

Greater Manchester Integrated Care Partnership Board

Date: 27th March 2026

Subject: GM ICPB Strategy Meetings – Summary of January and February 2026 meetings.

Report of: Cllr Thomas Robinson – Co Chair, ICPB Strategy Meetings
Edna Robinson - Co Chair, ICPB Strategy Meetings

PURPOSE OF REPORT:

This report provides a high level update of the business and agreed recommendations of the ICPB strategy meetings. The strategy meetings host deep dives into key pieces of work requiring system discussion, progressing publicly agreed actions and shaping the papers for the ICPB meetings.

RECOMMENDATIONS:

The GM Integrated Care Partnership Board are requested to:

- Note the update provided.

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1. INTRODUCTION

1.1. ICPB Strategy meetings were held on 22nd January and 18th February in order to progress a series of key discussions and items agreed at the ICPB meeting of

12th December. A summary of discussions and business is featured in the following sections.

2. KEY THEME: ORGANISATIONAL CHANGE

2.1. A key theme reflected on by members at both meetings was regarding the ongoing organisational change within the Greater Manchester health and care system, highlighting significant uncertainty for staff and the risk of losing expertise, relationships and corporate memory during the restructuring process. Elected members stressed the importance of maintaining flexibility for localities and neighbourhoods to shape services around local needs, while also recognising pressures from national policy constraints. There was a shared concern that the system is having to design new structures without the necessary national guidance, which creates anxiety for staff and challenges regarding future planning and strategy.

2.2. **Agreed recommendation:** Colleagues to continue to communicate concerns to national partners and ensure feedback is escalated to Integrated Care Partnership Board (ICPB) Chairs.

3. MEETING OF 22ND JANUARY 2026

3.1. In January, a deep dive on GM's dementia strategy highlighted that dementia remains a strategic priority for Greater Manchester and that although national policy is delayed, local partners must continue to build a cohesive and forward looking framework which builds on the work done so far. Lived experience representatives present at the meeting emphasised the urgent need for better diagnostics, improved data sharing, consistent standards across localities and true co production in designing future services.

3.2. The discussion highlighted variation in dementia support across Greater Manchester and the need to identify and scale best practice. The board was advised that new diagnostics and treatments are expected nationally and that the system must prepare infrastructure, pathways and workforce now so that innovations can be adopted quickly. Members emphasised the importance of the

social care market, noting that many people living with dementia and those who care for them rely more heavily on social care than on NHS support. There was agreement that dementia should be central to the system's prevention-focused work. Discussion also took place regarding the lifestyle-based and preventable pre-determinants of dementia, and that early intervention has economic as well as health benefits.

3.3. Agreed Recommendation: The meeting recommended that any public board papers should speak to actions underway to address variation, set out system next steps and incorporate the social care dimension more clearly before publication.

3.4. The January meeting also considered anti racism and the need to improve responses to incidents experienced by staff across the system. Members discussed challenges in reporting and follow up and stressed the importance of consistent expectations for providers and localities, as well as engagement with communities.

3.5. Agreed recommendation: There must be clearer system wide mechanisms for reporting and addressing incidents, supporting staff and educating local communities on the impact of racist behaviour.

4. MEETING OF 18TH FEBRUARY 2026

4.1. In February, the meeting revisited the issue of organisational change, with concerns again raised about equality impact assessments, engagement and how messages are cascaded and communicated to localities. Recommendations included sending a formal letter from system leaders to the Secretary of State regarding local system pressures and the impact of the changes.

4.2. The anti-racism campaign was reviewed in detail, with members noting that the campaign aims will only be successful in the progression of the underpinning programme of internal work to follow; including how organisations support staff, embed expectations and work across the wider public sector.

4.3. **Agreed recommendation:** Members called for sufficient campaign visibility, media engagement and clarity on what the campaign intends to achieve, alongside a request for the public board meeting in March to give the item the prominence it deserves.

4.4. The February meeting also provided a substantive update on the suicide prevention programme. It was noted that Greater Manchester has seen a reduction in rates of deaths by suicide, bucking the national trend. The approach has been supported by extensive training and multi-agency partnership work. However, there were concerns raised about sustaining progress during structural changes at the ICB.

4.5. **Agreed recommendations:** Any public board report should set out clearly what the programme needs from the wider system over the next five years to deliver on the new prevention strategy. The suicide prevention programme team were also asked to undertake a scoping exercise across all ten localities to understand existing local governance, identify gaps and promote consistency of oversight, drawing on pre-existing good practice across the localities.