

BOARD MEETING

Title	Board Committees Assurance Report		
Paper Date:	04 January 2024	Meeting Date:	16 January 2024
Purpose:	Assurance	Agenda Item:	17
Author:	Ros Kenrick, Business Manager; 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>The following reports are attached:</p> <ul style="list-style-type: none"> • Audit and Risk Committee meeting held on 02 January 2024 • Place and System Development Committee meeting held on 12 December 2023 • Population Health & Patient Experience meeting held on 07 December 2023 • System Productivity Committee meeting held on 19 December 2023. There will be a verbal update from the meeting held on 10 January 2024. <p>There will be a verbal update from the ICB People Committee meeting held on 9 January 2024.</p>			
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 • Receive the Emergency Planning, Resilience and Response annual report 			
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:	2 January 2024
Committee Chair:	Saqhib Ali
Key escalation and discussion points from the meeting	
Alert:	
<ul style="list-style-type: none"> The Internal Audit progress report contained two final reports; whilst the one on System Partnerships resulted in a substantial assurance opinion the one for Public and Patient Engagement – Learning from Complaints which resulted in a partial assurance opinion. Other ICBs were seeing negative assurance opinions this year which reflects the level of maturity of their control environments and the effectiveness of processes. The Committee asked that the executive ensure there was a robust process in place to implement the agreed actions in a timely way. 	
Advise:	
<ul style="list-style-type: none"> There is now 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. A comprehensive report on a range of out-of-hospital Urgent and Emergency Care contracts was presented. This outlined context and the need to review and align many of these services. This would require some contract extension and the Committee noted that it would see these through the Single Tender Waiver (STW) report. 	
Assure:	
<p>The Committee received reports providing assurance in the following areas:</p> <ul style="list-style-type: none"> The framework to manage BAF and CRR is now in place. The ICB needs to focus on ensuring this is embedded and risk manage supports and informs our work in a dynamic way. Timelines and plans for development of the narrative elements of the annual report were shared giving assurance that content will comply with guidance and deadlines will be met. The Annual Report for the Emergency Planning Resilience and Response (EPRR) portfolio was received. This paper (Annex 1) presents the ICB's compliance position following the NHS England Core Standards for EPRR annual assurance process. The outcome of this self-assessment shows that against the 47 applicable standards, the ICB is 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 is therefore partially compliant. The Board is asked to receive the EPRR Annual report. A comprehensive Anticrime/Counter fraud progress report was considered giving assurance that the ICB was undertaking proactive and reactive work. The annual staff survey would be launched this week. 	

Annex 1

Emergency Preparedness, Resilience and Response (EPRR) End of Year Update to Audit and Risk Committee NHS England Core Standards for EPRR Statement of Compliance

Introduction

1. The NHS needs to be able to plan for and respond to a wide range of incidents and emergencies which could affect health or patient care. These could be anything from extreme weather conditions, an infectious disease outbreak, a major transport accident, a cyber security incident or a terrorist act. This is underpinned by legislation contained in the Civil Contingencies Act (2004), the NHS Act 2006 and the Health and Care Act 2022. These require NHS organisations, and providers of NHS-funded services, to show that they can deal with such incidents while maintaining services.
2. This programme of work is referred to in the health community as emergency preparedness, resilience and response (EPRR). New arrangements for local health EPRR form some of the changes the Health and Care Act 2022 made to the health system in England.
3. The Civil Contingencies Act (2004) (CCA) and the NHS England Emergency Preparedness, Resilience and Response Framework (2022) requires NHS organisations and providers of NHS-funded care to have plans and arrangements in place to respond to such incidents while maintaining services to patients.
4. Under the CCA, the NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (the ICB) is defined as a Category 1 Responder, meaning it is subjected to the list of statutory duties listed in the Civil Contingencies Act (2004) Contingency Planning Regulations (2005).
5. In addition to meeting the CCA legislative duties, the ICB is required to comply with guidance and framework documents, including but not limited to:
 - NHS England Emergency Preparedness, Resilience and Response Framework;
 - NHS England Core Standards for Emergency Preparedness, Resilience and Response;
 - NHS England Business Continuity Framework.
 - EPRR requirements laid out in the NHS Standard Contract
 - Minimum Occupational Standards for NHS Emergency Preparedness, Resilience and Response (MOS)
 - ISO 22301:2019 Security and resilience – Business continuity management systems

Progress on the ICB's 2022/23 Core Standards for EPRR Assurance

6. Firstly, we will provide an update on the progress against last year's outstanding standards. Four of the five Core Standards for which the ICB was partially compliant last year, are now fully compliant. One remains partially compliant this year.

No.	2022 Rating	2023 Rating	Title	Commentary
5	Partially compliant	Fully compliant	EPRR Resource	The EPRR team has recruited, through a mixture of permanent and fixed-term/secondments, to most roles in the team structure. There remains one frozen Band 7 EPRR Manager post within the team. NB. The EPRR team also hosts the management, coordination and administrative elements of the System Coordination Centre (SCC).
46	Partially compliant	Fully compliant	BIA Assessment	The EPRR team has worked with nominated directorate Business Continuity Leads to produce brand new Business Impact Analyses (BIA) and Business Continuity Plans for all Directorates, and strategically for the organisation as a whole.
48	Partially compliant	Partially compliant	Business Continuity Testing & Exercising	Following the above, a forward plan has been created to exercise each Plan and is scheduled for delivery over the next 6 months.
49	Partially compliant	Fully compliant	Data Protection Security Toolkit	The ICB is fully compliant with the Data Protection Security Toolkit.
52	Partially compliant	Fully compliant	BCMS Continuous Improvement Process	The new Business Continuity Management System (BCMS) Standard Operating Procedure (SOP) fully outlines the ICB's process for learning and continuously improving these arrangements.

The ICB's 2023/24 Core Standards for EPRR Assurance

7. As part of the national EPRR assurance process for 2023/24, the ICB has been required to assess itself against the NHS England Core Standards for EPRR.
8. The outcome of this self-assessment shows that against the 47 applicable standards, the ICB is:
 - fully compliant with 39 core standards
 - partially compliant with 8 core standards

No.	Title	Commentary
12	Duty to maintain plans: Infectious disease	<p>Whilst the ICB has demonstrated it can respond to infectious disease outbreaks over the past 12 months, further planning is required at both an ICB, ICS and LHRP/LRF level to progress this standard.</p> <p>An internal ICB workshop is planned between EPRR, Nursing (IPC) and Primary Care to progress this work in January 2024.</p>
13	Duty to maintain plans: New and emerging pandemics	<p>Further planning is required at both an ICB, ICS and LHRP/LRF level to progress this standard. This includes adopting learning from COVID-19 as well as awaiting refreshed national/regional guidance on the whole-NHS response plans for such events.</p> <p>Work is sequenced to commence by calendar Q2 2024 and is likely to take 4 months to complete.</p>
14	Duty to maintain plans: Countermeasures	<p>Further planning is required to develop a system level plan, including the ICB actions as part of a countermeasures capability.</p> <p>This should be completed by the end of calendar Q3 2024.</p>
15	Duty to maintain plans: Mass Casualty	<p>Following the publication of the new Regional Mass Casualty Framework, the ICB is working in partnership with other ICBs to refresh our local planning arrangements.</p> <p>This work is progressing through January and is scheduled for completion by end of calendar Q1 2024.</p>
21	Command and control: Trained on-call staff	<p>The ICB delivers and facilitates a suite of training for On-Call Staff. As of the time of this paper, there remain a small number of On-Call Staff who have not yet completed this mandatory training. This is more prominent in the Strategic On-Call roster than the Tactical On-Call roster.</p>

25	Training and exercising: Staff awareness & Training	The EPRR team aspiration is to create a page on our intranet spaces to host the relevant EPRR documentation, available to all staff. We require the relevant internal support to complete this.
26	Response: Incident Coordination Centre (ICC)	The ICB's Incident Response Plan refers to an ICC capability, and the ICB maintains an SCC from which the core capability would be derived. There is further work to be done to deliver a plan for establishing an ICC both physically and virtually.
48	Business Continuity: Testing and exercising	The ICB has recently deployed a suite of new Business Impact Analyses and Business Continuity Plans for each Directorate, and the organisation. Following this, a forward plan has been created to exercise each Plan and is scheduled for delivery over the next 6 months.

9. In line with the national NHS England Core Standards for EPRR assurance thresholds (see Annex 1), the overall rating of the ICB for 2023/24 is **Partially Compliant**.
10. Actions are in place to progress towards compliance for all these standards, over the next 12 months.
11. This self-assessment position has been shared formally with NHS England and the Thames Valley Local Health Resilience Partnership.

Training and Exercising

12. Over the past 12 months the EPRR team have created a new Induction Training programme for all On-Call colleagues. This has been rolled out successfully with good feedback.
13. The team have delivered one Principles of Health Incident Command session. This session covers the minimum occupational standards required by NHS England of those in health incident command positions, and forms part of our on-call mandatory training. We are at present working to develop this course and have two dates set for training delivery in the first half of 2024.
14. Of those colleagues currently on-call, the following are the internal mandatory training completion rates:
 - a) Strategic Directors: Induction 6/9 (66% compliance) and Principles of Health Incident Command 4/9 (44% compliance).
 - b) Tactical Directors: Induction 11/12 (92% compliance) and Principles of Health Incident Command 10/12 (83% compliance).
15. The final component of mandatory training is an externally delivered (via the Local Resilience Forum) course. Completion rates are currently very low, due to course availability, and spacing attendance at this course over a period of 24 months.

16. Between December and January, the EPRR team will be conducting a Skills and Knowledge Self-Assessment with all Directors On-Call. This will be used to determine confidence against the NHS England Minimum Occupational Standards, and in turn will support the internal training offer to our staff through 2024.
17. Through 2023 the ICB has participated in a range of exercises, both NHS and multi-agency. These include the following of note:
 - a) Exercise ALDEX – testing the response to an off-site incident at the Atomic Weapons Establishment.
 - b) Exercise HIERTAN – testing the response to a full-site hospital evacuation due to structural collapse.
 - c) Exercise BLUE NIMBUS – testing the response to large-scale flooding across the whole of Buckinghamshire, Oxfordshire and Berkshire.
 - d) Exercise FLAMINGO SILK – emergency communications cascade testing.

Incident Response

18. Through 2023 the ICB has directly responded, or supported the response to, a range of incident and emergencies, including, but not limited to:
 - a) Operation AVOCET – outage of the SCAS EPR system.
 - b) Full-site power loss at an acute hospital.
 - c) Partial-site power loss at an acute hospital.
 - d) Water disruption at a community hospital.
 - e) Water disruption in the community.
 - f) Information technology and communications disruption.
 - g) Loss of and/or disruption to critical service delivery.
 - h) Support to NHS Frimley ICB in Operation GOLDEN ORB.
 - i) Operation TARLAC.
 - j) Adverse weather.
 - k) Significant industrial action.

Lessons Identified

19. Progress has been made this year in improving the process the ICB has for learning from incidents, emergencies and exercises. Through the course of 2023 we have identified 73 lessons for onward consideration and management. There are several incidents and exercises that have not yet passed through the process of learning and assessment, and therefore the overall figure is likely to be higher when considering the totality of 2023 activity.

Summary

20. Whilst the ICB has self-assessed as Partially Compliant against the NHS England Core Standards for EPRR this year, which reflects a drop from Substantially Compliant last year, significant and notable progress has been made across the EPRR programmes of activity. Furthermore, appropriate actions are in place to progress all partially compliant standards towards full compliance over 2024, subject to any change in organisational structures, or significant incidents.

Annex 1: NHS England Core Standards for EPRR: Assurance rating thresholds

		Fully compliant	Substantially compliant	Partially compliant	Non-compliant
		100%	99-89%	88-77%	76% or less
Organisation type		Number of fully compliant core standards to achieve the percentage			
Acute providers		62	61-55	54-48	47 -0
Specialist providers		59	58-52	51-45	44-0
NHS ambulance service providers	Core Standards	58	57-51	50-44	43-0
	Interoperable Capability Standards	136	135-121	120-104	103-0
Community service providers		58	57-51	50-44	43-0
Patient transport services		42	41-37	36-33	32-0
NHS111		43	42-38	37-32	31-0
Mental health providers		58	57-51	50-44	43-0
NHS England region		47	46-42	41-36	35-0
NHS England national		45	44-40	39-34	33-0
Integrated care boards*		47	46-42	41-36	35-0
Commissioning support units		39	38-34	33-30	29-0
Primary care services – GP, pharmacy		44	43-39	38-34	33-0
Other NHS-funded organisations		48	47-43	42-37	36-0

Committee Escalation and Assurance Report – Alert, Advise, Assure	
Report From:	Place and System Development Committee
Date of Meeting:	12 December 2023
Committee Chair:	Aidan Rave
Key escalation and discussion points from the meeting	
Alert:	
<p>The issue of engagement with local authority partners was discussed, both specifically and generally. This remains a challenge for the ICB in terms of delivering against strategic goals and should be an area of priority for the Board.</p>	
Advise:	
<p>The definition of – and understanding of – the term ‘place’ was raised as part of the Buckinghamshire deep dive. How can the ICB through Place Directors better engage and articulate place? The possibility of place-specific resident stories was discussed – it would be interesting to get the Board’s views on this.</p>	
Assure:	
<p>An impressive overview of the work underway in Buckinghamshire was provided by Phillipa Baker.</p> <p>The 2024/25 system goals were discussed. This is a rather large list currently but is expected to be channelled to around half a dozen in the new year.</p> <p>The committee received an update on progress with the research engagement network grant. Spend and engagement are progressing well and feedback from the current engagement exercise is expected in January 2024.</p>	

Committee Escalation and Assurance Report – Alert, Advise, Assure	
Report From:	Population Health and Patient Experience Committee (PHPEC)
Date of Meeting:	7 December 2023
Committee Chair:	Margaret Batty
Key escalation and discussion points from the meeting	
Alert:	
<p>The Chief Delivery Officer presented the Operational Plan reset as a deep dive. The Committee noted that OUHFT were moving from Tier 3 to Tier 2 for cancer and elective care oversight and performance monitoring.</p>	
Advise:	
<p>The Committee were informed of the work underway to understand the impact of pausing the referral pathway into the adult ADHD pathway and noted the work in place to mitigate the quality and reputation impact of this pause.</p>	
Assure:	
<p>The Committee were assured by the information presented in the Children and Young People deep dive, which highlighted the progress made in the workstream and the plans and priorities for the next year.</p> <p>The Committee were also assured by the work underway in prevention and health inequalities programme.</p>	

Committee Escalation and Assurance Report – Alert, Advise, Assure	
Report From:	System Productivity Committee
Date of Meeting:	19 December 2023
Committee Chair:	Tim Nolan
Key escalation and discussion points from the meeting	
Alert:	
<ul style="list-style-type: none"> • The financial position of both the ICB itself and the System as a whole remains very challenging. • System reforecast submitted to NHS E on 22 November 2023 with increased system deficit £47.6m (later revised to £44.3m) compared to planned £20.5m deficit. • ICB forecast deficit of £22.5m (later revised to £26.3m) compared to plan of breakeven. • Best forecast for ICB £26.3m deficit and worst £40m deficit. • Risks to delivery of reforecast position. • S30 report from External audit and qualified value for money opinion for 2023/24 ICB accounts if breakeven not achieved by year end. • BOB ICS will also not achieve financial target driven mainly by ICB deficit. • Difficult decisions to be taken to improve sustainability with evidence to be sought in run rate in Q4. 	
Advise:	
Assure:	