

Newham ICB Sub Committee meeting

Friday 1 September 2023, 14.15 – 15.00pm
Via MS Teams

Chair: Colin Ansell

AGENDA

	Item	Time	Lead	Attached / verbal	Action required
1.0	Welcome, introductions and apologies	14.15 (5 mins)	Chair	Verbal	Note
1.1	<ul style="list-style-type: none"> Declaration of conflicts of interest 			Attached	Note
1.2	<ul style="list-style-type: none"> Minutes from the 7 July 2023 meeting 			Attached	Approve
1.3	<ul style="list-style-type: none"> Action log 			Attached <i>Pages 1 - 8</i>	Note
2.0	Questions from the public	14.20 (15 mins)	Chair	Verbal	Discuss/ Approve
3.0	Finance update	14.35 (15 mins)	Sunil Thakker	Attached <i>Pages 9 - 15</i>	Note
4.0	Any Other Business	14.50 (5 mins)	Chair	Verbal	Discuss
Date of next meeting ICB sub-committee: 3 November 2023					

- Declared Interests as at 23/08/2023

Name	Position/Relationship with ICB	Committees	Declared Interest	Name of the organisation/business	Nature of interest	Valid From	Valid To	Action taken to mitigate risk
Chetan Vyas	Director of Quality	Barking & Dagenham ICB Sub-committee Barking & Dagenham Partnership Board City & Hackney ICB Sub-committee City & Hackney Partnership Board Havering ICB Sub-committee Havering Partnership Board ICB Quality, Safety & Improvement Committee Newham Health and Care Partnership Newham ICB Sub-committee Redbridge ICB Sub-committee Redbridge Partnership Board Tower Hamlets ICB Sub-committee Tower Hamlets Together Board Waltham Forest Health and Care Partnership Board Waltham Forest ICB Sub-committee	Indirect Interest	North East London CCG	Spouse is an employee of the CCG	2014-04-01		Declarations to be made at the beginning of meetings
			Indirect Interest	Some GP practices across NEL	Family members are registered patients - all practices not known nor are their registration dates	2014-04-01		Declarations to be made at the beginning of meetings
			Indirect Interest	Redbridge Gujarati Welfare Association - registered charity in London Borough of Redbridge	Family member is a Committee member.	2014-04-01		Declarations to be made at the beginning of meetings
Karen Livingstone	Chief Executive of Newham Health Collaborative,	Newham Health and Care Partnership Newham ICB Sub-committee	Financial Interest	Newham Health Collaborative	Chief Executive of Newham Health Collaborative. We are a Primary Care provider - providing services to the residents of Newham for vaccination, General Practice appts in the evenings and weekends, some home visiting services, health	2020-10-05		Declarations to be made at the beginning of meetings

					checks and a range of primary care support services.			
Muhammad Naqvi	Newham Primary Care Development Lead	Newham Health and Care Partnership Newham ICB Sub-committee Primary Care Collaborative sub-committee	Financial Interest	Woodgrange Medical practice	GP partner	2015-01-01		Declarations to be made at the beginning of meetings
			Financial Interest	NHC - Newham GP Federation, Woodrange practice is a shareholder	GP partner	2015-01-01		Declarations to be made at the beginning of meetings
			Non-Financial Personal Interest	Frenford clubs for young people (registered charity/ voluntary organisation)	Trustee	2012-01-01		Declarations to be made at the beginning of meetings
			Non-Financial Professional Interest	Newham Health and Wellbeing Board	Co-Chair	2018-01-01		Declarations to be made at the beginning of meetings
			Non-Financial Professional Interest	Al-Sabr Foundation (registered charity/ voluntary organisation)	Trustee	2021-01-01		Declarations to be made at the beginning of meetings
Nadeem Faruq	Primary care lead Newham	Newham Health and Care Partnership Newham ICB Sub-committee	Indirect Interest	Market Street Health Group	Chair of Newham Health Colaboraitve and GP partner Market Street Health Group	2020-08-01	2021-12-24	Declarations to be made at the beginning of meetings
Tim Aldridge	A member of the ICS Executive Committee	ICS Executive Committee Newham Health and Care Partnership Newham ICB Sub-committee	Non-Financial Professional Interest	North East London Commissioning Partnership	I chair the North East London (Children's Commissioning Partnership) on behalf of the six Local Authorities that are members.	2018-01-01		
			Non-Financial Professional Interest	North East London Social Work Teaching Partnership	I chair the North East London Social Work Teaching Partnership on behalf of the Local Authorities that are members.	2019-01-01		

- Nil Interests Declared as of 23/08/2023

Name	Position/Relationship with ICB	Committees	Declared Interest
William Cunningham-Davis	Director of Primary Care Transformation, TNW ICP	Newham Health and Care Partnership Newham ICB Sub-committee Primary care contracts sub-committee Tower Hamlets ICB Sub-committee Waltham Forest Health and Care Partnership	Indicated No Conflicts To Declare.

		Board Waltham Forest ICB Sub-committee	
Marie Trueman-Abel	Head of Commissioning and Transformation / Interim Director of Delivery	Newham Health and Care Partnership Newham ICB Sub-committee	Indicated No Conflicts To Declare.
Rima Vaid	Clinical Director, Newham Health and Care Partnership	Newham Health and Care Partnership Newham ICB Sub-committee	Indicated No Conflicts To Declare.
Sam Walker	Engagement and Community Communications Manager	Newham Health and Care Partnership Newham ICB Sub-committee	Indicated No Conflicts To Declare.
Charlotte Pomery	Chief Participation and Place Officer	Barking & Dagenham ICB Sub-committee Barking & Dagenham Partnership Board City & Hackney ICB Sub-committee City & Hackney Partnership Board Community Health Collaborative sub-committee Havering ICB Sub-committee Havering Partnership Board ICB Board ICB Population, Health & Integration Committee ICB Quality, Safety & Improvement Committee ICP Committee ICS Executive Committee Newham Health and Care Partnership Newham ICB Sub-committee Redbridge ICB Sub-committee Redbridge Partnership Board Tower Hamlets ICB Sub-committee Tower Hamlets Together Board Waltham Forest Health and Care Partnership Board Waltham Forest ICB Sub-committee	Indicated No Conflicts To Declare.
Veronica Awuzudike	Healthwatch Newham Manager	ICP Committee Newham Health and Care Partnership Newham ICB Sub-committee	Indicated No Conflicts To Declare.
Simon Reid	Director of Commissioning	Newham Health and Care Partnership Newham ICB Sub-committee	Indicated No Conflicts To Declare.
Simon Ashton	Chief Executive Newham University Hospital	Newham Health and Care Partnership Newham ICB Sub-committee	Indicated No Conflicts To Declare.
Colin Ansell	Chief Executive	ICB Population, Health & Integration Committee ICB Workforce & Remuneration Committee NEM Remuneration Committee Newham Health and Care Partnership Newham ICB Sub-committee	Indicated No Conflicts To Declare.
Jason Strelitz	Member of Newham Health and Care Partnership Board	Clinical Advisory Group Newham Health and Care Partnership Newham ICB Sub-committee	Indicated No Conflicts To Declare.

Minutes of the Newham ICB Sub-Committee

7 July 2023

Members:	
Dr Rima Vaid (RV), Chair	Clinical/Care Director, NHS North East London
Jo Frazer-Wise (JFW)	Newham Director of Delivery (Interim/job share),
Marie Trueman- Abel (MTA)	Newham Director of Delivery (Interim/job share),
Karen Livingstone (KL)	Chief Executive Officer, Newham Health Collaborative
Jason Strelitz (JS)	Director of Adult Social Care and Public Health, LBN
Julie Pal (JP)	Chief Executive, Healthwatch Newham
Richard Fradgley (RF)	Director of Integrated Car & Deputy Chief Executive Officer, East London Foundation Trust
Nadeem Faruq (NF)	Chair, Newham Health Collaborative
Tom Ellis (TE)	Director of Strategy, LBN (rep for Simon Ashton)
Sarah Wilson (SW)	Director of Specialist Services (Children's), East London NHS Foundation Trust
Simon Reid (SR)	Director of Commissioning, LBN
In Attendance:	
Kelvin Hankins (KH)	Associate Director, Unplanned Care, NHS North East London
Charlotte Pomery (CP)	Chief Participation and place Officer, NHS North East London
Keeley Chaplin (KC)	
Debbie Harris (DH)	Governance officer, NHS North East London
Adeola Agbebiyi (AA)	Deputy Director of Public Health (interim), LBN
Vincent Heneghan (VH)	Head of Finance, NHS North East London
Apologies:	
Sunil Thakker (SA)	Executive Director of Finance, NHS North East London
Chetan Vyas (CV)	Director of Quality, NHS North East London
Tim Aldridge (TA)	Director of Children's Services
Colin Ansell (CA) (Chair)	Chief Executive/Place Partnership Lead, London Borough of Newham (LBN)
Simon Ashton (SA)	Chief Executive Officer, Newham University Hospital

Item No.	Item title	Action
1.0	Welcome, introductions and apologies	
	Dr Rima Vaid welcomed members to the meeting. All members joined the meeting in person except for Jason Strelitz and Keeley Chaplin who joined virtually. Apologies were noted as above.	
1.1	Declaration of conflicts of interest	
	The Chair asked members to ensure they had all completed their Declarations of Interest form. Karen Livingstone (KL) referenced the role of NHC as the delivery vehicle for the Roving team work and that therefore her comments about the proposed funding being scheduled to decline each year going forward would	

	<p>have an impact on her organisation. The Chair agreed that there was no need for KL to leave the meeting. No other declarations were declared.</p>	
2.0	Questions from the Public	
	No questions from the Public were received.	
3.0	Finance update	
	<p>Vincent Heneghan presented the Finance paper that outlines the year-to-date and forecast position of the ICS, ICB as at May 23.</p> <p><i>Comments from the Board:</i></p> <ul style="list-style-type: none"> • Is was noted how difficult the finance position is and what will the implications for us at 'Place' be? • It's difficult to plan for future years delivery at Place and the mitigation against it. • Henry Black (HB) is setting up a Recovery Group that will look at tackling system wide issues. • Is there a headline position from the Local Authority on were their budgets will land? Papers are being finalised and will go to Cabinet. The Local Authority will then share more widely. • In the Finance Group there was talk of some ICB areas of savings one being prescriptions and the other being CHC, it was hoped that we can work together on the challenges. • There is a need to think about how we present the Newham Place development as there are some pots of money that we need to think about how we spend. • Sharing mitigations and efficiencies is as important as sharing our invest growths and finances. • If we deliver a £13m savings programme, Newham hospital will still be in £11m deficit at the end of the year. The risk to the Hospital and Place will be making properties that pre-exist the establishment of Place. • With one of the ICBs priorities being providing care closer to home it was felt it will be difficult to archive this with the amount of deficit and stall transformation. <p>The Board noted the update.</p>	
4.0	Proposed allocation and utilisation of the NEL Health Inequalities Funding	
	<p>Adeola Agbebiyi (AA) presented the proposed allocation and utilisation of the NEL Health Inequalities Funding – £908k per year for 3 years has been allocated to the Newham Place-Based Partnership from the ICB, commencing in 2023/24.</p> <p><i>Comments from the Board:</i></p> <ul style="list-style-type: none"> • The Board wanted to formally thank Ryan Suyat for all his significant work in producing this paper. • It was suggested that we include our Strategic Boards in inequality conversations going forward. • KL declared an interest as her comment relates to a project that her organisation (Newham Health Collaborative) is responsible for. (The Chair agreed that there was no need for KL to leave the meeting) KL is very appreciative for the funding from the Borough Partnership for last year's funding and funding going forward which enables the Roving Team to provide outreach support to vulnerable communities 	

	<p>in health care initiatives. It was noted though that, in the budget profile, this is the only budget strand that is reducing year on year. This needs to be embedded into everyday commissioned activity though there are no intentions from commissioners that this is being done.</p> <ul style="list-style-type: none"> • The Primary Care funding under contract does not enable Roving Team work meaning the model doesn't allow for the standard call and recall. So, if not done by the Roving Team were will it fall going forward? • Looking at some of the other funding areas is there a case for them to also be part of Business as Usual (BAU)? • It is important for the Equity programme to work on pathways to ensure positive equity outcomes. The more pathways that are doing their own work as BAU will be less reliant on small pots of money. • Do we need to think about how we engage with our financial challenges in a way that supports our ambition to shift activity upstream to prevent? <p>Action: There is a need to review the Falls project as this is not seen as having equity issues.</p> <p>The Newham ICB sub-committee Board reviewed and approved the approach set out for the allocation and utilisation of the NEL Health Inequalities Funding in Newham over the next 3 years.</p>	
5.0	AOB	
	None noted	
<p>Date of next meeting: 1 September 2023 - ICB sub-committee</p>		

Newham ICB sub-committee – action log

Action ref:	Date of meeting	Action required	Lead	When	Status	Status notes
ACT001	07.07.23	Proposed allocation and utilisation of the NEL Health Inequalities Funding There is a need to review the Falls project as this is not seen as having equity issues.	JFW/SR	July	Closed	Discussions have taken place and project is continuing

Rag rating

Open	Further action/update required
Closed	Complete to be moved onto the closed log following this meeting

Newham ICB sub-committee

4th September 2023

Title of report	M03 2023-24 Financial Reporting
Author	Vincent Heneghan, Head of Finance
Presented by	Sunil Thakker Dir of Finance
Contact for further information	Vincent.Heneghan@nhs.net
Executive summary	<p>Key issues</p> <ul style="list-style-type: none"> The attached presentation outlines the year-to-date and forecast position of the ICS, ICB as at June 23. The ICS have reported an unfavourable system variance to plan at month 03 of £41.8m, primarily due to inflationary pressures and under delivery of savings target, staffing (including agency usage) industrial action and other run rate pressures. However, the forecast position remains plan. The ICB have reported an unfavourable variance to plan at month 03 of £8.3m, primarily due to prescribing, Mental Health and under delivery of efficiencies. However, the forecast position remains plan. <p>Recommendations</p> <ul style="list-style-type: none"> Note the contents of the report
Action required	Note
Previous reporting	N/A
Next steps/ onward reporting	Regular updates to Newham Healthcare Partnership Board
Conflicts of interest	No conflicts of interest
Strategic fit	Which of the ICS aims does this report align with? <ul style="list-style-type: none"> To enhance productivity and value for money
Impact on local people, health inequalities and sustainability	Update on financial sustainability of the system
Impact on finance, performance and quality	Financial plans are set of the resources available. The report provides an update on financial performance.
Risks	Risks are flagged on slide System Risk and Efficiencies tab.

1.0 Introduction

- 1.1 The month 03 finance report provides the partnership board with an update of the ICB and wider NEL system financial position.
- 1.2 The Partnership Board is asked to note the information in the presentation attached to this report. The attachment will be available to the committee electronically and a hard copy can be provided on request.
- 1.3 The report provides a summary of the month 3 financial position and describes the drivers of spend and risks to the reported position.
- 1.4 This paper links to the requirement to deliver a break even position.

2.0 Key messages

- 2.1 The NEL health system is operating in an economic climate facing significant pressures and uncertainty. As a result of the current pressures the year to date position for health partners is a deficit of £41.8m against plan. At month 03 the health system is forecasting plan at year end.

3.0 Month 03 Reporting

- 3.1 The attached presentation details the financial position of the ICB and NEL health partners. It flags pressures in the system in relation to inflation, under delivery of efficiencies and run rate pressures in continuing healthcare & prescribing.

4.0 Risks and mitigations

- 4.1 Total risks across the NEL health system is £252.9m. Of this £190.9m relates to provider organisations and £62m relates to the ICB.
- 4.2 The net risk across the system is £150m, this assumes £102.9m of potential risk will be mitigated.
- 4.3 Mitigations are being driven through the financial recovery group and throughout each of the organisations

5.0 Conclusion / Recommendations

- 5.1 The partnership board is asked to note the information in the attached document.

6.0 Attachments

- 6.1 Month 03 2023-24 Financial Reporting

7.0 End

- 7.1 Vincent Heneghan, Head of Finance NEL ICB.

Month 3 2023-24 Financial Reporting

Meeting name: Vincent Heneghan

Presenter: Sunil Thakker

Date: 1 September 2023

Executive Summary - Finance

Month 3 ICS Position - YTD £41.8m variance against plan.

The ICS has reported a year to date deficit at month 3 of £45.3m. This gives an adverse variance to plan of £41.8m.

The main drivers are inflation, under delivery of the efficiency target, staffing (including agency usage), industrial action and other run rate pressures.

Month 3 I&E - YTD - ICS

		YTD	Forecast
Target	£m	(3.6)	0.0
Actual	£m	(45.3)	0.0
Variance			
Surplus / (Deficit)	£m	(41.8)	0.0

Financial Risks to the ICS Forecast outturn.

Gross risks across the system of £252.9m.

Main drivers – inflation, efficiency risk, run rate risks and income risks.

The net risk is £150m. This assumes £102.9m of potential risk will be mitigated.

ICS Risk

		Gross Risk	Post Mitigations
Provider risk	£m	(190.9)	(110.5)
System Mitigation	£m	0.0	22.5
ICB Risk	£m	(62.0)	(62.0)
Total	£m	(252.9)	(150.0)

NEL ICB – YTD deficit of £8.3m against plan.

The ICB planned year-to-date surplus of £3.8m. The year-to-date reported position is a deficit of £4.5m which gives an adverse variance to plan of £8.3m.

The ICB run rate pressures, largely relating to prescribing and mental health and under delivery of efficiencies.

Month 3 I&E NEL ICB

		YTD	Forecast
Target	£m	3.8	15.4
Actual	£m	(4.5)	15.4
Variance			
Surplus / (Deficit)	£m	(8.3)	0.0

ICS Delivery of Efficiencies

Year-to-date efficiency plan across the system of £51.8m. Actual delivery of £30m, resulting in under delivery of £21.8m.

The ICB reports break-even against the delivery of efficiencies at year-end, providers are reporting under delivery of £17.6m.

ICS Efficiencies

		YTD	Forecast
Target	£m	51.8	277.8
Actual	£m	30.0	260.2
Variance			
£m		(21.8)	(17.6)

NEL Financial Summary Month 3 - Health

Month 3 Summary Position

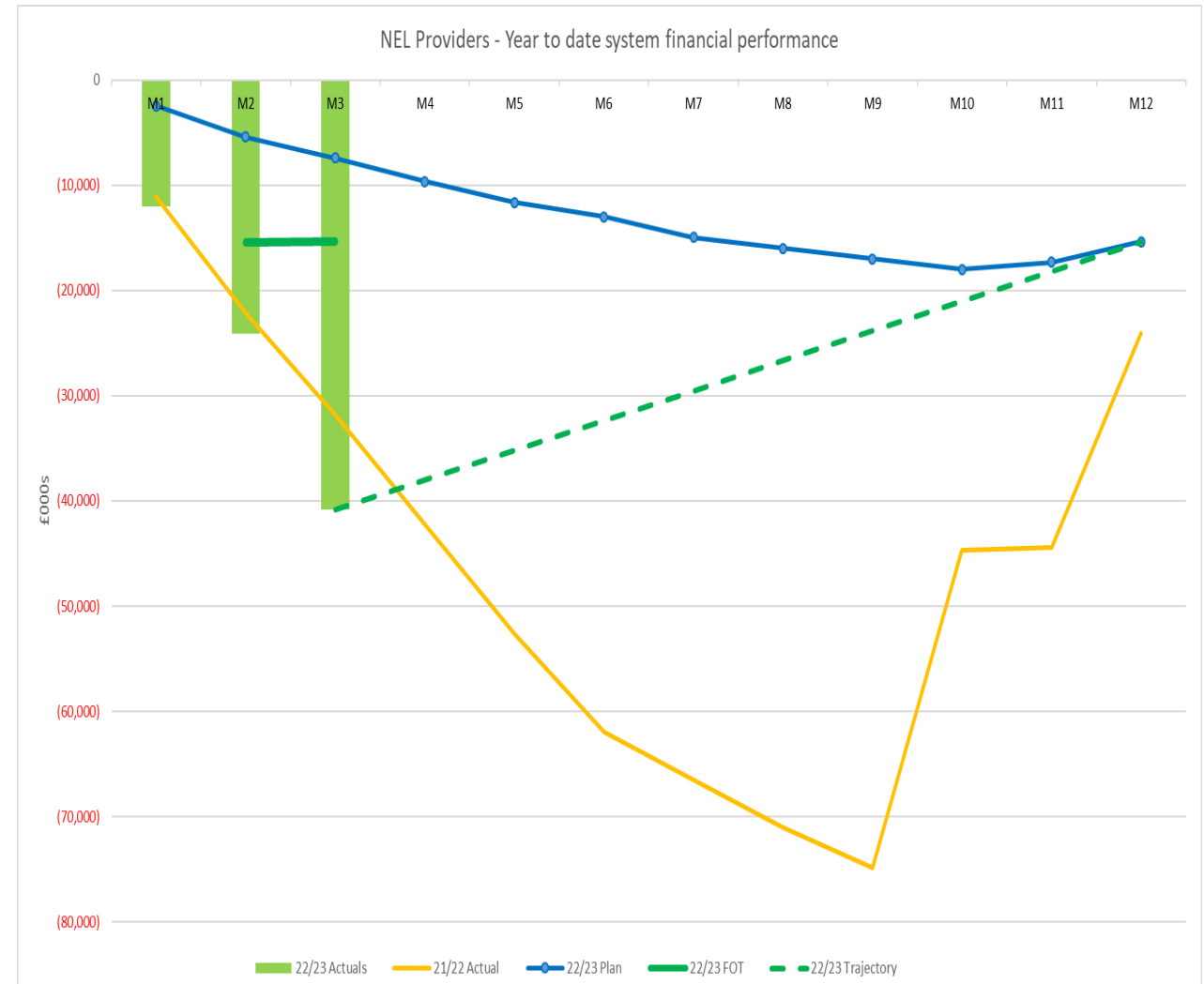
- The year-to-date ICS position against the plan is a **deficit of £41.8m**. This is made up of a provider deficit of £33.5m and ICB deficit of £8.3m.
- At month 3 the forecast position is a **reported breakeven position**. This assumes that providers will deliver a planned deficit of £15.3m and the ICB will deliver an offsetting surplus.
- The ICB has ongoing run rate pressures in relation to prescribing and mental health services.
- Across the system there has been under delivery against the efficiency target.
- System providers are reporting pressures in relation to inflation, industrial action and staffing (including pay awards and agency usage).
- There is a high level of risk in the 23/24 financial position. Delivery of plan is, therefore, inherent upon a number of mitigating actions taking place to reduce the high level risk associated with the plan.
- Further detail on the provider position is given on the next slide.

	YTD Surplus / (Deficit)			Full Year Forecast Surplus / (Deficit)		
	Plan	Actual	Variance	Plan	Forecast	Variance
	£m	£m	£m	£m	£m	£m
North East London ICB	3.8	(4.5)	(8.3)	15.4	15.4	(0.0)
Providers	(7.4)	(40.8)	(33.5)	(15.3)	(15.3)	0.0
ICS Total	(3.6)	(45.3)	(41.8)	0.0	0.0	0.0

Organisations	Year to date			Forecast Outturn		
	Plan £m	Actual £m	Variance £m	Plan £m	Actual £m	Variance £m
BHRUT	(1.8)	(10.9)	(9.2)	(0.2)	(0.2)	0.0
Barts Health	(6.7)	(26.1)	(19.5)	(27.8)	(27.8)	0.0
East London NHSFT	0.1	(1.1)	(1.3)	5.4	5.4	0.0
Homerton	(0.5)	(3.7)	(3.1)	0.2	0.2	0.0
NELFT	1.4	1.0	(0.4)	7.0	7.0	0.0
Total NEL Providers	(7.4)	(40.8)	(33.5)	(15.3)	(15.3)	0.0
NEL ICB	3.8	(4.5)	(8.3)	15.4	15.4	(0.0)
NEL System Total	(3.6)	(45.3)	(41.8)	0.0	0.0	0.0

Provider Year to Date Performance and Forecast position

- This graph compares 23/24 actuals to 22/23 actuals. It also compares it to the planned position and shows the trajectory required to achieve the forecast overspend of £15.4m.
- This data is for Barts, BHRUT, ELFT, Homerton and NELFT.
- The graph shows the month by month deficit position and a trajectory to year end. At month 3 the year-to-date provider deficit is £40.8m. The trajectory to year-end shows a year-end deficit of £15.4m.



System Risks and Efficiencies – Health

Organisation / System wide	Description of risk	Risk		Efficiencies			
		Potential Impact before mitigations £m	Potential Impact after mitigations £m	Year to date Plan £m	Year to date Actual £m	Year to date Variance £m	Forecast Variance £m
NHS Providers	Inflation, excess cost (capacity, winter, pressures), delivery of efficiencies and income risk	(190.9)	(110.5)	44.3	28.5	(15.8)	(17.6)
North East London ICB	Inflation, excess cost (capacity, winter, pressures) and delivery of efficiencies and income risk	(62.0)	(62.0)	7.5	1.6	(5.9)	0.0
System Wide	Further mitigations to be developed	0.0	22.5				
Total Risk - Health		(252.9)	(150.0)	51.8	30.0	(21.8)	(17.6)

Risks and Mitigations

- The total risk across the system is £252.9m. Of this £190.9m relates to provider organisations and £62m relates to the ICB. All organisations are facing risks in terms of increasing prices and activity pressures (including capacity and winter), Additionally, the delivery of the efficiency target remains a risk for both providers and the ICB.
- There is a high level of unmitigated risks which may impact on delivery of the financial position. Providers have identified potential mitigations of £80.5m. It is anticipated that the work of the finance recovery group will develop further plans in order to bring the potential risk after mitigations to £150m.

Efficiencies

- The total year-to-date planned efficiency target for the NEL system is £51.8m and the forecast target is £277.8m.
- The year-to-date efficiencies delivered across the system is £30m, resulting in under delivery against the target of £21.8m. The ICB is forecasting full delivery of efficiencies, with providers reporting under delivery of £17.6m.