

Joint Bedfordshire, Luton and Milton Keynes ICB Board and Integrated Care Partnership seminar

On 23 May 2025, Members of the Integrated Care Board and Integrated Care Partnership met at the Christian Centre in Milton Keynes.

ICP Chair update – Councillor Martin Towler, Co-chair of the Bedfordshire, Luton and Milton Keynes Health and Care Partnership and Portfolio Holder for Health at Bedford Borough Council welcomed everyone to the meeting and introduced Robin Porter, the new Chair of NHS Bedfordshire, Luton and Milton Keynes Integrated Care Board. The Chair set out his commitment to serving the people and communities in the area.

Mount Vernon Cancer Centre Programme – Jessamy Kinghorn, Head of Partnership and Engagement at NHS England and Kathy Nelson, Deputy Programme Director for the Mount Vernon Cancer Centre Programme Team introduced the latest developments on Mount Vernon Cancer Centre. Members heard about plans to move cancer care from Mount Vernon in Hillington to Watford General Hospital and build satellite radiotherapy suites in one of two locations – either at the Luton and Dunstable Hospital or the Lister Hospital to provide care closer to home.

Outline timescales for a formal consultation were shared, together with the outcome on important work that had been undertaken to review the impact of proposals and what this would mean for residents, especially those who experience significant health inequalities. Members fed back that person centred care was important and that residents should have the right to choose where they access cancer care.

The Partnership agreed to develop a position statement on the preferred option ahead of the formal consultation and shared their concerns about the availability of capital funding which could affect timely and appropriate transfer of care.

Infrastructure Strategy – Nikki Barnes, Associate Director of System and ICB Estates, shared the Infrastructure Plan for Bedfordshire, Luton and Milton Keynes and set out the ICB's vision to grow capacity in estate and increase productivity to support new models of care, and ensure the area is better able to meet the significant population growth and demographic changes that are expected in the next 15 years.

Laura Church, Chief Executive of Bedford Borough Council, explained that nationally important infrastructure plans including Universal Studios and an expanded Luton Airport require a bold vision for Bedfordshire, Luton and Milton Keynes.

Members heard that the ICB proposes to develop seven priority workstreams including i) fit for purpose hospitals, ii) the establishment of community diagnostic centres to support planned care, iii) the establishment of primary care neighbourhoods, iv) support for the growth of pharmacy, optometry and dentistry, v) care closer to home, vi) the green agenda and vii) digital strategy.

Members welcomed proposals, recognising the important role this would play in helping residents to become healthier and wealthier by 2040 and asked that the ICB is clear on the gap in capital funding, to support further conversations at national and regional level.

Community and Mental Health Services – Kathy Nelson, Programme Director and Penny Harris, Strategic Consultant introduced proposals to re-imagine and co-design Community and Mental Health Services in Bedfordshire, Luton and Milton Keynes. Members heard that the two-year programme was designed to ensure services met the needs of residents, were better able to manage increasing demand associated with a growing and ageing population and considered the three changes set out in the Darzi Review - to prevent poor health, move care out of hospital into the community and move from analogue towards digital solutions.

Members reflected the need to engage residents and VCSE partners in discussions, in addition to NHS providers and primary care as no single provider would be able to achieve the ICB's aim for more integrated, person-centred and preventative care. They agreed that the population needed to be engaged and empowered more in self-care by taking a less medicalised approach, and that the possibility for pooled

budgets, and neighbourhood led interventions should be enhanced through this programme. It was agreed that data should drive modelling to ensure services meet population needs.

Successfully delivered, members agreed that this would be part of the left shift needed to move the NHS towards the recommendations in the Darzi Review. Feedback from the session would be reflected in the case for change and would inform development of a set of principles to underpin the business case and procurement approach.

Transition of the Integrated Care Boards – Robin Porter, Chair of the ICB explained to Members that following a national directive to [reduce running costs of the ICB by 50%](#) by October 2025, proposals were being developed to cluster and eventually merge Bedfordshire, Luton and Milton Keynes Integrated Care Board(ICB) with Hertfordshire and West Essex ICB (with West Essex joining an Essex ICB) and Cambridgeshire and Peterborough ICB.

Members heard that timescales were being agreed – but it was likely that formal mergers would take place by 1 April 2026, or April 2027 following local government reform. The Chair explained that while national figures showed that BLMK had been £158m underfunded in previous years, all ICBs are required to achieve a running cost of £18.76 per head of population.

Felicity Cox, Chief Executive of Bedfordshire, Luton and Milton Keynes Integrated Care Board announced her decision, taken with other ICB CEOs and NHS England, to become the lead Chief Executive for the ICB reconfiguration work. She confirmed that she intends to step down from this transition role, when the designate Chief Executive for the new organisation is appointed. She will continue as the CEO of BLMK ICB during this time.

Members thanked Felicity for her service to BLMK residents and agreed that robust and ambitious place teams should be integral to the new organisation, to retain the strengths and relationships developed in BLMK over many years. It was also agreed that further conversations were required to ensure the area received its fair allocation of resources for residents and that this should not be lost within the new geography. A position statement based on the feedback received would be drafted and shared with the Members.

If you have any queries regarding this summary, then please contact blmkicb.corporatesec@nhs.net

BLMK ICB AND INTEGRATED CARE PARTNERSHIP, MAY 2025