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**HNY ICB Committee Assurance and Escalation Report**

**Report to: HNY Integrated Care Board**

**Report from: Workforce Board**

**Date of meeting: Monday 17 February 2025**

**Committee Chair: Jason Stamp, Senior Responsible Officer for Workforce**

**Director Sponsor: Jayne Adamson, Executive Director of People**

**Author: Carly McIntyre, Senior Officer: Workforce Transformation**

**This report should be no more than 2 pages using bulleted lists.**

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| **Key agenda items covered by the meeting**  (*A bulleted list of the key agenda items discussed at the meeting)* |
| * Workforce Board Assurance   + [Workforce Board Annual Report](https://humberandnorthyorkshire.org.uk/wp-content/uploads/2025/02/HNY-ICB-Q4-Governance-Review-24-25-Report-to-Committee-WFB.pdf) * Humber and North Yorkshire Health and Care Partnership update   + ICB Board * Breakthrough 2024/25 programme update   + Breakthrough [update](https://humberandnorthyorkshire.org.uk/wp-content/uploads/2025/02/Breakthrough-progress-update-Workforce-Board-February-2025.pdf) including 2025/26 planning   + [Survey results](https://humberandnorthyorkshire.org.uk/wp-content/uploads/2025/02/Working-together-to-transform-our-workforce-in-HNY.pdf) * People Promise Exemplar Site update * Centres for Dental Development update * PAM Workstream [Update](https://humberandnorthyorkshire.org.uk/wp-content/uploads/2025/02/GT-Stocktake-template-10.-Paybill-Agency-2.pdf) * Items for information only   + [HNY Workforce Transformation – NHS Futures](https://future.nhs.uk/hnyworkforcetransformation/view?objectID=48970928)   + [Leaders Briefing – January 2025](https://humberandnorthyorkshire.pagetiger.com/bczinza/1) * Any other business   + Hull Adult Social Care Workforce Strategy |
| **ALERT**  *(BY EXCEPTION ONLY - key matters and / or risks to alert or escalate to the ICB Board)* |
|  |
| **ADVISE AND / OR ASSURE** (BY EXCEPTION ONLY - *Key decisions and any updates to advise the ICB Board on the matters the Committee was able to take assurance on or where additional information was required)* |
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**END.**