

Agenda Item No:	10
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Report to:	Humber & North Yorkshire Integrated Care Board
Date of Meeting:	19 June 2025
Subject:	Questions to the Board
Director Sponsor:	Karina Ellis, Executive Director of Corporate Affairs
Author:	Governance & Compliance Team with support from colleagues across the ICB

STATUS OF THE REPORT:

Approve ☐ Discuss ☒ Assurance ☐ Information ☐ A Regulatory Requirement ☐

SUMMARY OF REPORT:

In accordance with ICB procedures, public board meetings include a standing agenda item that allows members of the public to submit up to two questions in advance, relating to any item on the published agenda. The ICB Chair retains discretion to determine whether questions not directly linked to agenda items will be addressed during the meeting.

The submitted questions and the corresponding responses are provided at **Appendix A**.

Please refer to the link below for the publication of previously submitted questions and answers to the board.

<https://humberandnorthyorkshire.icb.nhs.uk/public-questions-and-petitions/>

RECOMMENDATIONS:

Members are asked to:

- Note the questions received and responses provided.
- Note that, following the meeting, questions and responses will be published on the organisation's website for transparency and in line with good governance processes.

ICB STRATEGIC OBJECTIVE

Leading for Sustainability	<input checked="" type="checkbox"/>
Voice at the Heart	<input checked="" type="checkbox"/>
Leading for Excellence	<input checked="" type="checkbox"/>
Leading for Prevention	<input checked="" type="checkbox"/>

IMPLICATIONS

Finance	No adverse implications identified in relation to the submission of the question.
Quality	No adverse implications identified in relation to the submission of the question.
HR	No adverse implications identified in relation to the submission of the question.

Legal / Regulatory	No adverse implications identified in relation to the submission of the question.
Data Protection / IG	No adverse implications identified in relation to the submission of the question.
Health inequality / equality	No adverse implications identified in relation to the submission of the question.
Conflict of Interest Aspects	No adverse implications identified in relation to the submission of the question.
Sustainability	No adverse implications identified in relation to the submission of the question.

ASSESSED RISK:

There are no risks identified in relation to this paper.

MONITORING AND ASSURANCE:

Monitoring and assurance of the matter will be undertaken by the ICB Board.

ENGAGEMENT:

In line with the procedure, the ICB will facilitate subsequent follow-up, as required.

REPORT EXEMPT FROM PUBLIC DISCLOSURE

No

☒

Yes

☐

Question to the Board

Question 1:

The new Diagnostic Centre in Scarborough will be a very welcome addition to our local NHS facilities.

I have noticed recently on the “Next Door” social media site, there has been a lot of activity regarding transport links to the new Community Diagnostic Centre as it is not located in the town centre, but in the Eastfield area of Scarborough.

Our local MP, Alison Hume and a local councillor have both made statements about contacting the ICB re. the lack of public transport links and to quote our MP:

“I have made it absolutely clear to the ICB, there must be a shuttle bus service to the New Community Diagnostic Centre”.

This is in reference to the new facility in the form of a bus service from the town centre or walk able access from Seamer railway station.

The proposed shuttle bus service is one option, which will have associated costs to the ICB/NHS (taxpayer), or via our local Council Tax (taxpayer). The cost of providing this service will run into hundreds of thousands p.a., never mind the associated costs of tenders, administration and management of the operation.

I am not sure what is envisaged by a shuttle bus service, my guess is, there would need to be a minimum of 2 shuttle buses operating each day to ensure patients meet their appointment times. It is a circa 40-minute return journey to the New Diagnostic Centre from the Town Centre, therefore the service with just two buses would be fairly infrequent.

I wanted to bring this to your attention, in case this second option may not have been considered, my apologies if it has already been explored.

The ICB Board and the designated department for transport in the ICB may not be aware of the public transport bus routes in Scarborough and our MP is correct in saying, currently there isn't a bus service which connects the Town Centre, Scarborough Railway Station, Seamer Railway Station and the New Community Diagnostic Centre. However, there is one bus route the 7 and 7a route, operated by the EY Bus Company, which could connect all 4 of these key destinations and already runs every 20 minutes, 7 days a week.

The 7 and 7a, EY bus route passes within 200 yards of Thornburgh Road at Manham Hill and could be re-routed to the new Centre by EY buses very easily and would only add circa 6 or 7 minutes to the route.

Yes, the EY Bus Co. is a private company, so they would of course want to ensure that as a minimum, they break even on any re-routing via additional fares and recover the costs incurred in making the changes. If the ICB had to negotiate a subsidy to the route change with EY buses, (hopefully not), the ongoing cost would be far less to the ICB/NHS and the tax payer as a whole, even if the subsidy was £200k p.a.

The service, frequency and connections of the 7 and 7a buses would deliver a much better proposition for patients than any proposed shuttle bus operation. This option would also be a far more cost effective and in the best interests of all parties concerned.

HNY ICB Response to Question 1:

The original commercial and procurement approach for the project was to lease space in a new building that North Yorkshire Council intended to construct on its own land behind Scarborough railway station. This approach relied on the Council securing Levelling Up funding from central government, which unfortunately was not successful.

As an alternative, the Trust explored purchasing the land, demolishing the existing building, and constructing a new facility to accommodate the Community Diagnostic Centre (CDC). However, this option was found to carry significant risks and delays, particularly around the projected completion date, as well as concerns related to road access, ground conditions, and overall programme risk.

As a result, the project team proposed a revised approach to purchase the freehold of a development ready plot of land, which presented fewer risks than the original site and allowed the project to move forward more efficiently. A site search was conducted based on size, population proximity, transport links, site availability, and future expansion potential.

Six sites that were shortlisted

- Brunswick Centre (former Debenhams)
- Unit 2, Chapman's Yard
- Dean Road land
- Lady Edith's Drive
- Columbus Ravine (former showroom)
- Scarborough Business Park

An appraisal by the CDC NYY Steering Committee on 24 May 2022 evaluated these against six critical success factors, meeting population needs, strategic alignment, benefits optimisation, deliverability, provider capability, and affordability.

Although the Brunswick Centre was initially preferred, it was ruled out due to incompatibility with mobile imaging units. The Comet Building was also considered but found unviable within the project's timeline.

In August 2023, Scarborough Business Park was reviewed and recommended as the preferred site, as it met all key criteria.

Transport Links to the Eastfield Site

The project team is working with East Yorkshire Motor Services to extend the current bus service to include the Industrial Estate and the CDC site. A proposed reroute via Taylor Way, potentially starting from 20 July or early September has been modelled. Discussions are ongoing regarding the funding needed to implement this change, as the model indicates it would require an additional vehicle and three drivers per day.

When did the project team start working with the East Yorkshire Motor Services, to extend the current bus service?

We can confirm that our initial contact with East Yorkshire Motor Services began in early January 2025.

Question 2:

The NHS 2025/2026 Priorities & Operational Planning Guidance asks Integrated Care Systems to Optimise medicines value and improve the adoption of, and compliance with, best value NHS Supply Chain Frameworks in medicine and procurement.

Which NHS Supply Chain Frameworks will the ICB be prioritising to show projected savings in to implement the planning guidance?

HNY ICB Response to Question 2:

NHS Humber and North Yorkshire Integrated Care Board does not select or prioritise NHS Supply Chain Frameworks for medicines and procurement. The Medicines Value Programme (MVP) is a strategic NHS initiative aimed at improving the value for money from the NHS medicines budget while maintaining or improving clinical outcomes. The Medicines Value Programme is led by NHS England, with support from NHS Supply Chain and the regional procurement teams, and focuses on a mix of commercial, clinical, and operational levers to control spend.

Our regional procurement team is provided by NHS England - by the Regional Pharmacy Procurement Specialist North East and Yorkshire,

Specialist Pharmacy Services Procurement Service. The Regional Pharmacy Procurement Specialists advise our providers (mainly our 4 acute hospital trusts) on the best value frameworks related to medicines.

The ICB plays a role in seeking assurance from our providers that they are engaging with the recommendations set out by the Regional Pharmacy Procurement Specialists. The ICB also plays a role in supporting our providers to adopt the recommendations, for example, the ICB has been working closely with providers on the use of biosimilar medicines. A Humber and North Yorkshire (HNY) Area Prescribing Committee document outlining the principles for using bioequivalent (biosimilar) medicines across HNY Integrated Care Partnership has been published - <https://humberandnorthyorkshire.icb.nhs.uk/wp-content/uploads/2025/03/Clinical-Commissioning-Policy-Number-152-Biological-and-Bioequivalent-Biosimilar-Medicines-Policy-Approved-27.02.25.docx>

Aims of the Medicines Value Programme

1. Reduce the cost of medicines through:
 - Better procurement practices
 - Use of biosimilars and generics
 - Volume-based discounts (Committed Volume Agreements)
2. Increase consistency in medicine use across the NHS
3. Support innovation and new models of care, including homecare medicines
4. Ensure sustainability and resilience of supply chains
5. Enable value-based healthcare—aligning spend with patient outcomes

For more information about Medicines Value and Access: <https://www.england.nhs.uk/medicines-2/medicines-value-and-access/> More info about SPS: <https://www.sps.nhs.uk/>

On a local level, the ICB have established a system-wide medicines optimisation programme (MOP). The MOP has been set up to address system-wide issues that relate to the prescribing of medicines and other prescribable products where it is deemed there are significant inefficiencies that have not been resolved to date, as they rely on a multiple-pronged approach and support, for example, wound care. The ICB are / will be working closely with providers on these areas and will look to use the NHS Supply Chain Frameworks available.

END.