

HEALTH AND WELLBEING BOARD



TO:	Health and Wellbeing Board
FROM:	Gareth Jones, NHS Lancashire & South Cumbria Integrated Care Board (ICB)
DATE:	5th September 2023

SUBJECT: ICB Joint Capital Plan 23-24 2023

1. PURPOSE

To update the Health and Wellbeing Board NHS Lancashire & South Cumbria ICB Joint Resource Capital Plan Annual Report 2023/24.

2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD

To note the NHS Lancashire & South Cumbria ICB Joint Resource Capital Plan Annual Report 2023/24.

3. BACKGROUND

The National Health Service Act 2006, as amended by the Health and Care Act 2022 (the amended 2006 Act) sets out that an Integrated Care Board (ICB) and its partner NHS trusts and foundation trusts:

- must before the start of each financial year, prepare a plan setting out their planned capital resource use
- must publish that plan and give a copy to their integrated care partnership, Health & Wellbeing Boards and NHS England
- may revise the published plan - but if they consider the changes significant, they must re-publish the whole plan; if the changes are not significant, they must publish a document setting out the changes.

In line with the amended 2006 Act, ICBs are required to publish these plans before or soon after the start of the financial year and report against them within their annual report.

The template for the 2023/24 plan was provided by NHS England, with a requirement to submit this to NHSE alongside the finance system and provider planning templates by the final plan submission date of 30 March 2023 which was done to the deadline specified.

4. RATIONALE

The Health and Care Act 2022 established ICBs with effect from 1 July 2022. Under sections 14Z56 and 14Z57, systems are required to publish the joint capital resource use plan before the start of the year and publish any significant amendments to that plan. They are also required to share the final plan with the Integrated Care Partnership's Board, each relevant Health and Wellbeing Board and NHS England.

5. KEY ISSUES

In 2022/23 the ICB incurred capital expenditure of £212m; £209m in providers and £3m in primary care. This was funded by £95m of trust internal resources, £23m of approved loans and lease liabilities and £94m of national Public Dividend Capital (PDC) funding. Of the £94m PDC funding £19m was spent on community diagnostic centres and a further £24m went to supporting recovery of elective activity. The key priorities for 2023/24 are the completion of the elective recovery and community diagnostic centre schemes as well as the eradication of Reinforced Autoclaved Aerated Concrete (RAAC) from Trust premises. Further priorities are the implementation of electronic patient record systems where these are not currently present or fit for purpose as well as reducing backlog maintenance in Trust estates. Funding is also anticipated for the development of the business case to develop the Royal Preston and Lancaster Royal Infirmary sites as part of the New Hospital Program.

6. POLICY IMPLICATIONS

Community Diagnostic Centres and Elective Recovery schemes represent a prioritisation process that was operated by the system. EPR funding has been directed towards those organisations with the lowest digital maturity. Capital funding was allocated between providers based on their need to replace existing assets by using depreciation as the basis allocating funding.

7. FINANCIAL IMPLICATIONS

The main risk to capital plans in 2023/24 is the risk of inflation creating an in-year pressure on budgets. The risk will be managed through tight monitoring of spend in-year. Given the ICB and provider track records of spending within capital allocations the risk is considered as low risk.

8. LEGAL IMPLICATIONS

The ICB Joint Capital Plan 2023/24 is provided to the Health and Wellbeing Board as required by s.14Z56(5)(c) Health and Care Act 2022. If the ICB Joint Capital Plan 2023/24 is subsequently revised, a copy will be provided to the Health and Wellbeing Board as required by s.14Z57(3)(ii) Health and Care Act 2022.

9. RESOURCE IMPLICATIONS

The main business case expected to be submitted in 2023/24 is for a new Electronic Patient Records (EPR) system at Blackpool Foundation Trust with £14.8m planned to be spent in 2022/23 (£23.4m in total). Work will also continue on the NHP business case with £1.2m planned to be spent in year.

10. EQUALITY AND HEALTH IMPLICATIONS

Northwest Ambulance Service NHS Trust (NWS) operates across all ICBs in the Northwest region and as such the capital expenditure incurred by them directly impacts these systems. The ICB works closely with Cheshire and Merseyside ICB on capital plans for Southport and Ormskirk Hospitals NHS Trust.

11. CONSULTATIONS

None.

VERSION: 1

CONTACT OFFICER: Gareth Jones - NHS Lancashire & South Cumbria ICB

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**BACKGROUND
PAPER:** None