

BOARD MEETING

Title	Board Committees Assurance Reports and Annual Reports 2023/24		
Paper Date:	13 May 2024	Meeting Date:	21 May 2024
Purpose:	Information	Agenda Item:	16
Author:	Catherine Mountford, Director of Governance – on behalf of Committee Chairs.	Exec Lead/ Senior Responsible Officer:	Catherine Mountford, Director of Governance
Executive Summary			
<p>Each Committee will provide an Escalation and Assurance Report to the Board with a summary of key points and to inform the Board of the extent to which the Committee was able to take assurance from the evidence provided and where additional information was required. A report will be provided for every meeting, although due to timing of meetings and publication dates for Board papers, there will be occasions where a verbal report will be provided with the written report presented to the subsequent Board meeting.</p> <p>The focus for these reports is:</p> <ul style="list-style-type: none"> • To what extent are we assured we understand the position? • To what extent are we assured by the ICB/Provider mitigations presented? • To what extent are we assured by the System response to the issue? <p>In accordance with best practice each Committee will provide an Annual Report to the Board with a summary of the remit of each committee, highlights of items discussed through the year, forward look, and attendance figures.</p> <p>The following reports are attached:</p> <ul style="list-style-type: none"> • Audit and Risk Committee meeting held on 23 April 2024 and Annual Report. • ICB People Committee meeting held on 12 March 2024. No annual report has been prepared for 2023/24 as the new arrangements were established in January. • Place and System Development Committee meeting held on 9 April 2024 and Annual Report. • Population Health & Patient Experience meeting held on 23 April 2024 and Annual Report. • System Productivity Committee meetings held on 26 April and 07 May 2024 and Annual Report. 			
Action Required			
<p>The Board is asked to:</p> <ul style="list-style-type: none"> • Note the content of the Committee Escalation and Assurance Reports. • Note the content of the Committee Annual Reports for the financial year 2023/24 			
Conflicts of Interest:	No conflict identified		

Board Committees Assurance Reports

Committee Escalation and Assurance Report – Alert, Advise, Assure	
Report From:	Audit and Risk Committee
Date of Meeting:	23 April 2024
Committee Chair:	Saqhib Ali
Key escalation and discussion points from the meeting	
Alert:	
<ul style="list-style-type: none"> The ICB received a partial assurance opinion on the internal audit review of Commissioning and Contract Management and the committee noted the work that needed to be undertaken to address the control weakness identified. 	
Advise:	
<ul style="list-style-type: none"> EY, the external auditors, advised that the S30 referral to the Secretary of State had been made. EY advised that they had commenced work on some aspects of the accounts and were delivering ahead of plan. An extraordinary meeting of the Committee would take place in early June with the aim of submitting the Annual Report and Accounts ahead of the national deadline. 	
Assure:	
<p>The Committee received reports providing assurance in the following areas:</p> <ul style="list-style-type: none"> The Internal Audit progress report contained five final reports; two had a positive substantial opinion (Key Financial Controls and Risk Management/Board Assurance Framework), two had a reasonable assurance opinion (Financial Planning/Reporting and Place and Emergency Preparedness, Resilience and Response (EPRR)). The fifth has been highlighted above. A positive Head of Internal Audit Opinion for 2023/24 was presented. The opinion indicated the ICB has an adequate and effective framework for risk management, governance, and internal control. However, their work has indicated further enhancements to ensure it remains adequate and effective. This will be included in the Annual Governance Statement in the Annual report. Risk management within the ICB was well developed and embedded within teams and directorates. BAF and CRR has been strengthened further to provide additional assurances including, risk assurance reports to each committee of the Board and deep dives across the organisation to embed risk management in all that we do. The draft Annual report had been prepared in line with guidance and would be submitted to NHSE and the auditors. The draft final accounts were presented and will be submitted to NHSE and are now subject to audit. The Counter Fraud Annual report highlighted a provisional Green rating of the ICB's self-assessment against the Counter Fraud Functional Standards. 	

AUDIT AND RISK COMMITTEE ANNUAL REPORT 2023/24

Introduction

1. As a formal committee of the Board and in accordance with best practice, the Audit and Risk Committee presents its Annual Report. The report covers the period from 1 April 2023 until 31 March 2024.
2. This report was considered at the Audit and Risk Committee meeting on 23 April 2024 and is now submitted to the Board to provide assurance that the Committee has been operating effectively and in accordance with its Terms of Reference.

Overview of Committee

3. The Terms of Reference of the Committee were agreed by the board of the Buckinghamshire Oxfordshire and Berkshire West Integrated Care Board (BOB ICB) at its establishment meeting on 1 July 2022. No revisions have been made this year.
4. The purpose of the committee is to provide assurance to the board on governance, risk management and internal control processes.
5. The Committee's duty is to assure the board on:
 - a. Integrated Governance and Systems Risk
 - b. Internal Audit
 - c. External Audit
 - d. Other Assurance Functions
 - e. Counter Fraud
 - f. Financial Reporting
 - g. Information Governance
 - h. Conflicts of Interest

Membership and Meetings

6. Six meetings were held in the period, all were quorate. Five were held via MSTeams and one was hybrid. The Committee has agreed that it will timetable one face to face meeting per year.
7. The membership of the Committee comprises three non-executive directors and attendance has been as follows:

Member	Attendance
Saqhib Ali (Chair), Non-Executive Director	6/6
Margaret Batty, Non-Executive Director	4/6
Aidan Rave, Non-Executive Director	4/6

8. The following officers of the ICB attended the Committee during the year: Chief Finance Officer, Chief Medical Officer, Chief Nursing Officer and Director of Governance. In addition, the ICB's Internal Auditors (RSM), external Auditors (Ernst and Young) and Local Counter Fraud Specialists (TiAA) attended to agree activity and to present the results of their work during the year.

Duties within Terms of Reference

9. A forward plan, aligned to the organisation's business cycle was presented to the April 2023 meeting and was reviewed and updated at each meeting. The Committee's focus for 2023/24 was to seek assurance of implementation and embedding of the organisational governance systems and processes.
10. *Governance structure and processes.* The Committee retained oversight of the overall governance structure and processes within the ICB and received assurance of:
 - a. Pharmacy, Optometry and Dental (POD) arrangements for delegation of Commissioning
 - b. Assurance that the ICB had a process in place for policy design, development and approval. The ICB will have a single suite of policies in place from Q1 2024/25.
 - c. Receipt of a six-monthly update and review of the Annual Report for the Emergency Planning Resilience and Response (EPRR) portfolio. The report presented the ICB's compliance position following the NHS England Core Standards for EPRR annual assurance process. The outcome of this self-assessment showed that against the 47 applicable standards, the ICB was fully compliant with 39 core standards and partially compliant with 8 core standards; actions are in place to progress these standards. The overall rating of the ICB was therefore partially compliant. The EPRR Annual Report was presented to the Board in January 2024.
 - d. That processes for management of Freedom of Information requests and Subject Access requests were in place and enabled the ICB to deliver its statutory requirements.
 - e. The development of the Annual Governance Statement for 2023/24 was presented and reviewed at the February meeting; this will be included in the Annual Report.
11. *Risk Management:* The Committee has overseen the development of risk management processes within the ICB and reviewed the Board Assurance Framework and Corporate Risk register. As the risk management processes have become embedded the Committee confirmed that scrutiny should move to highlighting risks for deep dive and supported a Board risk workshop to be undertaken in quarter 4.
12. *Information Governance (IG):* The Information Governance Steering Group (IGSG) provides executive oversight and leadership to the BOB ICB to ensure it meets its statutory duties and assurance to the Audit and Risk Committee on matters relating to IG and information security. The IGSG has provided regular reports to the Committee and evidenced its category 1 compliance with the requirements of the Data Security and Protection Toolkit in June 2023. In 2023/24 the work focused on ensuring all processes were widely and systematically embedded and in preparation for the submission of the 2024 DSPT in June 2024.

13. *Financial Governance*: The following items were considered by the Committee during the year:
- a. Continued oversight and review of Single Tender Waivers (STWs) highlighted that whilst adherence to the process had improved there was continued concern about the value and rationale for some of the STWs.
 - b. The planned update to the national NHS Oracle finance system (currently deferred). This would introduce a no PO no Pay Policy which could have a significant impact on ways of working. The ICB has established a project team to ensure we are prepared for this change.
14. *Annual report and Accounts for 2022/23*. For 2022/23 the ICB submitted Q1 reports and accounts for each of the predecessor CCGs and one for the ICB. The ICB had completed all four sets of accounts and annual reports by the deadline. Given the complexity of the arrangements and requirements for audit and review whilst the CCG reports were all submitted on 30 June the ICB report was submitted early the following week; a positive position compared to the national picture.
15. *Annual report and Accounts for 2023/24*. Timelines and plans for development of annual reports and annual accounts were shared giving assurance that the Committee members will have time for review and submission deadlines will be met. In the annual cycle this work starts in Q4 of the year and is signed off in Q1 of the next financial year (so straddles two reporting years).
16. *Internal Audit*: The Committee ensured that there was an effective internal audit function that met mandatory NHS Internal Audit Standards and provided appropriate independent assurance to the Committee. This was achieved by:
- a. Receiving a positive Head of Internal Audit Opinion for 2022/23. The draft opinion for 2023/24 is also positive.
 - b. Reviewing and agreement of an internal audit plan that recognised the stage of development of the ICB and was focused on ensuring the new structures and processes were embedded.
 - c. Receiving a report providing benchmarking across sectors for internal audit findings 2022/23. This indicated the findings for the ICB were in line with other ICBs acknowledging that audit work in 2022/23 focused on set-up and implementation of systems of control and in 2023/24 the focus would be on embedding.
 - d. Fourteen internal audits for 2023/24 were reported to the Committee— of which seven received a substantial assurance opinion: two reasonable assurance and the remaining five received a partial assurance opinion. Some control weaknesses were identified, and the agreed management actions will be implemented by the ICB.
 - e. Undertaking a procurement of Internal Audit services and awarding a contract for two years (with option to extend by one) from April 2024.
17. *External Audit*: The external audit team provided information and assurance to the Committee to complete the 2022/23 audits (as highlighted in paragraph 14) and highlight their approach and resources to deliver the 2023/24 audit of the ICB annual report and accounts. This work will be completed within Q1 of 2024/25.

18. External Audit reviewed the 2022/23 audit process with the ICB team and noted areas for improvement. It was agreed that last year went exceptionally well given the complexity of doing this for four organisations.
19. *Counter Fraud*: The committee has received regular reports outlining the proactive and reactive work undertaken against the agreed work plan including completion of a provisional assessment against the NHS counter fraud requirements.

Review of Effectiveness

20. The Committee undertook a self-assessment of its processes and effectiveness using the NHS Audit Committee Handbook self-assessment checklist. The results of this assessment were discussed at the June 2023 Committee meeting. The ICB Board agreed to undertake a Governance and Partnership Review at its meeting in May. One aspect considered was the effectiveness of the board, delegation to and function of committees and executives. As part of the review the Acting Chair, Chief Executive Officer and Director of Governance attended at least one meeting of each committee and their reflections informed the findings outlined below.

Conclusion

21. The Annual Report provides a summary of the Audit and Risk Committee's work in year. The Committee has complied with its Terms of Reference and Business Cycle. It is the opinion of the Chair and Members that the Audit and Risk Committee has effectively discharged its responsibilities for 2023/24.

Looking Forward

22. In order to support increasing effectiveness, the Committee has agreed to make the following changes for 2024/25
 - a. Requested that the relevant executive and/or subject matter expert attend future committee meetings to support presentation of internal audit reports.
 - b. The governance team to incorporate assurance of ICB monitoring of internal audit action plans in the regular updates to the committee.
23. The ICB Chair presented the outcome of the Governance and Partnership Review to the Board in January 2024. The Chair and Board confirmed.
 - a. the current assurance committee structure would be retained.
 - b. The Terms of reference of the committees of the Board will be reviewed in terms of content (scope and statutory/non statutory function) and membership and this will be undertaken by the Director/Deputy Director of Governance with the ICB Chair and respective Chairs of Committee. This will report to the Board by the end of Q2 2024/25.
 - c. Work on forward planning agenda setting and paper content would continue to support the effectiveness of committees. This will include the establishment of a consistent approach to committee self-assessment effectiveness to be introduced in the 2024/25 cycle.

Committee Escalation and Assurance Report – Alert, Advise, Assure

Report From:	ICB People Committee
Date of Meeting:	12 March 2024
Committee Chair:	Sim Scavazza

Key escalation and discussion points from the meeting

Alert:

- Given the recent reset of the ICB People Committee there is no Committee Annual report for 2023/24.
- The results of the Staff Survey were reviewed, and the committee noted that it indicated little or no improvement from last year. It was confirmed that these findings were being used to support a review of the OD Programme.
- The [Gender Pay Gap report](#) was approved for publication. It demonstrated a median pay gap higher than the national average and an action plan to address this was included in the report. Data was not good enough for an ethnicity pay gap report to be meaningful and work was in hand to encourage staff to update their personal information.

Advise:

- An outline HR report for the Executive was shared; the committee highlighted areas for development and an updated version will be considered at a future meeting.
- Progress with the Change Programme, including staff engagement to date was reviewed. The Committee were advised that the Staff Partnership Forum (with attendees from across all our staff networks, directorates and major unions) was now up and running.
- There is a high uptake of appraisals across the ICB and focus now needed to be on ensuring that were meaningful and added value. Appraisal paperwork had been reviewed and agreed it would remain the same for the coming year,

Assure:

- The ICB [Public Sector Equality Duty Annual Report](#) for 2023/24 highlighted the work the ICB was funding to support inclusion for staff and in the services we commission. The Board will be asked to approve this report.

Committee Escalation and Assurance Report – Alert, Advise, Assure	
Report From:	Place & System Development
Date of Meeting:	9 April 2024
Committee Chair:	Aidan Rave
Key escalation and discussion points from the meeting	
Alert:	
No items on this agenda.	
Advise:	
There is evidence that the general financial pressures being experienced by all partners across the system is placing strain on relationships. Place based relationships remain a critical element of ‘holding the line’ on these relationships and maintaining lines of dialogue.	
Assure:	
<p>The committee has considered a number of priorities for future work including:</p> <ul style="list-style-type: none"> • A commitment to the assurance role played by the committee, on behalf of the ICB, in relation to the places and system that make up BOB. • To resolve the issue of executive ‘ownership’ of the committee and the flow of support and input that entails. • To continue the emphasis on places, neighbourhoods, communities or whatever description might be – basically the environment in which services and interactions happen. • To place a particular focus on further developing the relationship with the acute and community health provider collaboratives. • We need to resolve and clarify the committee’s relationship with the Integrated Care Partnership (ICP) especially in terms of the relationship with other partners sure as local government and the voluntary sector. • Consideration was also given to the strategic relationship with the likes of education providers. <p>These ideas and proposals will be further refined with a view to signing them off at the next meeting in June.</p>	

PLACE AND SYSTEM DEVELOPMENT COMMITTEE ANNUAL REPORT 2023/24

Introduction

1. As a formal committee of the Board and in accordance with best practice, the Place and System Development Committee presents its Annual Report. The report covers the twelve-month period from 1 April 2023 until 31 March 2024.
2. This report was considered at the Place and System Development Committee meeting on 09 April 2024 and is now submitted to the Board to provide assurance that the Committee has been operating effectively and in accordance with its Terms of Reference.

Overview of Committee

3. The Terms of Reference (ToR) of the Committee were agreed by the board of the Buckinghamshire Oxfordshire and Berkshire West Integrated Care Board (BOB ICB) at its establishment meeting on 1 July 2022.
4. The ToR were reviewed at the Committee meeting held on 13 February 2024 where it was agreed changes were required for clarity around the Committee being concerned with the architecture of system development; strengthening around investing, supporting, and encouraging different parts of the system; and developing public and patient engagement. This review will be linked to the Governance Review and the work to consider the ToR of the Board Committees.
5. The purpose of the committee is to provide assurance to the Board that the three Places in BOB ICS and system working arrangements across the ICS are being developed to fulfil the ICS aims:
 - Improve health and wellbeing
 - Reduce health inequalities
 - Increase system productivity
 - Support local socio-economic development.
6. The Committee's duty is to assure the board on:
 - Place development
 - System development
 - Providing assurance involving:
 - Triangulating multiple sources of internal and external information including:
 - Data analysis and contract performance intelligence
 - Patients', service users' and carers' reports, surveys, complaints, and concerns
 - Evidence from key clinicians and managers

Membership and Meetings

7. Six meetings were held in the period, all were quorate and held via MS Teams.
8. The membership of the Committee comprises:
 - Aidan Rave, Non-Executive Director (Committee Chair)
 - A second Non-Executive Director or Chair of ICB

- Chief Strategy and Partnerships Officer (previously Director of Strategy and Partnerships)
- Voluntary Sector Representative
- ICB NHS Trust/Foundation Trust Partner Member (currently vacant)
- Two local authority attendees and as required up to three additional members with relevant experience in system working and system development

Attendance over the year is included in the table below:

	April 2023	June 2023	August 2023	October 2023	December 2023	February 2024
Aidan Rave Committee Chair and Non-Executive Director	Y	Y	Y	Y	Y	Y
Sim Scavazza Non-Executive Director (Acting Chair), BOB ICB	N/A	Y	Y	A	Y	Y
Ansaf Azhar Director of Public Health and Wellbeing, Oxfordshire County Council	A	Y	Y	A	Not recorded	Y
Philippa Baker BOB ICB Place Director, Buckinghamshire	A	A	Y	Y	Y	Y
Robert Bowen Deputy Director of Strategy, BOB ICB (as Acting Director of Strategy and Partnerships)	Y	Y	Y			
William Butler BOB VCSE Health Alliance Chair	Y	Y	A	Y	Y	A
Hannah Iqbal Chief Strategy and Partnerships Officer, BOB ICB	N/A	N/A	N/A	Y	A	Y
Daniel Leveson BOB ICB Place Director – Oxfordshire	A	Y	A	Y	Y	A
Matthew Tait, Chief Delivery Officer, BOB ICB ICB	Y	Y	Y	Y	Y	Y
Sarah Webster BOB ICB Place Director, Berkshire West	Y	Y	Y	Y	Y	A
Melissa Wise Interim Executive Director of Adult Social Care and Health, Reading Borough Council	A	A				

9. The Chief Executive has an open invitation to attend the meeting.

Duties within Terms of Reference

10. The Committee has a forward plan, aligned to the organisation's business cycle which is reviewed and updated at each meeting.

11. Place Development: Over the course of 12 months the committee worked to develop and deliver agreements for the BOB Acute Provider Collaborative and Mental Health Provider Collaborative. The committee held deep dives across each place, with a focus on one place per meeting where possible. Verbal Place updates were given at every meeting.

- Oxfordshire Place

- Berkshire West Place
- Buckinghamshire Place

12. System Development: The committee's commitment to undertake a self-assessment was achieved. A joint forward plan was established with a focus on:

- BOB Net Zero action plan.
- Research Engagement Network Grant
- Health Innovation Network (previously Academic Health Sciences Network) Update
- Specialised commissioning

During two committee meetings the ICB – VCSE Working together plan was reviewed a to make sure that regular updates were communicated, and all actions were completed.

Review of Effectiveness

13. The ICB Board agreed to undertake a Governance and Partnership Review at its meeting in May. One aspect considered was the effectiveness of the board, delegation to and function of committees and executives. As part of the review the Acting Chair, Chief Executive Officer and Director of Governance attended at least one meeting of each committee and their reflections informed the findings presented to the Board in January 2024.

14. This work covered Committee performance and effectiveness in 2023/24 so individual effectiveness review by the committee has not been completed.

Conclusion

15. The Annual Report provides a summary of the Place and System Development Committee's work in year. The Committee has complied with its Terms of Reference and Business Cycle. It is the opinion of the Chair and Members that the Place and System Development Committee has effectively discharged its responsibilities for 2023/24.

Looking Forward

16. The ICB Chair presented the outcome of the Governance and Partnership Review to the Board in January 2024. The Chair and Board confirmed.

- a. the current assurance committee structure would be retained.
- b. The Terms of reference of the committees of the Board will be reviewed in terms of content (scope and statutory/non statutory function) and membership and this will be undertaken by the Director/Deputy Director of Governance with the ICB Chair and respective Chairs of Committee. This will report to the Board by the end of Q2 2024/25.
- c. Work on forward planning agenda setting and paper content would continue to support the effectiveness of committees. This will include the establishment of a consistent approach to committee self-assessment effectiveness to be introduced in the 2024/25 cycle.

17. At its meeting on the 9 April 2024, the committee engaged in a review of progress over the last 18 months in addition to considering priorities for future work. A number of themes and ideas emerged from this discussion:

- a. A commitment to the assurance role played by the committee, on behalf of the ICB, in relation to the places and system that make up BOB.
- b. To resolve the issue of executive 'ownership' of the committee and the flow of support and input that entails.
- c. To continue the emphasis on places, neighbourhoods, communities or whatever description might be – basically the environment in which services and interactions happen.
- d. To place a particular focus on further developing the relationship with the acute and mental health provider collaboratives.
- e. We need to resolve and clarify the committee's relationship with the Integrated Care Partnership (ICP) especially in terms of the relationship with other partners such as local government and the voluntary sector.
- f. Consideration was also given to the strategic relationship with the likes of education providers.

The committee have asked the Chair along with the Chief Delivery Officer and Chief Strategy and Partnerships Officer to turn the above into a series of deliverables and proposals which will be considered by the committee at its next meeting on 11 June 2024.

Committee Escalation and Assurance Report – Alert, Advise, Assure

Report From:	Population Health and Patient Experience Committee (PHPEC)
Date of Meeting:	23 April 2024
Committee Chair:	Margaret Batty

Key escalation and discussion points from the meeting

Alert:

The Committee were alerted to the ongoing work underway to mitigate the risk to the temporary pause in new referrals for ADHD assessment and treatment in Buckinghamshire and Oxfordshire. The work underway to review the pathway, both locally and nationally, was shared with members of the committee and the committee were reassured by the work the team are doing to maintain referrals to non-NHS assessment services, if requested by primary care. A further update will come through to committee in June and there are weekly meetings are in place between the ICB and the trust.

The Committee received a verbal update from the CNO and CMO on the work underway to monitor the quality and safety impact of the system-wide financial turnaround and recovery programme. Descriptions of the current quality and equality impact assessment (EQIA) process, including escalation from the executive panel, were shared and it was confirmed that monthly meetings were in place with the system CNO and CMOs to review and monitor quality and equality impact of any further financial savings across the system. This will be monitored in detail via the System Quality Group (SQG).

Advise:

The Committee received reports and updates on the Primary Care Access and Recovery Plan (PCARP) and the month 10 Performance and Quality Report.

Assure:

The committee received a deep dive report into the work underway to deliver the elective care recovery plan target of 95% of patients receiving their diagnostic tests within 6 weeks by March 2025 noting a current position of 69%. The committee were assured by the work that the Diagnostics Oversight Group will do to monitor the delivery of comprehensive action plan to support improvements in endoscopy, MRI and non-obstetric ultrasound in support of achieving the national standards for long waits and cancer. The committee were provided with the details of the strengthened governance the acute provider collaborative will take in greater oversight and assurance of the programmes across the system.

POPULATION HEALTH AND PATIENT EXPERIENCE COMMITTEE ANNUAL REPORT 2023/24

Introduction

1. As a formal committee of the Board and in accordance with best practice, the Population Health and Patient Experience Committee present its Annual Report. The report covers the 12-month period from 1 April 2023 until 31 March 2024.
2. This report was considered at the Population Health and Patient Experience Committee meeting on 23 April 2024 and is now submitted to the Board to provide assurance that the Committee has been operating effectively and in accordance with its Terms of Reference.

Overview of Committee

3. The Terms of Reference of the Committee were agreed by the board of the Buckinghamshire Oxfordshire and Berkshire West Integrated Care Board (BOB ICB) at its establishment meeting on 1 July 2022. They were reviewed on 24 October 2023 and outcomes fed into the governance review.
4. The purpose of the committee is to provide assurance to the board on service quality and performance, Population Health Management (PHM), and patient and public involvement.
5. The Committee's duty is to assure the board on:
 - a. Service quality (incorporating patients' safety, clinical effectiveness and patient experience) and service performance.
 - b. Population Health Management (PHM)
 - c. Governance

Membership and Meetings

6. Six meetings were held in the period, all were quorate and held via MSTeams.
7. The membership of the Committee comprises:
 - Non-Executive Director (Committee Chair)
 - Chief Medical, Nursing and Delivery Officers
 - Director of Primary Care
 - Independent Clinical Advisor (secondary care)
 - ICS Lead on Equalities
 - A Director of Public Health
 - A Healthwatch representative
8. Other regular attendees have included:
 - Deputy Chief Nursing Officer / Director of Quality
 - Director of Safeguarding
 - Chief Clinical Information Officer
 - Deputy Director of Clinical Programmes (Long Term Conditions)
 - Clinical Director for Health Inequalities

Attendance at each meeting is shown in the table below.

Attendees	25/04/23	27/06/23	22/08/23	24/10/23	07/12/23	27/02/24
M						
Daniel Alton, Chief Clinical Information Officer, BOB ICB	A	A	Y	Y	Y	Y
Margaret Batty, Non-Executive Director, BOB ICB (Chair)	Y	Y	Y	Y	Y	A
Heidi Beddall, Deputy Chief Nursing Officer / Director of Quality, BOB ICB					Y	Y
Shairoz Claridge, Deputy Director of Clinical Programmes (LTCs), BOB ICB	Y	Y	Y	Y	Y	Y
Rachael Corser, Chief Nursing Officer, BOB ICB	Y	Y	Y	Y	Y	Y
Rachael De Caux, Chief Medical Officer, BOB ICB	Y	A	Y	Y	Y	Y
Steve Goldensmith, Head of Prevention & Health Inequalities, BOB ICB	Y	Y	Y	Y	Y	Y
Abid Irfan, Deputy CMO and Director of Primary Care, BOB ICB	Y	A	A	A	A	Y
Vanessa Lodge, Interim Director of Quality BOB ICB	A	Y	Y			
Karl Marlowe, Medical Director Oxford Health NHS Foundation Trust	A	Y	A	Y	A	A
Zoe McIntosh, Chief Executive Healthwatch Buckinghamshire	Y	Y	Y	Y	Y	Y
Raju Reddy, Clinical Lead for TVPC, BOB ICS / Consultant Paediatric Anaesthetist	A	Y	Y	Y	Y	A
Rashmi Sawhney, Clinical Lead Inequalities, BOB ICB	A	A	A	A	A	A
Sim Scavazza, NED and Deputy Chair, BOB ICB	Y	Y	A	Y	A	Y
Matthew Tait, IChief Delivery Officer, BOB ICB	Y	A	A	Y	Y	Y

Duties within Terms of Reference

9. The Committee has a forward plan, aligned to the organisation's business cycle which is reviewed and updated at each meeting.
 - a. *Service quality and service performance*: Standing items on the Committee's agendas include quality and performance reports, and updates on clinical programmes. The Committee received reports relating to quality assurance on safeguarding, maternity, mental health, medicines optimisation, respiratory, primary care, including pharmacy, optometry and dental services.
 - b. *Population Health Management (PHM)*: The Committee received reports on social prescribing and plans to address the variation across health inequalities and access to care.
 - c. *Governance*: Committee members discussed the quality and performance risks, quality strategy and the quality aspects of the Integrated Care System Joint Forward Plan.

Review of Effectiveness

10. The ICB Board agreed to undertake a Governance and Partnership Review at its meeting in May. One aspect considered was the effectiveness of the board, delegation to and function of committees and executives. As part of the review the Acting Chair, Chief Executive Officer and Director of Governance attended at least one meeting of each committee and their reflections informed the findings presented to the Board in January 2024.
11. This work covered Committee performance and effectiveness in 2023/24. The committee undertook an effectiveness review in June 2023. Outcomes included:
 - a. To broaden the Committee membership to Primary Care Networks.
 - b. Fewer agenda items and increased agenda times to allow for in-depth discussion.
 - c. A greater focus on performance, patient experience and population health.
 - d. Engagement with other Committees of the Board.
 - e. Visibility of the Committee Chair.

Conclusion

12. The Annual Report provides a summary of the Population Health and Patient Experience Committee's work in year. The Committee has complied with its Terms of Reference and Business Cycle. It is the opinion of the Chair and Members that the Population Health and Patient Experience Committee's Committee has effectively discharged its responsibilities for 2023/24.

Looking Forward

13. The ICB Chair presented the outcome of the Governance and Partnership Review to the Board in January 2024. The Chair and Board confirmed.
 - a. the current assurance committee structure would be retained.
 - b. The Terms of reference of the committees of the Board will be reviewed in terms of content (scope and statutory/non statutory function) and membership and this will be undertaken by the Director/Deputy Director of Governance with the ICB Chair and respective Chairs of Committee. This will report to the Board by the end of Q2 2024/25.
 - c. Work on forward planning agenda setting and paper content would continue to support the effectiveness of committees. This will include the establishment of a consistent approach to committee self-assessment effectiveness to be introduced in the 2024/25 cycle.

Committee Escalation and Assurance Report – Alert, Advise, Assure	
Report From:	System Productivity Committee
Date of Meeting:	07 May 2024 (and meeting of 26 April)
Committee Chair:	Tim Nolan
Key escalation and discussion points from the meeting	
Alert:	
<ul style="list-style-type: none"> • Month 12 System Finance report • Budget 2024/25 and Operational plan • System Recovery and Transformation board (minutes review and update) 	
Advise:	
<ul style="list-style-type: none"> • ICS Digital priorities update • System recovery metrics • IT and Digital sustainability (Hardware) • Committee risk register, Additional work is required to establish where the risk should be reported and managed. • SPC Review, (frequency, attendees and forward look) There is an outline of the new meeting structure. 	
Assure:	
<ul style="list-style-type: none"> • System IT performance update 	

SYSTEM PRODUCTIVITY COMMITTEE ANNUAL REPORT 2023/24

Introduction

1. As a formal committee of the Board and in accordance with best practice, the System Productivity Committee present its Annual Report. The report covers the twelve-month period from 1 April 2023 until 31 March 2024.
2. This report was considered at the System Productivity Committee meeting on 5 March 2024 and is now submitted to the Board to provide assurance that the Committee has been operating effectively and in accordance with its Terms of Reference.

Overview of Committee

3. The Terms of Reference of the Committee were discussed at the System Productivity Committee meeting on 4 July 2023 and taken to the Board of the Buckinghamshire Oxfordshire and Berkshire West Integrated Care Board (BOB ICB) on the 16 January 2024 where it was agreed that the Terms of Reference of the Committees of the Board will be reviewed in terms of content (scope and statutory/non statutory function) and membership during Q3 2024/25 (October 2024).
4. The purpose of the Committee is to provide assurance to the Board in relation to the financial sustainability of the system and its partners, and the achievement of system financial and productivity goals.
5. The Committee's duty is to assure the board on:
 - Financial Planning and Oversight
 - Performance against the delivery of the ICB's Strategy and Operational Plan
 - System Oversight Framework
 - Sustainability and Innovation, including digital and procurement.

Membership and Meetings

6. Seven meetings were held in person at venues across Buckinghamshire, Oxfordshire, and Berkshire West, with the option to join via MS Teams, of which all were quorate.
7. The membership of the Committee comprises:
 - Non-Executive Director (Committee Chair)
 - Non-Executive Director
 - Advisor
 - Chief Finance Officer
 - Chief Digital and Information Officer
 - Chief Delivery Officer
 - Independent expert (vacant)

8. The Chair and Chief Executive Officer have an open invitation to attend meetings of the Committee.
9. Attendance at the System Productivity Committee Meetings between 1 April 2023 to 31 March 2024, are reported as follows:

	May 2023	July 2023	September 2023	November 2023	December 2023	January 2024	March 2024
Tim Nolan Committee Chair and Non-Executive Director, BOB ICB	Y	Y	Y	Y	Y	Y	Y
Saqhib Ali Non-Executive Director, BOB ICB	Y	Y	Y	Y	A	Y	Y
Jason Dorsett Chief Finance Officer, Oxford University Hospitals Foundation Trust	N/A	A	A	A	A	Y	Y
Ross Fullerton Interim Chief Digital Officer, BOB ICB	Y	Y	A	R			
Victoria Otley-Groom Chief Digital and Information Officer, BOB ICB	N/A	N/A	N/A	Y	Y	Y	Y
Advisor, BOB ICB	A	A	Y	Y	A	Y	Y
Matthew Metcalfe Chief Finance Officer, BOB ICB	Y	Y	Y	Y	Y	Y	Y
Matthew Tait Chief Delivery Officer, BOB ICB	Y	Y	Y	Y	Y	Y	Y

10. Other attendees over the year included the Chief Medical Officer, Chief Pharmacist, Director of Governance and other members of the finance and digital and data teams.

Duties within Terms of Reference

11. The Committee has a forward plan, aligned to the organisation's business cycle which is reviewed and updated at each meeting.
12. *Financial Planning and Oversight:* At each meeting, the Committee receives the latest monthly finance oversight report. Reports have been discussed on the Estates and Capital plan (presented by Chief Finance Officer (CFO) of Royal Berkshire Hospital). The 2023/24 Budget and Operational Plan was received at the March meeting (presented by ICB CFO and Chief Delivery Officer respectively). The January meeting received reports on the financial aspects of Prescribing and Acute Contracts.
13. *Performance against the delivery of the ICB's Strategy and Operational Plan:* The Committee instigated the creation of the ICS Efficiency Collaboration Group (IECG), received an update on progress to date, and this was a standing item for the meetings. Productivity metrics were discussed at each

meeting. The Committee received an update on the cost, performance, and development of the ICS' Continuing Healthcare plans in February.

14. *System Oversight Framework*: The Committee receives regular reports on the cost improvement plans for the ICS via regular reports from the IECG.
15. *Sustainability and Innovation, including digital and procurement*: The Committee has regularly received papers on digital and ICP and system priorities, and the ICS Digital and Data strategy (presented by the ICB Interim Chief Information Officer). Virtual Wards were discussed at the February meeting.

Review of Effectiveness

16. The ICB Board agreed to undertake a Governance and Partnership Review at its meeting in May. One aspect considered was the effectiveness of the board, delegation to and function of committees and executives. As part of the review the Acting Chair, Interim Chief Executive Officer and Director of Governance attended at least one meeting of each committee and their reflections informed the findings presented to the Board in January 2024.
17. This work covered Committee performance and effectiveness in 2023/24 so individual effectiveness review by the committee has not yet been completed and is due to be undertaken during 2024/25 as part of the finalisation of the governance and partnership review.

Conclusion

18. The Annual Report provides a summary of the System Productivity Committee's work in year. The Committee has complied with its Terms of Reference and Business Cycle. It is the opinion of the Chair and Members that the System Productivity Committee has effectively discharged its responsibilities for 2023/24.

Looking Forward

19. The ICB Chair presented the outcome of the Governance and Partnership Review to the Board in January 2024. The Chair and Board confirmed.
 - a. the current assurance committee structure would be retained.
 - b. The Terms of reference of the committees of the Board will be reviewed in terms of content (scope and statutory/non statutory function) and membership and this will be undertaken by the Director/Deputy Director of Governance with the ICB Chair and respective Chairs of Committee. This will report to the Board by the end of Q2 2024/25.
 - c. Work on forward planning agenda setting and paper content would continue to support the effectiveness of committees. This will include the establishment of a consistent approach to committee self-assessment effectiveness to be introduced in the 2024/25 cycle.