

Integrated Care Board (ICB) Buckinghamshire, Oxfordshire and Berkshire West (BOB) Establishment - Inaugural Board Meeting

Minutes

Date: 1 July 2022
 Time: 10.00 – 12.00
 Location: Jubilee House, Oxford OX4 2LH

Members			
Name	Role and Organisation		Attendance
Javed Khan OBE	Chair	JKh	Present
Dr James Kent	Chief Executive Officer	JKe	Present
Saqhib Ali	Non-Executive Director	SA	Present
Margaret Batty	Non-Executive Director	MB	Present
Haider Husain	Non-Executive Director (Associate)	HH	Present
Aidan Rave	Non-Executive Director	AR	Present
Sim Scavazza	Non-Executive Director	SS	Present
Tim Nolan	Non-Executive Director	TN	Absent
Richard Eley	Chief Financial Officer (Interim)	RE	Present
Dr Rachael De Caux	Chief Medical Officer	RdeC	Present
Debbie Simmons	Interim Chief Nursing Officer	DS	Absent
Steve McManus	Partner member – NHS Trusts	SM	Present
Stephen Chandler	Partner member – Local Authorities	SC	Present (from 11.10)
Dr Shaheen Jinah	Partner member – Primary Care	SJ	Absent
Dr Nick Broughton	Member for Mental Health	NB	Present

Participants/in-attendance			
Name	Role and Organisation		Attendance
Rob Beasley	Interim Director of Communications and Engagement	RB	Present
Catherine Mountford	Director of Governance	CM	Present
Matthew Tait	Interim Chief Delivery Officer	MT	Present
Rachael Corser *	Chief Nursing Officer	RC	Present

* Note Rachael Corser attended as observer - commences Board role in September 2022.

No	Agenda Item	Actions
1.	<p>Welcome and introductions</p> <p>The Chair welcomed all members to the inaugural Board Meeting. He advised it was a meeting held in public and was being livestreamed so citizens can view online it not attending in person.</p> <p>The purpose of the meeting was primarily as an establishment meeting with formal policies and papers to be approved by the Board.</p> <p>Questions would not be taken from the floor today but answers to the two questions submitted in advance would be published on the website. The Interim Chief Delivery Officer and Interim Director of Communications and Engagement would join the meeting later to present their agenda items.</p> <p>Apologies: were noted from Tim Nolan, Debbie Simmons, Dr Shaheen Jinah</p>	
2.	<p>Declaration of interests / receive first register of interests</p> <p>The Chair reminded members of their obligation to declare any interests that might conflict with the business of the Board and that these are maintained and updated as a publicly available register.</p> <p>The first Register of Interests for Board members was received and approved.</p> <p>Any updates from members of the Board should be submitted to the governance team.</p> <p>The Chair summarised the Register of Interests is a living document and will continue to be updated and published.</p>	<p>Updates to CM and document to kept up to date.</p>
ICB Establishment		
3.	<p>Governance Handbook</p> <p>The Chair summarised this was a suite of documents in the Governance Handbook- the BOB ICB constitution and sets out governance arrangements. CM advised she was seeking approval from the Board to approve the governance arrangement. The covering paper outlined where responsibility sat in the ICB, and all elements of governance would be reviewed and refined over the first year of establishment.</p> <p>The Board approved:</p> <ul style="list-style-type: none"> • Establishment of Board Committees (Terms of Reference and Membership of Committees) • Functions and Decision Map • Scheme of Reservation and Delegation • Standing Financial Instructions 	

	<ul style="list-style-type: none"> Corporate Governance Policies: Conflict of Interest, Standards of Business Conduct 	
4.	<p>Confirmation of Board level named roles</p> <p>CM advised the Board that there are some named roles, at Board level, that must be confirmed and the importance of confirming the Chair as ICB's founder member for the Integrated Care Partnership. CM highlighted that the Board also needed to confirm the executive lead for learning disability and autism; and the executive lead for Down's Syndrome; these were in the Chief Nursing Officer's portfolio.</p> <p>The Board agreed the allocation of Board level named roles.</p> <p>Partner members highlighted that a Freedom to Speak Up (FTSU)/whistleblowing role may need to be considered in due course for the staff of the newly formed organisation (c.300 staff) and how this role could interact with the existing organisations and the wider system. JKe added that staff can reach out to any FTSU representative in any organisation which the ICB worked with. AR suggested it would be useful to explore this as a group and articulate to system partners how it would work in practice.</p> <p>JKe advised SS would be taking up the FTSU Guardian role for the Board and the role would develop as SS works with other guardians and the Chief People Officer on best practices, etc.</p> <p>CM clarified it is not a requirement for the ICB to have a FTSU Guardian, but it would be good practice and Board agreed this.</p>	<p>CM to follow up.</p> <p>SS follow up FTSU Guardian role with Chief People Officer</p>
5.	<p>Development of "Working with People and Communities Strategy"</p> <p>RB highlighted that this draft engagement strategy was submitted to NHSE, at the end of May. This was developed with input from local Healthwatch groups and some wider engagement. The strategy is high level and draft with overall principles for engagement, and this will be further developed with input received, including from local community groups and networks. RB advised he would like to return to the Board meeting in September 2022 with a further update alongside a set of practical measures.</p> <p>NB added that Foundation Trusts have extensive relationships with thousands of people including young people, which could be helpful to RB's work.</p> <p>RB recommended holding Board meetings in different locations and allow agenda time for partner and patient stories, to include engagement with our communities.</p> <p>The Chair added that as the ICB exists to serve the population, a thorough, clear and effective communication plan will be vital to underpin our work and looked forward to further update in September.</p>	<p>RB provide update to Board in September</p> <p>RB to follow up with NB</p>

	The Board noted the report.	
	Handover from CCGs/ICB Starting position	
6.	<p>Safe Transition of CCG functions</p> <p>CM highlighted that this paper sets out key steps taken for the safe transfer of CCG staff and the transferring of any CCG functions including any outstanding business. It summarises the work undertaken by the CCGs with oversight and assurance from NHSE. JKe added he has spoken with the three outgoing Clinical Chairs of CCGs who were comfortable with the transition.</p> <p>The Board:</p> <ol style="list-style-type: none"> 1. noted the information provided on transfer of CCG functions 2. noted the formal delegation of commissioning of Pharmacy, Optometry and Dental (POD) services (in addition to primary medical services) and that this is enacted through a delegation agreement. 	
7.	<p>2022/23 Operational and Financial Plans</p> <p>MT advised these plans cover 2022 and 2023 for all NHS system partners, primarily focused on responding to NHS operational planning guidance which summarises national priorities including the importance of recovery of service post the Covid pandemic. There is a set of metrics against which the organisation will be measured including challenges of the retention of workforce and recruitment in the challenging environment.</p> <p>SS flagged that the pressure on staff is great, and we need to support staff above and beyond staff pay. MT to discuss further with SS and the Chief People Officer and report back to the Board.</p> <p>The Board was asked to note the risk to delivery of wider services if there are future Covid surges and variants which would impact delivery of the plan.</p> <p>RE highlighted that the current ICB budgets are for a 9-month period, whilst CCGs are terminated, with confirmation of which costs are brought over. The budget will change over the year as further allocations from NHSE are released to the ICB, which is normal practice. Inflation at 5.3% is built into the plan but there is no additional funding, so this is identified as a risk. The Board discussed the high public expectations as a result of the increase in National Insurance and the risks of bad winter.</p> <p>The Board noted the 2022/23 Operational and Financial plans.</p>	<p>MT to follow up and report back to Board.</p> <p>RE to add costs of inflation to Risk Register</p>
8.	<p>System Delivery Plan</p> <p>JKe advised that this Plan was in response to an NHSE requirement. It focused on work required to build and develop the system and the timeframe of the plan commenced prior to the inaugural Board meeting.</p>	

	<p>The document includes the approach to develop the strategy and outlines priorities (from the NHS Long Term Plan) and direction of travel and there is more to do, including input at the Board development session at the end of July. SS asked about provider collaboratives and members highlighted these currently ranged from joint working through informal partnerships to formal contractual arrangements. SM and NB outlined the provider collaboratives that they were involved in.</p> <p>The Board noted there is some good practice developing in our system and that there is a need to articulate the benefits of it in our communications.</p> <p>SC noted that there are opportunities to build the landscape beyond NHS Trusts, to work with local authority colleagues to create a collaborative landscape with key stakeholders and optimise what is available. This would be a good challenge for the board to discuss.</p> <p>The Board noted the System Delivery Plan submitted to NHSE in March 2022.</p>	<p>CM to add to P&SD Committee agenda</p>
<p>9.</p>	<p>Green Plan</p> <p>JKe noted that a Green Plan is an NHSE requirement for every system and the draft presented here articulates the 'strategy in action' in terms of what our providers, CCGs and Local Authorities are doing. He asked the Board to note the work done so far and that in time this will develop further.</p> <p>The Board noted the ICS Green Plan that will be published on the ICB website.</p>	
<p>Any Other Business</p>		
<p>10.</p>	<p>Any Other Business</p> <p>JKe and the Chair thanked CM and the whole Executive for their work to date, especially in the preparation for the first Board meeting. The Chair noted that this was a momentous day as forty-two integrated systems across England also commence the same journey, building on the achievements of the past and the work of the CCGs. He said it is a period of change that we must fully embrace. He encouraged members to share their passion for change at Board meetings, always focusing on the health and care needs of our population as we build on the strength and enormous expertise of our people. He noted that after today the five assurance committees will also begin their meetings. The Chair thanked those attending and those watching virtually and closed the meeting at 1155.</p>	
<p>11.</p>	<p>Date of next meeting:</p> <p>27 September 2022, 10.00 to 13.00</p>	

Summary of Actions

Ref	Board date	Agenda Item	Action	Responsible	Target Date	Completion Date
01	01/07/22	2 - Declaration of Interests	All to send updates to Catherine Mountford for Register of Interests	ALL to CM	Ongoing	Updates ongoing as living document.
02	01/07/22	4 - Confirmation of Board level named roles – Freedom To Speak Up role	AR suggested it would be useful to explore how this role would work within ICB as a group and articulate to system partners how it would work in practice.	CM	30/09/22	Initially role is for ICB. The wider networking across the system would need to be considered with system partners.
03	01/07/22	4 - Confirmation of Board level named roles – Freedom To Speak Up role	SS is taking up the FTSU Guardian role for the Board, the role would develop as SS works with other guardians and the Chief People Officer (SW) on best practices, etc.	SS / SW	09/09/22	The FTSU role is being scoped with and once confirmed the policy will be communicated to ICB staff. Attending a FTSU webinar with the NHS Leadership Academy 20 October 2022.
04	01/07/22	5 - Development of Working with People and Communities Strategy	Update to Board meeting in September on the draft strategy, alongside a set of practical measures.	RB	26/09/22	On agenda for Board on 27 September.
05	01/07/22	5 - Development of Working with People and Communities Strategy	NB shared Foundation Trusts have extensive relationships with thousands of young people, which could be helpful to RB's work.	RB / NB	09/09/22	RB/NB met on 25 August 2023
06	01/07/22	7 - 2022/23 Operational and Financial Plans	SS flagged the pressure on staff is great and we need to support staff above and beyond staff pay. MT to discuss further with SS and the Chief People Officer (SW) and report back to the Board.	MT / SS / SW	26/09/22	CPO and SS will update on progress at the Board Meeting in September. The first ICB People Committee takes place 11 December 2022.
07	01/07/22	7 - 2022/23 Operational and Financial Plans	RE to add costs of inflation to Risk Register	RE	09/09/22	RE advised added to risk register.
08	01/07/22	8 - System Delivery Plan	SC noted that there are opportunities to build the landscape beyond NHS Trusts, to work local authority colleagues to create a collaborative landscape with key	CM to add to P&SD Committee Agenda	09/09/22	On agenda for meeting on 11 October 2022

			stakeholders and optimise what is available. This would be a good challenge for the board to discuss.			
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Key – Green action completed, Yellow Action agreed/completion date.