



Staffordshire and  
Stoke-on-Trent  
Integrated Care Board

# Integrated Care Board Briefing

Staffordshire and Stoke-on-Trent  
ICB Meeting

18 September 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 Paul Edmondson-Jones, Interim Chief Executive Officer, presented the report.
- The Chair, in line with his letter to the Regional Director in July, advised that he will be stepping down as Chair at the end of October 2025. Acknowledging that this was his final public board meeting, David formally recorded his sincere thanks to all Board members and partners who have provided encouragement and support during his time as Chair. He stated it had been a tremendous privilege serving as Chair and wished the Board and all staff the very best for the future going forward.
- The Chair acknowledged that from 1 November Ian Green OBE, Chair of Shropshire, Wrekin and Telford ICB, would be succeeding him as Chair of Board. Both Staffordshire and Stoke-on-Trent ICB and Shropshire, Wrekin and Telford ICB, will remain separate statutory organisations but will start to work together to progress the strategic commissioning arrangements. David warmly welcomed Ian's appointment to the Cluster Chair role acknowledging Ian's extensive experience of health and third sector he wished him every success in his new role going forward
- The Chair advised that the process to recruit the cluster Chief Executive Officer is underway and a preferred candidate has been identified however, final sign off is still needed from NHS England (NHSE).
- The Chair acknowledged that colleagues at University Hospitals of North Midlands NHS Foundation Trust (UHNM) and University Hospitals of Derby and Burton (UHDB) have been shortlisted in the 2025 Health Service Journal (HSJ) awards.
- The Chair also wanted to congratulate all organisations that were rated in the NHS Oversight Framework. In particular, the Chair wanted to congratulate North Staffordshire Combined NHS Trust (NSCHT) and Midlands Partnership University Foundation Trust (MPFT) who are ranked as 1 and 2 in the national non-acute hospital trust league table.
- Paul Edmondson-Jones, interim CEO, highlighted that 20 local primary care events have taken place across Staffordshire and Stoke-on-Trent to help people get ready for Winter. At one event over 400 free winter health bags were handed out.
- Paul Edmondson-Jones advised that the weight management hubs are going live throughout September - 6 of these are in Stoke-on-Trent and 11 are in Staffordshire. The hubs will work to the NICE guidance and will work on a call forward basis.
- Paul Edmondson-Jones highlighted that when the finance plan was originally submitted, there was an unmitigated risk of just under £100m but over the last few months this has significantly reduced and now stands at £25m in month 5.
- Paul Edmondson-Jones advised that NHSE undertook a quality assurance review of the ICBs Quality Impact Assessment (QIA) process and the ICB has significant assurance that the QIA process is robust and sustainable.
- Paul Edmondson-Jones advised that the winter flu vaccinations have now started for children and pregnant women in September. Everyone else will be able to get their vaccinations from October.

The Board thanked the Chair and Paul Edmondson-Jones for the report. The Board asked if there was an opportunity to locate the primary care events so they could address health inequalities and if there was opportunity for patients to receive any wellness checks at the events. Rachel Gallyot, Interim Chief Medical Officer, confirmed that the events were located across Staffordshire and Stoke-on-Trent and therefore they were able to target different groups. Rachel also advised that at the events there was information about preparing for winter, keeping

a warm home and what vaccinations were available. The Board also asked if data is available from 111 calls and if there is an impact on reducing attendance to A&E. Phil Smith, Chief Delivery Officer, advised that data is available on 111 calls and it highlights what the calls are about and where patients are directed to get the help they need. Phil advised there has been an increase in the number of 111 calls where the outcome is being directed to the ambulance service, but it is difficult to identify as to why these calls are being directed to the ambulance service. The Board also asked how price increases have impacted the weight loss hubs. Claire Finn, Interim Chief Finance Officer, advised that the ICB has received an allocation for 2025/26 and the national team are working closely with the supplier to mitigate any implications of the price increase.

### System Winter / Surge Plan

- Phil Smith, Chief Delivery Officer and Hayley Allison, Portfolio Director for Planned Care, presented the report.
- Phil Smith advised that there has been a great deal of work from colleagues across the system to build the plan. Phil recognised that last Winter was difficult for the whole system and there were a number of critical incidents. Phil acknowledged that the system experienced several excessive ambulance handover times as well as excessive ambulance response times.
- Phil Smith highlighted that the approach this year has been fundamentally different to what has been done before. The plan builds on the learning from previous years and considers the 10 Year Plan ambitions. There have also been local, regional and national Emergency Preparedness, Resilience, and Response style exercises which have provided good learning opportunities.
- Phil Smith highlighted that there is some innovation on last years plans including the Integrated Care Coordination Centre that was led by MPFT, which has been successful in supporting alternative pathways. Furthermore, the ICB is taking on learning from other areas and are looking to roll out an X-ray car this Winter.
- Hayley Allison advised that an oversight infrastructure has been developed that includes all system partners. The structure is made up of pillars that are led by an Executive and supported by a managerial lead.
- Hayley Allison noted that an additional weekly meeting that has been introduced into the UEC Governance structure. The focus of this meeting is on understanding capacity.
- Hayley Allison advised that within the pillar framework, quality is a key theme that runs throughout including how the workforce is looked after.
- Hayley Allison advised that operationally there is an effective System Co-ordination Centre (SCC) that works across the whole system.
- Phil Smith advised that the full Winter plan will be brought back to Board in November for full ratification.

The Chair thanked Phil and Hayley for the report. The Board asked how the regional oversight arrangements have directed the form of the plan and if there are any financial implications associated. Phil Smith advised that the message from the regional team is clear; we need to balance our books, deliver the financial plan and deliver a safe Winter, with adequate capacity and provide the best possible outcomes. The Board also asked if there were any plans to improve discharge. Phil Smith advised that the plan must be a mix of physical capacity, transformation, efficiency, productivity and ensuring that clinicians are supported to make the right decisions. Hayley Allison advised that the improvement plan does include assessing the efficiency and productivity of the discharge process. The Board asked with such a complex plan, how will all the elements support each other and how will communication across the plan work. Simon Constable, Chief Executive Officer at UHNM, advised that the process for the plan has

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started a lot earlier this year and lessons have been learnt from previous Winters. Simon advised that the plan is more joined up this year but if the plan isn't delivering the way that it needs to, there are escalation processes in place. Tracey Shewan, Director of Corporate Governance, advised that as part of the communications plan there are messages to the public about what they can do to help themselves such as using Pharmacy First or 111. Tracey advised these messages will continue over Winter to ensure that people can start accessing care in a way that is helpful for them and that doesn't put pressure on parts of the service. The Board also asked if the messages the public receive, specifically around asthma services, will be clear. Phil Smith advised that after the winter readiness events, the system is making sure that they are targeting the most vulnerable population groups and there is a system wide focus on care home and frail patients. The Chair commented that the Plan is accurate at this point in time but will need to consider the recommendations from NHS England. The Board endorsed and noted the recommendations presented to them.

### SBAF Quarter 2 2025/2026 Report

- Tracey Shewan, Director of Corporate Governance, presented the report.
- Tracey Shewan advised that the strategic risk for assessment is still high but that does reflect our continued complexity as a system.
- Tracey Shewan advised that each committee is asked to revise the rationale for each risk level and assess the progress made against the impact, mitigations and control.
- Tracey Shewan noted that each SBAF has a future actions section and Q1 progress and impact against the plans is detailed in there. It also contains what the Q2 processes should be. Tracey Shewan advised that these are important for each committee to look at to ensure that what has been agreed will be done and if not then what actions will be taken.

The Chair thanked Tracey for the report. The Board commented that the document is useful as it ensures that they can stay on track and that they are doing what they are supposed to be doing. The Board endorsed and noted the recommendations presented to them.

### Quality and Safety Report

- Heather Johnstone, Chief Nursing and Therapies Officer, presented the report.
- Heather Johnstone advised that the Quality Impact Assessment (QIA) process is being updated following NHS England and the National Quality Board guidance.
- Heather Johnstone commented that the team are working at significant pace to continue the work that they are doing as the system goes through a period of organisational change.
- Heather Johnstone highlighted that the Maternity & Neonatal Independent Senior Advocate (MNISA) role will not be funded from the end of March 2026. The MNISA are an advocate for families to ensure their voices are listened to, heard and acted upon. There are conversations taking place at a regional level to decide how the system will fulfil the responsibility going forward.
- Heather Johnstone noted that none of the immediate providers in the system are named in the plans for the Amos review, however, this doesn't mean that the system will become complacent. Work will continue to ensure that there are high standards of safety and maternity care.
- Heather Johnstone highlighted that Patient Safety Day took place on 17 September which focused on the care of every newborn and child. Heather Johnstone advised that on the day she opened the first GP Nursing Conference and presented as part of Patient Safety Day.

The Chair thanked Heather Johnstone for the report. The Board noted and received the report.

### Quality and Safety AAA Chairs Report

- Siobhan Heafield, Chair of the Quality and Safety Committee, presented the report.
- Siobhan Heafield advised that the system Quality group continues to work across all partners. They have recently been looked for out of area placements for mental health patients, reviewed staff sickness and received the diversity and inclusion report.
- Siobhan Heafield advised that the Right Care, Right Person report was also shared. It was noted that the health elements of the review will undergo a further independent review to share learning.
- Siobhan Heafield noted that the committee discussed the independent inquiry into the David Forward case relating to mortuary care. Members were asked to follow up within their own organisations on the recommended actions, with monitoring through the existing policy group. A report will be brought back later in the year once this work is completed.
- Siobhan Heafield noted that progress is continuing to be made within All Age Continuing Healthcare and at the end of June, the caseload was the lowest it's been for eight years.

The Chair thanked Siobhan Heafield for the report. The Board asked if any undertakers were contracted for removal of the deceased. Liz Lockett, Chief Nurse and Director of Quality and Professional Leadership at MPFT, advised that a contract is in place with undertakers and that this will be fed into a review that will be presented at a future quality group. The Board noted, received and acknowledged the approvals presented to them.

### Staffordshire and Stoke-on-Trent Health and Care Senate Report

- Rachel Gallyot, Interim Chief Medical Officer, presented the report.
- Rachel Gallyot advised that regionals discussions have taken place around Medicines Optimisation group for drug targets and that there is a regional target of 90% of switches to take place in a year.
- Rachel Gallyot highlighted that amendments have been made under the excluded and restricted policy that is in place. These amendments are reviewed by the Clinical Advisory Group and is supported by evidence-based interventions. The amendments were around simple ear wax removal and aquatic and animal therapy and orthotics.
- Rachel Gallyot advised that within the Senate there are ongoing discussions around value-based healthcare and work is being undertaken by all partners to roll out programmes of work.
- Rachel Gallyot noted plans for a neighbourhood workshop to ensure Senate members, and the wider community, are linked with the programme and provider.

The Chair thanked Rachel Gallyot the report. The Board noted, received and acknowledged the approvals presented to them.

### ICS Finance and Performance Report

- Phil Smith, Chief Delivery Officer, and Claire Finn, Interim Chief Finance Officer, presented the report.
- Phil Smith advised that the system is ahead of plan for attendance and total waiting times. Overall completion of pathways above 18 weeks is also 4.7% above plan.

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- Phil Smith noted that there are still challenges around long wait cohorts with 65 week waits and these are forecasted to continue towards the end of the calendar year. There has been improvements in orthopaedics but still challenges in ENT, gynaecology and ophthalmology.
- Phil Smith advised that diagnostics is a challenging area, but this is linked to non-obstetric ultrasounds. However, this is improving in terms of both volume of the waiting list and time waiting, due to additional capacity at UHNM and the use of Community Diagnostic Centres.
- Phil Smith noted that cancer performance is strong and that this is being closely monitored.
- Phil Smith highlighted that there is improvement with average handover times.
- Phil Smith advised that there are challenges with virtual wards but there is a utilisation plan in place, and a new pathway is in place around respiratory.
- Claire Finn advised that there is a planned deficit of £21m and this has been met despite an increase in Cost-Improvement Programs (CIP) requirements in July and August.
- Claire Finn noted that there has been a significant amount of work over the last few weeks to collectively bring down the risk. This was originally £60m but has been reduced to £25m.
- Claire Finn advised she had previously briefed Board about the importance of the month 5 position as there is a link to the receipt of the deficit support funding. The national team will be using the month 5 performance to assess whether or not they have the confidence in the delivery of the plan. Claire Finn noted that the plan is currently on track.
- Claire Finn advised that the system should be notified at the end of September if they are eligible for the deficit support funding.
- Claire Finn noted that although we are behind plan on capital, this is typical for this time of year, however, all organisations are forecasting that they spend in line with their allocation. The national team have asked for a detailed and robust forecast to be carried out by the end of this month.
- Claire Finn advised that there is a lot of work going into the planning process ready for 2026/27. The first phase is broken down into three elements including what the system will get in terms of block values, a pilot scheme to understand trends and to influence future payment policy, and work on understanding and forecasting which will feed into next year's planning process.
- Claire Finn advised that allocations should be issued within October which will enable the planning solutions to be addressed in November and final submission in December.
- Claire Finn noted that a new ledger will be implemented on 1 October. There is a lot of work that has been ongoing within the finance team to ensure that the transition is as smooth as possible.

The Chair thanked Phil Smith and Claire Finn for the report. The Board asked what strategic commissioning intent will be carried out within the planning process. Claire Finn advised that previously the planning process involved ICBs to issue their commissioning intentions and how they would like to set contracts and commissioning specifications. The national team have requested that that this information should be shared by the end of September. The Board asked if this is complicated by transition or transfer or functions. Elizabeth Disney, Chief Transformation Officer, advised that although it is slightly more complicated, the task in September is to produce the strategic commissioning intentions that are based on the insight we already have. Elizabeth Disney advised that conversations will take place with executives in Staffordshire and Stoke-on-Trent and Shropshire, Telford and Wrekin about having a process that is similar. Elizabeth

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Disney advised that as the system moves into phase two, there will need to be a more detailed financial allocation and to understand what both systems priorities are.

### **Finance and Performance Committee AAA Chairs Report – August and September**

- Claire Finn, Interim Chief Finance Officer, presented the report.
- Claire Finn advised that there are two alerts in the report including the risk of the financial position.

The Chair thanked Claire Finn for the report. The Board noted, received and acknowledged the report presented to them.

### **ICS People and Culture and Inclusion Committee Assurance and Performance Report and ICS People and Culture and Inclusion Committee AAA Chairs Report - Part B June and September**

- Mish Irvine, Chief People Officer, presented the report.
- Mish Irvine advised that the month four figure exceeded the expected operational plan figures. Mish Irvine advised this was due to the Industrial Action as there was an increase in temporary staffing usage.
- Mish Irvine advised that the agency position was low and continues to be low at 1.4%. It is primarily bank usage where the system is over. Colleagues are working directly with organisations to understand their workforce controls, utilisation and supporting them to develop tools like dashboards.
- Mish Irvine noted that the overall metrics are very positive however, sickness rates are high. At a recent committee meeting, the committee looked at what they were doing within their organisations to improve sickness absence rates. It was noted that sickness absence for stress and anxiety is particularly high, and this will be the main focus at the committee meetings going forward.

The Chair thanked Mish Irvine for the report. The Board noted, received and acknowledged the report presented to them.

### **Staffordshire and Stoke-on-Trent ICB Strategic Commissioning and Transformation Committee Chairs Report**

- Mike Lawton, Chair of Strategic Commissioning and Transformation Committee, presented the report.
- Mike Lawton advised that the new cluster organisation was discussed and how the clustered ICBs will operate going forwards. Mike Lawton noted that it is positive that Shropshire, Telford and Wrekin ICB colleagues are liaising with Staffordshire and Stoke-on-Trent ICB colleagues to determine next steps.
- Mike Lawton highlighted that the tongue tie service has been provided by the maxillofacial team at UHNM, but it is not a formal contract. The paediatric directorate have agreed to take on the service.
- Mike Lawton advised that following the recent maternity consultation there was some coverage in the local press and the committee are monitoring this.
- Mike Lawton noted that the finances for the primary care forum are on track.

The Chair thanked Mike Lawton for the report. The Board noted, received and acknowledged the report presented to them.

## Staffordshire and Stoke-on-Trent ICB Remuneration Committee Chairs Report

- Mike Lawton, Chair of Strategic Commissioning and Transformation Committee, presented the report.
- Mike Lawton advised that the committee received a report around the performance and appraisal of executive Board members. The appraisal process has been carried out appropriately in line with NHSE guidance and outcomes have been noted.

The Chair thanked Mike Lawton for the report. The Board noted, received and acknowledged the report presented to them.

**Date and time of next meeting in public:** 20 November 2025 at 1pm held in public, in person at the Staffordshire County Council Chamber, County Buildings, Stafford, ST16 2DH