

BOARD MEETING

Title	Chief Executive and Directors Report		
Paper Date:	8 May 2024	Meeting Date:	21 May 2024
Purpose:	Information	Agenda Item:	08
Author:	Executive Team; Dr Nick Broughton, Interim CEO	Exec Lead/ Senior Responsible Officer:	Dr Nick Broughton, Interim CEO
Executive Summary			
This report provides an update for the Board on key topics and items for escalation since the meeting in public on 19 March 2024 that are not covered in other items on the agenda.			
Action Required			
The board is asked to note this update.			
Conflicts of Interest:	Conflict noted: conflicted party can remain and participate in discussion.		
This report contains information relating to organisations that partner members of the Board lead/are employed by. The perspective of these members is an important aspect to enable the Board to focus on where the ICB (Integrated Care Board) and system contribute to improvement.			

Chief Executive and Directors' Report

Context

1. This report aims to update the Board on key topics of relevance in the Integrated Care System (ICS) and items for escalation. The main emphasis will be on areas that are not covered in other items on the agenda or those that focus on the importance of our work in convening partners.

Integrated Care Board – our people

Change Programme

2. In January we shared our plans to revise the ICB's operating model to ensure that the ICB continues to maximise the benefits of scale and operates as efficiently and effectively as possible. Our proposed future operating model will require us to work more closely with partners, ensuring functions are delivered in the right place to meet the needs of patients and residents.
3. Building on engagement with our Staff Partnership Forum and our system partners on the proposed model we have developed the detail of the activities our functional areas will complete, and the skills and capabilities we need to do this. This has informed the design of the team structures we need in the ICB.
4. The Board agreed that subject to assurance from the Remuneration Committee we could commence the consultation process with staff. The Remuneration Committee provided this assurance at their meeting on 23 April.
5. The Consultation with our staff was launched on Monday 29 April and will run until 5pm on Saturday 1 June. We held an All Staff briefing on 29 April when we were joined by over 400 colleagues. This was followed by release of all the consultation documentation and then individual directorate briefings.
6. It goes without saying that this is a very difficult and challenging time for our staff as there are some significant changes to our structures and a reduction in posts. Supporting the well-being of our colleagues is the absolute priority. The executive team are doing all they can to support staff including through highlighting the various means that are available to access necessary support.
7. We will be sharing information on our proposed operating model with our partners.

Oxford Office Move

8. At the beginning of May, we successfully completed the office move to Unipart House from Sandford Gate. At the time of writing the team is settling into our new accommodation which we share with some teams from OUH. Special thanks are extended to all those involved with the complex planning and logistics of the move.

System working – Overview

2024/25 Operational Plan and financial recovery

9. As agreed by the Board we made our final submission on 2 May. This is covered in more detail in Item 10 of the agenda. The position is challenging for the ICB and all our providers. We have a meeting with the national and regional NHS teams scheduled for 15 May regarding the plan and will provide a verbal update to the board.
10. We have set-up a System Recovery and Transformation Board (SRTB), made up of the BOB system NHS chief executives, the BOB Turnaround Director and chaired by Martin Earwicker (Chair of Berkshire Healthcare NHS Foundation Trust. The SRTB meets monthly to update on progress and provide system leadership of our work on financial recovery.

Industrial Action

11. On 5 April the British Medical Association (BMA) and the Hospital Consultants and Specialists Association (HCSA) confirmed that 83% of members voted to back the pay offer, which was made in March.
12. Alongside the pay offer (backdated to March 2024) the offer also includes a commitment to reform the doctors' pay review body to take into account earnings over time and wages in other countries.
13. Junior doctors remain in dispute with the government and have a mandate for further strike action.

Nursing and Midwifery Strategic Leadership Forum

14. We held the inaugural ICS Nursing and Midwifery Strategic Leadership Forum on Thursday 2 May at Unipart House. The tri-annual forum has been established to create social connections and build a sense of professional community amongst our most senior nurses and midwives across the health and care sector of Buckinghamshire, Oxfordshire and Berkshire West.
15. The forum was attended by Dame Ruth May (National NHSE Chief Nurse), Professor Ruth Endacott (Director of Nursing and Midwifery, National Institute for Health and Care Research), Andrea Lewis (NHSE SE Region Chief Nurse) and Kaye Wilson (Regional Chief midwife) who all provided key-note speeches and thought-provoking presentations.
16. The inaugural forum focused on the role that both nurses and midwives play in influencing the public health of our population through driving forward Planetary Health, with a further emphasis on leading and innovating service development through driving up our ambition to undertake and deliver research.
17. The audience included representatives from all our trusts, universities, our social care sector and the VCSE.
18. May I take this opportunity to thank Jess Higson, Director of Nursing at the Royal Berkshire Hospital Foundation Trust, who has been instrumental in establishing the forum. The next forum will take place in September.

NHSE Leadership Event

19. Rachael de Caux, our Chief Medical Officer and Deputy Chief Executive attended this event on 1 May on my behalf. It included all Provider and ICB CEOs together with the National NHSE Executive team.
20. It was an interesting day with the following areas of focus:
 - Productivity (metrics and benchmarking tools)
 - NHS Impact: applying an improvement approach to the productivity challenge.
 - Delivering tech and digitally enabled productivity
 - There was also a session on the next steps for development of the Oversight and Assessment Framework.

ICS Transition to Adulthood Conference: 'Perspectives'

21. I opened our inaugural ICS conference that focused on hearing the voices of our young people, particularly those who are neurodiverse, navigating the complex journey from child to adulthood. The conference had genuine coproduction at its heart.
22. The agenda included a keynote speech from Conor Eldred-Earl, who shared his lived-experience of life as a former young person navigating many complex services.
23. The agenda was very much focused on working with complexity, transitions in education, transforming healthcare for those experiencing health and care in that transition period and making employment everyone's business – how can we ensure all our employers across the system are doing all that is possible to inspire and support equal opportunities and life chances for everyone.

24. In response we have made a commitment to develop a 'community of practice' that will share best practice, promote improvement, and develop more ambassadors for our children and young people ready to transition into adulthood.

Health Service Journal Partnership Awards

25. These awards were presented on 21 March and celebrate the best collaborations between the NHS and private sector.
26. BOB services had a strong representation with the following areas up for awards:
- **Health Dynamics & Buckinghamshire Health and Social Care Academy:** Workforce Planning For System & Place Through Action Learning were finalists in the Best Educational Programme for the NHS category.
 - **PRO-MAPP & Oxford University Hospitals FT:** Optimising Preoperative Assessment Through Preoperative Assessment Clinic Triage (PACT) which won a Bronze award for Most Effective Contribution to Clinical Redesign and finalists in the HealthTech Partnership category.
 - **Sodexo & Buckinghamshire Healthcare Trust:** Onward Care were finalists in the Most Effective Contribution to Integrated Health and Care category.
 - **Vygon UK and NHS Partners: Oxford University Hospitals FT, University Wales Hospitals & Medway FT:** 'Keep The Flow' - How Vygon UK's Elastomeric Device, Accufuser, Has Improved Patient Outcomes, Reduced Clinical Hours And Saved Money For Three NHS Trusts were finalists in the Virtual Care Project of the Year category.

Quality and Safety

27. The **Spring COVID-19 vaccination campaign** commenced on 22 April and runs until 30 June 2024 for the following eligible groups:
- Adults aged 75 years and over.
 - Residents in a care home for older adults.
 - Individuals aged 6 months and over who are immunosuppressed (as defined in the Green Book).
28. We are well prepared for the campaign across BOB. Where gaps in coverage have been identified due to slightly lower levels of GP practice participation, we have arrangements in place with alternative providers to ensure local availability of vaccination clinics and visiting services for care homes and housebound patients.
29. Access and inequality funding was secured for 15 projects, to improve uptake and reduce variation across communities including:
- Communication.
 - Vaccine hesitancy training.
 - Maternity events.
 - Health on the move vans.
 - Immunosuppressed clinics and outreach through pop-up and roving services.
30. We are amongst the top Systems in the country with our uptake of vaccinations in those who are most vulnerable.
31. Between 15 April and 3 May **Reading's children's services** were subject to a standard inspection. This included inspectors reviewing information for a week and then being on site for two weeks.
32. The inspection focused on the effectiveness of services and arrangements:
- To help and protect children.

- The experiences and progress of children in care wherever they live, including those children who return home.
 - The arrangements for permanence for children who are looked after, including adoption.
 - The experiences and progress of care leavers.
33. Inspectors also evaluate the effectiveness of leaders and managers, the impact they have on the lives of children and young people and the quality of professional practice.
34. We worked with our local authority partners during this inspection as part of our multi-agency arrangements.
35. **Children and Young Peoples (CYP) Palliative and End of Life Care (PEOLC) services:** Together for short lives, has published: [Short Lives Can't Wait: the state of children's palliative care in 2024](#).
36. BOB has been included in this report (page 40) as a good practice case study which is a testament to the excellent joint working between our ICB and provider teams.
37. In addition to the release of this report we commissioned a comprehensive review of our CYP PEOLC services within BOB and Berkshire East (Frimley) including assessment of our existing practices to identify areas for improvement and then taking targeted action to bridge identified gaps. We will continue working in partnership with our CYP Hospices and statutory services to deliver high quality PEOLC and continual improvement in services for all age groups.
38. In line with the national strategy to implement the **Patient Safety Incident Response Framework (PSIRF)** before April 2024, all our trusts have moved to the new way of reporting incidents. We will continue to work alongside them to deliver on these requirements.

Strategic System Landscape

Specialised Services delegation

39. The '**Specialised Services Joint Working Agreement**' in place as part of national requirements since April 2023 to facilitate increased collaborative working, sets out the arrangements that apply between NHS England and the ICB during the transition period of delegated commissioning responsibility between the two statutory commissioning organisations.
40. Following the decision by the SE Region to defer the transfer of commissioning responsibility until April 2025, the SE Specialised Commissioning Partnership Board has agreed, in line with NHSE national policy, to extend existing working arrangements.
41. During 2024/25, the joint working arrangements will be developed and replaced by documents that will include a Delegation Agreement for each ICB, a Multi ICB Agreement, and a Commissioning Hub Agreement, between ICBs and NHS England. The regional Delegation Working Group with system representation will work to create draft content and provide updates throughout 2024/25.
42. The National Delegation program, provides an opportunity to integrate and improve provision of services, looking at different solutions to manage the challenges in providing equitable and sufficient access to healthcare, managing costs whilst demand is increasing. It is intended that this will bring together planning across primary, community and tertiary care, aligning funding on a population basis, creating opportunities for ongoing innovation to reduce health inequalities, improve outcomes, driving efficiency and productivity.
43. The Southeast Specialised Partnership Board have commissioned an external partner, to support achievement of the aim of specialised services delegation by April 2025 focusing on two areas:
- ICB engagement to develop a Specialised Commissioning Clinical Strategy that will inform the 5-year strategy for specialised services at an ICB and pan-ICB level.

- ICB engagement to undertake discovery work on development of a Collaborative Commissioning Operating model to help establish the future governance and operating model across the southeast.
44. The intended deliverables and outcomes of the projects are ambitious given the variation in tertiary capacity and activity flow across the southeast geography, alongside the variation in maturity, prioritisation and resource across statutory ICB organisations. This requires significant stakeholder engagement and input in order that it is collectively recognised, owned and agreed at a system and regional level. The nationally identified scope of services considered 'ready and suitable' for delegation to ICBs has increased from 59 to 71 with inclusion of an extended Mental Health portfolio, so these services are in scope of this work.
45. As a system we have identified appropriate representation within the project infrastructure but recognise the limited time for preparation and challenges of capacity commitment for all organisations. We will continue to collectively engage across the system to influence and optimise outputs at a system level to aid with future strategic direction and localised service prioritisation, whilst managing expectations of a complex limited program.