Agenda item 8

NHS Coventry and Warwickshire ICB
NHS Herefordshire and Worcestershire ICB
Board Meeting in common

Wednesday 18th November 2026 9:30am
held virtually via MS Teams

Chief Executive Officer's Report

Presented by	Simon Trickett, Chief Executive Officer			
Author	Simon Trickett, Chief Executive Officer			
Purpose of paper	☐	Approval	☐	Assurance
	☐	Endorsement	☐	Discussion
	☐	Decision	☒	Information/noting
ICB Applicable:	☒	C&W ICB	☒	H&W ICB
Recommendations	The Boards of NHS Coventry and Warwickshire ICB and NHS Herefordshire and Worcestershire ICB are asked to: • Note the contents of the report			

Future ICB footprint
NHS England has confirmed that decisions on the future footprint of Integrated Care Boards (ICBs) will be considered in summer 2027, reflecting ongoing national work to establish future strategic authority boundaries. Consequently, the existing clustering arrangements between NHS Herefordshire and Worcestershire ICB and NHS Coventry and Warwickshire ICB will continue throughout 2027/28, until at least April 2028.

The decision means the two ICBs will not formally merge in April 2027, which provides greater organisational stability during a period of significant change across the NHS and local government. It also avoids the potential disruption and cost associated with successive organisational restructures.

The ICBs will continue to develop their shared operating model, building on progress already made to align strategic priorities, commissioning approaches, corporate processes and leadership arrangements. Opportunities to reduce duplication, share expertise and make more effective use of collective resources will continue to be pursued, while retaining the separate statutory responsibilities and governance arrangements of each ICB.

Further national consideration of ICB footprints is expected alongside developments in devolution and local government reorganisation during 2027.

ICB Management of Change

The transition to the Cluster's new operating model has now been completed, delivering the planned £22 million reduction in management costs during 2026/27. Appointments to the final approved organisational structure have also concluded.

While the overall size of the workforce has reduced significantly, its composition and capabilities have also changed to reflect the ICBs' developing responsibilities as strategic commissioners. The management of change process has prioritised suitable alternative employment and redeployment wherever possible, significantly reducing the requirement for compulsory redundancies.

Completion of the programme represents an important milestone in the organisational transition, providing a more stable foundation for the continued development of the Cluster's strategic commissioning role.

NHS England Strategic Review Meeting

The ICBs attended a Strategic Review Meeting with NHS England on 16 October 2026, which considered progress against 2026/27 priorities and the development of the Cluster's strategic commissioning role, particularly in relation to population health, neighbourhood health and delivery of the three shifts set out in the Government's 10-Year Health Plan.

NHS England provided positive feedback, recognising the Cluster's established strengths in neighbourhood health development, primary care, population health management and innovative approaches to integration. Particular recognition was given to the progress achieved through collaboration between NHS providers, primary care, local government and wider system partners, including the nationally recognised work on neighbourhood health.

NHS England also acknowledged the progress made in strengthening collaboration across the two ICBs, with greater alignment of strategic priorities, commissioning approaches and system leadership arrangements. The increasing stability of the Cluster and maturity of partnership relationships were recognised as important foundations for future development.

However, the review also reinforced the need to translate these strengths into sustained improvements in operational performance, productivity, outcomes and financial sustainability. Particular areas requiring continued focus include urgent and emergency care, ambulance handovers, elective recovery, referral-to-treatment performance, length of stay and delivery of agreed financial plans.

Local Government Reorganisation

The Government has confirmed that they are now minded to allow local government reorganisation in Warwickshire and Worcestershire to proceed, although implementation has been deferred by 12 months following a national pause in the programme. The new arrangements are now expected to take effect in 2029.

In Worcestershire, the existing county, city, district and borough councils will be replaced by two unitary authorities: North Worcestershire Council and South Worcestershire Council.

Warwickshire will similarly move to two unitary authorities. North Warwickshire Council will cover the areas currently served by North Warwickshire, Nuneaton and Bedworth, and Rugby Councils, while South Warwickshire Council will cover Stratford-on-Avon and Warwick.

These changes will have implications for the future configuration of local partnerships, health and wellbeing arrangements and the development of place-based services. The revised timetable also provides additional time for the ICBs and local authority partners to consider the implications for future commissioning and partnership arrangements.

2027/28 Commissioning Intentions

The Cluster's commissioning intentions for 2027/28 have now been finalised, following a programme of development, executive review, engagement with system partners and sign-off from the Strategic Commissioning Committee.

The intentions have been aligned with the five-year Strategic Commissioning Plan and informed by population health evidence, activity modelling, financial analysis and consideration of contractual implications. Engagement has included senior clinical and commissioning leaders, enabling functions and provider strategy and planning representatives.

The Executive Leadership Team approved the final commissioning intentions on 25 September 2026, confirming a focus on a defined set of strategic priorities and ensuring that the financial, operational and contractual implications had been appropriately considered.

The final intentions were shared with NHS providers across the Cluster in early October to inform ongoing planning and contractual discussions for 2027/28.

Independent Review of Mental Health, ADHD and Autism

The independent national review of mental health conditions, ADHD and autism, led by Professor Peter Fonagy, was published in October 2026. The review identified a genuine increase in mental ill-health, particularly among children and young people, with social, cultural and environmental factors contributing to rising prevalence and demand for services.

The review also highlighted significant pressures on NHS mental health and neurodevelopmental services, including a 252% increase in independent sector expenditure on ADHD assessments between 2023 and 2026. Its recommendations include strengthening the commissioning, funding, regulation and oversight of services, with greater emphasis on quality assurance, transparency and consistency of provision.

The ICBs have developed a Commissioning Policy on ADHD and Autism, aligned with the direction of the review, to support a more consistent, equitable and needs-led approach to assessment, treatment and support. Implementation is underway, with full implementation expected during 2027. The policy establishes clearer expectations for clinical quality, provider standards, value for money and informed patient choice, including through the Right to Choose pathway.

These priorities are also reflected in the ICBs' commissioning intentions, which focus on improving access to information and support, referral management, assessment and diagnosis, treatment, post-diagnostic care and medicines management. The intentions reinforce expectations for compliance with NICE guidance, Care Quality Commission (CQC) requirements and agreed clinical standards, alongside strengthened quality assurance and performance reporting arrangements.

Strategic Commissioning Development Programme

The national Strategic Commissioning Development Programme is progressing to its next phase, providing practical support to ICBs in strengthening their commissioning capabilities and developing more outcome-focused approaches.

The programme will support ICBs to commission for defined population groups, using population health evidence, outcome-based approaches and risk-tiered capitation, initially focusing on people at high or rising risk of poor health outcomes.

Participating ICBs will work with specialist partners on practical commissioning challenges, with the intention of producing outputs that can be applied directly to local commissioning decisions. Delivery