health Care (CHC).
- Peter Axon highlighted the need for tough choices to work within the resources provided, emphasising the importance of working together as a collective.
- Peter Axon noted the importance of the Community Transformation Programme in addressing the challenges, highlighting the need for data-driven approaches and joint agreement on key themes. Peter emphasised the need for time to implement transformational changes.

The Board asked for assurance regarding the Community Transformation Programme in achieving change and shifting to the left as required by the guidance. Peter Axon provided assurance on the governance and pace of the Community Transformation Programme, highlighting the development of eight key themes that will be jointly agreed, and the use of data and evidence from other systems to drive the program. The Board asked about the Quality and Equality Impact Assessment process as part of the Community Transformation Programme. Peter emphasised the importance of regular conversations between various leads to ensure there is no overlap, duplication or gaps between programmes. Peter added the need of assurance processes to be in place, given the fast-moving nature of the work. The Board asked about learning from other systems to increase the pace of the Community Transformation Programme. Elizabeth Disney assured the Board that engagement is taking place with other systems to learn from their experiences and evidence-based approaches.

The Board commented that it was great to hear about the equipment donation from the ICB. The Board also praised the work being undertaken around apprenticeship roles within primary care. The Board commented on the ICB making tough choices regarding key programmes that are critical to the Community Transformation process, advising that the ICB should empower frontline leaders to make changes that will improve performance and outcomes, along with improving the financial outcomes. The Chair thanked the Board for their contributions and discussion.

Planning and Allocations

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- Paul Brown, Chief Finance Officer presented the report.
- Paul Brown noted the condensed timeline and the importance of collaboration among system leaders, which continues to be positive.
- Paul Brown mentioned the regular meetings taking place between system leaders, noting the combined meeting in place with Chief Executives and Chief Finance Officers to ensure quick turnaround and alignment of plans.
- Paul Brown outlined the national priorities which captures what the planning is centred around:
 - Reducing wait times for elective care
 - Improving A&E wait times and ambulance response times
 - Improving access to general practice and urgent dental care
 - Improving mental health and learning disability care
- Paul Brown noted that to achieve these goals, the ICB must:
 - Live within the budget allocated, reducing waste and improving productivity
 - Maintain collective focus on the quality and safety of services
 - Address inequalities and shift towards prevention
 - Make the shift from analogue to digital
- Paul Brown highlighted the focus on cost improvement programmes, efficiency, and productivity within organisations, including the ICB, and the use of benchmarks to maximise workforce productivity without increasing the workforce.
- Paul Brown added that whilst maximising efficiency and productivity, the possibility of reducing services that are currently provided still stands in order to present a balanced financial plan to the Board in March 2025 that meets the targets that have been set.

The Chair thanked Paul Brown for the report, noting the work and meetings taking place ahead of the final submission of assurance statements on 25 March 2025, and the Board-to-Board meeting that will follow with NHS England. The Board commented on the need for capital investment to achieve national priorities, in particular to improve productivity and the shift from analogue to digital. Paul Brown acknowledged the challenge of achieving the priorities within constrained capital investment. Elizabeth Disney added that there is an opportunity to be innovative and explore alternatives such as approaching other digital organisations to develop digital innovation despite the constraint. The Board accepted the acknowledgements and recommendations presented to them.

Quality and Safety Report

- Heather Johnstone, Chief Nursing and Therapies Officer, presented the report.
- Heather Johnstone highlighted the continued pressures around urgent and emergency care, noting the actions that have been undertaken.
- Heather Johnstone stated that these actions particularly involve work with University Hospitals of North Midlands NHS Trust (UHNM) and the harm reviews undertaken at Emergency Departments, along with high impact team visits to improve the impact on the urgent and emergency care pathway.
- Heather Johnstone advised that there is increased oversight for The Darwin Centre following a visit from NHS England. Heather Johnstone noted that a comprehensive improvement plan is in place.
- Buki Adeyemo, Chief Executive at North Staffordshire Combined Healthcare NHS Trust and partner member with the ICB for Mental Health, added that following a further meeting and visit to The Darwin Centre, it remains that there are no concerns regarding the issue that was previously raised.

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- Heather Johnstone referenced the journey of All Age Continuing Health Care, noting that the backlog of reviews has been significantly reduced, with much stronger systems and processes to prevent an accumulation of further backlog.
- Heather Johnstone commented on the development of the Continuous Quality Improvement, led by John Costell, Midlands Partnership University Foundation Trust (MPFT) and Lee George, Staffordshire and Stoke-on-Trent ICB, is in a strong position and continues to improve which in turn, will positively impact the process of community transformation.
- Heather Johnstone highlighted the sustained improvement of the LeDeR (Learning from lives and deaths of people with learning disabilities and autistic people) programme, confirming there is only one overdue review which is not related to delays in the system.
- Heather Johnstone also highlighted the development of the Social Care Academy, which will bring opportunities for the local population and also support in the growth of our workforce from a care home point of view.

The Chair thanked Heather Johnstone for the report. The Chair commented on the overall CQC rating for all services at County Hospital now being moved to 'Good' from 'Requires Improvement', along with Brewood Medical Practice and Millrise Medical Practice also receiving an overall rating of 'Good', following their inspections. The Chair also commented on the update for the LeDeR programme, highlighting this as a great achievement. The Board commented that it's positive to hear significant progress is being made, querying if progress is being made in relation to the outcomes for people with a learning disability and autistic people. Heather Johnstone assured the Board that the learning from the reviews will be translated into practice when developing services and improving them for people with a learning disability and autistic people. Elizabeth Disney added to this, stating that in the plans linked to mental health, learning disability and autism for 2025/2026. There are specific actions that are planned around improving the outcomes around areas that are challenged, for example, appropriate access to services following health checks and comprehensive packages of care for individuals with complex, longstanding needs. The Chair added that there will be a specific session for the Board and the chairs from the system for a deep dive into this area of work.

The Board asked for a further update and assurance around discharge within urgent and emergency care, and how that will be addressed within community transformation. Elizabeth Disney assured the Board that amongst the areas of focus within community transformation are decisions around integrated discharge hub arrangements and the discharge to assess model which has been a discussion point amongst local authority commissioning partners. The Board accepted the acknowledgements and recommendations presented to them.

ICS Finance and Performance Report

- Paul Brown, Chief Finance Officer presented the report.
- Paul Brown confirmed that the forecast outturn position is £39m, which is an improvement from £56.5m at month 8.
- Paul Brown commented on the Investigation and Implementation regime that has been underway since month 4, noting enhanced controls in one part of the regime, with delegated limits in place around spending and workforce.
- Paul Brown added that CHC is another area of focus to ensure patients are returning home more quickly, noting that improvements within this area have been visible over the past few months through collaborating with CHC and with the support of Neill Car and team at MPFT.

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- Paul Brown noted the positive work within theatre productivity around Ophthalmology, with improvements now being delivered.
- Paul Brown stated that working with the independent sector is providing significant opportunity to manage the process.
- Paul Brown noted that the work being done on balance sheets has enabled some improvement into the position.
- Mish Irvine, Chief People Officer, advised plans going forward include refining the most efficient activities for each organisation to ensure the most productive outcome, such as high-cost agency, bank reduction, and use of technology, temporary staffing.
- Mish Irvine noted that job planning and rostering will be the next area of focus, working closely with Chief People Officers and colleagues.

The Chair thanked Paul Brown for the report, and thanked Mish Irvine for the input around the workforce element of the Investigation and Implementation regime.

Finance and Performance Committee AAA Chairs Report

- Hayley Allison, Associate Director of Planned Care, presented the report.
- Hayley Allison discussed the ongoing challenges in urgent and emergency care, including higher attendances, increased emergency admissions, and high bed occupancy.
- Hayley Allison highlighted the impact of infections such as flu, RSV, COVID-19, and norovirus on capacity and flow. Hayley advised it's the worst norovirus situation reported in five years, and 55% of beds have been lost due to norovirus this year, compared to the same period reported last year.
- Hayley Allison noted the unacceptable delays across the urgent and emergency care pathway and ambulance response times. Hayley advised that in January, ambulance response times was reported at just over 32 minutes, which is an improved position against November and December 2024.
- Hayley Allison also reported a number of lost hours due to delays in handover, which impacted all sites but especially Royal Stoke County Hospital.
- Hayley Allison advised that following the winter surge plan, extraordinary actions to address the pressures include additional capacity in primary care, spot purchase community bed capacity, increased staffing in the single point of access, and a focus on care home support.
- Hayley Allison added that the HIT interventions being implemented over the past number of weeks supporting the acute setting with identification of discharge involves working across the system in a multidisciplinary way and embedding learning from the interventions.
- Hayley Allison advised that all the work being undertaken will feed into a full winter learning process in the Spring for future winter periods.
- Simon Constable, Chief Executive Officer, University Hospitals of North Midlands NHS Trust, reiterated the impact of infections, especially norovirus, on bed capacity.
- Simon Constable advised that urgent and emergency care remains the number one collective system priority to mitigate the impact of ambulance response times and waiting times on patients' safety.
- Simon Constable informed the Board that a new urgent and emergency care recovery director has been appointed to provide the expertise and leadership bandwidth to lead a programme of improvement over the next few months in preparation for next year.

The Chair thanked Hayley Allison and Simon Constable for the report. The Board shared their thanks and recognition to the staff across all teams within primary care, social care

and the community for their hard work throughout the winter period. The Chair commented on the learning process mentioned and how this will inform the plan to be in a stronger position for next year. Hayley Allison advised that there is an iterative review process underway, alongside a monthly governance process of attending the finance and performance committee with the findings. Hayley Allison also advised that the Urgent and Emergency Care Board plays a key role in the review process, and there will be a post winter 'wash up' session with partners to outline the learning and changes that need to be made, working closely with all partners, agencies and the voluntary sector. Hayley Allison added that the community transformation work and Better Care fund provides opportunities to do things differently, in terms of service provision and investing the money currently sitting in urgent and emergency care. The Chair shared thanks to everyone involved in the work taking place across the system. The Board accepted the acknowledgements and recommendations presented to them.

AAA Escalation & Assurance Report from Board Assurance Committee

- Megan Nurse, Chair of Finance and Performance Committee, presented the report.
- Megan Nurse highlighted the improving level of unmitigated risk, noting the challenges that still exist to get to a breakeven position.
- Megan Nurse acknowledged the amount of work and effort across the system that has taken place to get to the point of unmitigated risk.
- Megan Nurse advised the tough choices workstream is moving forward at pace, and there will be a formal impact assessment for each scheme before approval.
- Megan Nurse mentioned that the work that has been undertaken around supporting care homes, with clarity now around the immediate and medium-term actions to improve support for care homes.
- Megan Nurse noted the concern around strategic capital plans.
- Megan Nurse advised the committee reviewed the terms of reference and agreed amendments reflecting the provided selection regime requirements and the new street commissioning committee.

The Chair thanked Megan Nurse for the report and commented on the considerable amount of work that is happening across the system during this challenging period. The Board accepted the acknowledgements and recommendations presented to them.

People, Culture and Inclusion Committee Assurance Report and People Culture and Inclusion Committee AAA Report

- Shokat Lal, Non-Executive Chair of People, Culture and Organisational Development Committee, presented the report.
- Shokat Lal highlighted the behavioural, cultural and leadership implications of the transformational work and activity, noting the challenges for the workforce and the need for collective resources across the system.
- Shokat Lal added that there is more work to be done around behaviour, culture and leadership, and learning will be explored through the People, Culture and Inclusion committee to understand how to collaborate more efficiently and do things differently.

The Chair thanked Shokat Lal for the report. The Board accepted the acknowledgements and recommendations presented to them.

Staffordshire and Stoke-on-Trent ICB Audit Committee AAA Chairs Report

- Julie Houlder, Non-Executive Chair of Audit Committee, presented the report.

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- Julie Houlder advised that the report was shared verbally at the previous Board meeting, where persistent issues were raised.

The Chair thanked Julie Houlder for the report. The Board received the recommendations presented to them, including the ratification of the Audit Committee-approved policies, including:

1. Anti-Fraud & Bribery Policy
2. Development & Management of Controlled Documents Policy
3. Conflicts of Interest: COI (incl. Gifts & Hospitality) Policy
4. Standards of Business Conduct Policy
5. Acceptance & Management of Petitions Policy
6. Social Media Policy

Staffordshire and Stoke-on-Trent ICB Strategic Commissioning and Transformation Committee

- David Pearson, Chair, presented the report.
- The Chair welcomed Mike Lawton, Non-Executive Chair of Strategic Commissioning and Transformation Committee to the Board, who will be taking forward the Strategic Commissioning and Transformation Committee on an ongoing basis.
- The Chair advised that he covered the first and second meeting that has taken place.
- The Chair highlighted a number of issues to the Board to be taken into account going forward. These include:
 - Benefit clarity, to explain how we've assessed benefits and robust benefits realisation processes of the papers.
 - The papers should be clear about the patient, family, carer experience and standard.
 - Impact assessments, noting the papers shouldn't be brought forward to the committee without these.
 - The importance of being absolutely clear on partner input into papers, including being clear on who has been consulted, who agreed what and what process has been used.
 - Timeliness of papers is adhered to coming forward to the committee.

The Board thanked the Chair for the report and accepted the acknowledgements and recommendations presented to them.

Date and time of next meeting in public: 20th March 2025 at 12:30pm held in Public, in person at Royal Stoke University Hospital Trust Boardroom, University Hospitals of North Midlands NHS Trust.