BOB ICB BOARD MEETING

Title	Board Committees Assurance Report		
Paper Date:	9 May 2023	Meeting Date:	16 May 2023
Purpose:	Information	Agenda Item:	15
Author:	Lesley Corfield, Governance Manager and Catherine Mountford, Director of Governance – on behalf of Committee Chairs.	Exec Lead/ Senior Responsible Officer:	Catherine Mountford, Director of Governance
Executive Su	Immary tee will provide an Escalation and A		
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.			
 The following reports are attached: Audit and Risk Committee meeting held on 25 April 2023 People <i>Committee</i> meeting held on 14 March 2023 			
Place and System Development Committee meeting held on 11 April 2023 Development Function on the start bald on 25 April 2022			
 Population Health & Patient Experience meeting held on 25 April 2023 System <i>Productivity</i> Committee meetings held on 2 May 2023 			
Action Required			
The board are asked to: • Note the contents of the Committee Escalation and Assurance Reports			
Conflicts of Interest:	No conflict identified		

Board Committees Assurance Report

Committee Escalation and Assurance Report – Alert, Advise, Assure			
Report From:	Audit and Risk Committee		
Date of Meeting:	25 April 2023		
Committee Chair:	Saqhib Ali		
Key escalation and c	Key escalation and discussion points from the meeting		
Alert:			
 Compliance with data security training was not yet at the standard required (100% for Board members and 95% for whole organisation). The Committee noted the actions in hand to address this. The length/volume of papers were not conducive with Committee members being able to provide assurance. The governance team were asked to review development of meeting packs to ensure key issues for attention were highlighted in short papers with detailed papers (where required) as an annex to the meeting pack. 			
Advise:			
 The Committee continues to keep oversight of the use of STWs, noting this month there were two related to extension of APMS contracts. The external auditors reported that to date, their audit of the draft statutory accounts for the three CCGs for April – June had not highlighted any weaknesses or material differences greater than reporting thresholds. Buckinghamshire CCG and the ICB had been selected for additional review through the National Audit Office as part of the Whole of Government Accounts submission. The 2023/24 Internal Audit Plan was agreed, and it was noted there was flexibility within this to refocus time if priorities/risks change. 			
Assure:			
 The Committee received reports providing assurance in the following areas: Development of Board Assurance Framework (BAF) and Corporate Risk Registers and the management oversight that was being embedded. The work of the Information Governance Steering Group (IGSG) was on track to ensure evidence collated and submitted for the Data Security and Protection Toolkit. The IGSG reported on incidents to the Committee who were assured that none have required reporting to the ICO or DHSC. Pharmacy, Optometry and Dental (POD) arrangements for delegation of Commissioning. The Committee: Noted the rating of substantial assurance for the review of the adequacy and effectiveness of financial controls and governance arrangements. Endorsed the extension of the POD governance arrangements with the other five SE ICBs until the end of June First draft Annual reports and annual accounts (in line with agreed approach) were shared. Assurance was received that these were prepared in line with guidance. These first drafts will be submitted to NHSE and Auditors and final drafts will be shared with the Committee at its June meeting. 			

- Internal Audit reported on progress in delivery of the 2022/23 Audit Plan; the two of the four completed audits had substantial ratings and two reasonable which was consistent with the stage of development of the ICB. On this basis the Head of Internal Audit Opinion would be positive with no issues to be reflected in the Annul Governance Statement.
 - The Counter Fraud workplan is progressing with a focus on proactive work and raising staff awareness (staff response to the survey had been very low). The Committee approved an updated Local Antifraud, Bribery and Corruption Policy.

Report From:	People Committee
Date of Meeting:	11 April 2023
Committee Chair:	Sim Scavazza

Alert:

• No matters arising.

Advise:

The April meeting received several updates on a range of issues. These included:

- A presentation on the workforce elements of the Joint Forward Plan.
- Sharing of a revised draft People Plan for discussion and further feedback.
- Ongoing work to build a bank of workforce intelligence for the ICS.
- Research commissioned by the ICS on cost of living jointly funded by BOB and Frimley ICB, that focuses on the identification of opportunities available to enhance the ICS's ability to attract, retain and deploy NHS workers in the light of high cost of living.
- A proposal for a Shadow Board Committee. This was agreed in principle on the basis that the ICB's new structure needed to be implemented and embedded before setting up a Shadow Board Committee.

Assure:

- Three meetings have now taken place with future meetings arranged bi-monthly.
- The Committee examined and discussed the status of Project Simul and gained assurance on the project and an update on the BOB ICB Staff Survey feedback.
- Work continues to progress with the People Plan. Feedback received through People Committee and through direct discussion with Provider Trust Chief People Officers (CPOs) to be incorporated into the draft and a revision to be discussed at June's People Committee meeting.
- The Committee noted the 2022/23 Health & Safety Annual Report and were assured that all Health and Safety arrangements were in place.

Committee Escalation and Assurance Report – Alert, Advise, Assure

Report From:	Place & System Development Committee
Date of Meeting:	11 April 2023
Committee Chair:	Aidan Rave

Alert:

• There were no items to alert the board to at this meeting.

Advise:

Joint Forward Plan and engagement strategy

- Useful update from Rob Bowen on progress with the joint forward plan (JFP) and the many discussions across place which continue to shape it.
- The workshop held on 24 March had identified four challenges for the system for 2023/24:
 I. Inequalities challenge: There would be a real focus on delivering the population health management capability to support decision making.
- II. Model of Care challenge: There would be a shift from an acute to a community focus. The new primary care strategy would support this and take account of the Fuller review recommendations for multi-agency teams working on urgent care demand and the provision of continuity of care to the elderly.
- III. User experience challenge (access and long waits): The acute provider collaborative would be looking to understand demand and capacity.
- IV. Sustainability challenge (people and finances): There would be a longer-term people plan and a financial strategy to understand the drivers of the deficit and look at other income streams.
- A key challenge emanating from the collaborative will be the governance and accountability structure which will need to be effective but also flexible enough to ensure that smaller groups are not excluded.

Review of Academic Health Science Network Annual Plan

- Paul Durrands gave an overview of the partnership between the ICB and the Academic Health Science Network (AHSN). He informed the committee that the AHSN portfolio of projects for 2023/24 aligned with the ICB's ambitions.
- Useful discussion at committee about ICB involvement and particularly about VCSE collaboration with the network.

Assure:

Place update - Berkshire West

- Sarah Webster (SW) gave a brief overview of work underway in Berkshire West in advance of a more comprehensive deep dive at the next meeting.
- Berkshire West remained a 'place of places'. There were three unitary authorities, one acute trust, and one community trust that worked across BOB and Frimley. It was necessary to recognise the three unitary authorities each had its own well-embedded systems.
- Work was underway to build trust between all the organisations through open conversations in order to further develop the proposal for one Place, rather than three.
- Committee members noted the good work that SW was doing to progress the idea of Place in Berkshire West.

Committee Escalation and Assurance Report – Alert, Advise, Assure		
Report From:	BOB ICB Population Health & Patient Experience	
Date of Meeting:	25 April 2023	
Committee Chair:	Margaret Batty	

Alert:

Junior Doctor Industrial Action (IA) 11 - 15 April was discussed in terms of impact on services, patient safety and experience. Circa 1000 junior doctors participated in strike action across primary and secondary care. Providers worked tirelessly to ensure Consultants, other senior doctors, nurses and allied health professionals covered critical services e.g. emergency department, intensive care, maternity. Inevitably there was some unavoidable disruption to inpatient surgery, day-case surgery, and outpatient appointments in the magnitude of around 8000 procedures and appointments. No immediate patient safety harm incidents were reported at the time, but the Chief Medical Officer (CMO) and Chief Nursing Officer (CNO) will carefully monitor delayed harm through System Quality Group e.g. due to long waits in the Urgent and Emergency Care (UEC) pathway or physical / psychological harm on a waiting list. The incident was managed by the BOB ICB Emergency, Preparedness, Resilience and Response (EPRR) team through a well embedded incident structure.

Advise:

The recent flood at the Royal Berkshire Hospital had resulted in an internal critical incident and mutual aid support from providers across the system, and neighbouring systems. Services had not been fully restored due to ongoing work to install temporary generators. The Committee asked for a review of the System estates and environment risks with a view to identifying where the greatest and aggregate of combined risks associated with the environmental issues faced by our services in relation to patient safety and experience are. The CMO and CNO have agreed to bring this review through to the System Quality Group for detailed discussion before bringing back to the Committee.

'The restoration of services' board assurance risk was reviewed and the Chief Delivery Officer (CDO) presented current performance data for discussion. A programme of 'deep dives' into the operational pathways aligned to UEC, cancer and elective recovery programmes will be scheduled for review and discussion at future Committees.

The Committee received an update on the progress of partners in their readiness for the implementation of the new Patient Safety Incident Response Framework (PSIRF).

The CNO and head of midwifery presented the proposed oversight and governance architecture for the recently published maternity and neonatal single delivery plan (SDP).

Assure:

Primary Care and Pharmacy / Optometry / Dentistry interim assurance report received. Full Q4 report expected at next PHPE Committee. Of note an extra 2,500 primary care appointments were injected into BOB system in the week post Easter and during IA to improve access for our population.

A verbal update was received on ICB Inequalities work to date including the proposals for schemes currently being reviewed at Place following allocation of monies. These will be presented in a paper to the the Q4 report in June PHPE Committee after review in BOB ICB Prevention and Inequalities Group on 27 April. Reference to the Board Assurance Framework (BAF) risk on Inequalities and controls / mitigations through development of ICB structures to support this work.

An exception report was received from the Clinical Programme Board covering Cardiovascular, Respiratory, Diabetes and Stroke Networks. No new items / risks to escalate. Planned deep dives will cover End of Life and Cardiovascular on the next PHPE Committee Agenda.

An update on the work underway to safely discharge the inpatients in Taplow Manor was presented in which it was noted that there were robust processes in place to mitigate the risks. It was expected that alternative places would be found for patients within the next two weeks.

Report From:	System Productivity Committee (SPC)
Date of Meeting:	Tuesday 2 May 2023
Committee Chair:	Tim Nolan

Alert:

SPC sees it as important to update the Board re items which are high risk in particular: Month 12 (2022/23 Year End) Finance position.

- Overall BOB System position continued to improve but still ended with a deficit for FY2022/23 of £30.6m (M10 forecast was -£44.0m).
- The ICB itself delivered a small surplus for FY2022/23 of £248k.
- Capital was underspent by £2.8m = 2.9% (M10 forecast was a £2.6m overspend)

Budget 2023/24 & the Operational Plan

- BOB Chief Executive Officer/Chief Finance Officer (CEO/CFO) and Team met with NHS England (NHSE) CEO & CFO and gained agreement to a BOB System breakeven plan in 2024/25 and that the System deficit position for 2023/24 will be circa £62.5 million subject to any final changes by the Final submission to NHSE on 4 May.
- In terms of a deficit plan this will trigger a controls regime overseen by the NHSE SE Region (rather than national oversight). These controls are yet to be determined.
- Region will want an end of May review of the System efficiency programme with expectation that there is a focus on the major areas of spend including Continuing Healthcare, medicines management etc. Jason Dorset (CFO of Oxford University Hospital) will continue to progress the Systems work on this and update the SPC (also see ICS Efficiency Collaboration Group comments in the Advise section below)
- Workforce growth from 2019/20 to 2022/23 recognised as a Key Line Of Enquiry for the System (as it is in many other Systems)
- There will be a further review of the System elective activity plans and relationship with the national Value Weight Activity target; Matthew Tait will lead on this for BOB.
- CFO and CEO will give a further update at the Board meeting.

Advise:

SPC is seeking further assurance and continues to monitor carefully:

Overall ICS Capital Plan

- it is important for future capital allocations that the ICS spends in line with its capital budget (the ICB itself spends very little capital c. 2% of the overall ICS budget).
- The SPC received a good overall briefing paper on the 2023/24 capital plan and overview of the 5-year trajectory.
- SPC was happy to see improved scrutiny of the Capital Plan but would like further assurance on the phasing of the plans and targets.
- SPC is also keen to see more clear alignment with the ICS Joint Forward Plan (JFP). CEO assured SPC that this is being developed as part of the co-ordinated JFP led Strategy Suite across BOB.

ICS Efficiency Collaboration Group (IECG)

- It is crucial that the BOB ICS continues to collaborate and work as a system to deliver improvements in productivity for our residents and taxpayers.
- The SPC received a good update on the early progress of the IECG which will be central to delivering this goal (we also will be updated at every SPC meeting hereafter)
- Jason Dorsett (Senior Responsible Officer) and Jamie Drake (Programme Director) outlined the structure, processes, and early thoughts regarding an initial eight possible projects for 2023/24 (these may still change)
- SPC was re-assured about the work to date but remains eager to see further confirmation of activity in line with the IECG plan and more broadly be assured that the requirements of residents are met (via alignment with the JFP) and that BOB can satisfy the requirements of NHSE SE Region oversight team (see Budget comments above)

Assure:

SPC has been assured by the reports presented to it relating to:

• System IT performance - the regular meeting update continues to show performance and satisfaction levels broadly meeting or exceeding SLA targets and expectations.