

BOARD MEETING

Title	Board Committees Assurance Report		
Paper Date:	08 November 2023	Meeting Date:	21 November 2023
Purpose:	Assurance	Agenda Item:	16
Author:	Ros Kenrick, Executive Assistant; 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 24 October 2023 • Place and System Development Committee meeting held on 10 October 2023 • Population Health & Patient Experience meeting held on 24 October 2023 • System Productivity Committee meeting held on 7 November 2023 			
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 			
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:	24 October 2023
Committee Chair:	Saqhib Ali
Key escalation and discussion points from the meeting	
Alert:	
<ul style="list-style-type: none"> The Chair of the Committee to agree with the Chair of System Productivity Committee where a deep dive of CH (including the STW for agency staff) should be undertaken. 	
Advise:	
<ul style="list-style-type: none"> The Committee received a report on the planned update to the national NHS Oracle finance system. 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. Internal Audit report Place Partnerships had been issued in draft. Four reviews are in progress. The request to audit the Child Death Overview Process was supported by the Committee. The nationally mandated approach to the DSPT audit had highlighted that though there was a low level of risk there was a lack of evidence in the robustness of the information; the Director of Governance advised that work to address this to ensure there was more robust and systematic evidence was already in hand. Committee members had queried the IG implications of NEDs using their own computers/technology. The Chief Digital and Information Officer and Director of Governance had provided assurance that, given secure web access to Microsoft 365 and AdminControl this was in line with ICB policy. It was agreed it would be helpful to provide advice on good practice (for example reminder that nothing should be stored on the hard drive). 	
Assure:	
<p>The Committee received reports providing assurance in the following areas:</p> <ul style="list-style-type: none"> BAF and CRR development continues. The Committee confirmed that scrutiny should now move to highlighting risks for deep dive and confirmed support for a Board risk workshop to be undertaken in quarter 4. Internal Audit provided 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 2022/23/24 the focus would be on embedding. External Audit had 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. Planning was underway for the 2023/24 audit. 	

Committee Escalation and Assurance Report – Alert, Advise, Assure	
Report From:	Place and System Development Committee
Date of Meeting:	10 October 2023
Committee Chair:	Aidan Rave
Key escalation and discussion points from the meeting	
Alert:	
No items for alert.	
Advise:	
<p>The Committee decided that the forward plan should be reviewed in order to challenge itself going into year 2. As part of this, it was agreed that it should be aligned to the ICB operating model discussions about the relationship between system, place and provider collaboratives and the implementation of this work.</p>	
Assure:	
<p>Stephen Barnett, Director, Voluntary, Community and Social Enterprise sector (VCSE) Alliance and William Butler, Chair, VCSE Alliance presented a deep dive on the work of the VCSE across BOB and the Memorandum of Understanding between the ICB and the VCSE Alliance. They flagged some areas where there might be gaps but reported a good working relationship developing with the ICB.</p> <p>There was a second deep dive at this meeting on the Oxfordshire Place, with Dan Leveson, Oxfordshire Place Director reporting a well-established Partnership Board which had good representation from organisations across Oxfordshire.</p> <p>Paul Durrands, Chief Operating Officer of Health Innovation Oxford and Thames Valley, attended to give an update on the work of his organisation (formerly the Oxford AHSN). He commented that the Memorandum of Understanding between the two organisations was working well, and he appreciated the chance to attend these meetings several times a year and ongoing discussions with the ICB Strategy and Partnerships team. He was pleased to be involved in strategy development.</p>	

Committee Escalation and Assurance Report – Alert, Advise, Assure	
Report From:	Population Health and Patient Experience Committee
Date of Meeting:	24 October 2023
Committee Chair:	Margaret Batty
Key escalation and discussion points from the meeting	
Alert:	
Advise:	
<p>Special Educational Needs and Disability (SEND): The Committee was informed of the challenges and impact of the recent SEND inspection outcome in Oxfordshire, where the partnership had been judged by the Care Quality Commission (CQC) and Ofsted as having widespread and/or systemic failings in the delivery of SEND. The committee also noted the changes associated with the new inspection framework on the system. It was felt that it would be useful to take the matter to a Board development day in due course to build on the introductory session held with the board In March 2023</p> <p>Patient Experience: following the recent publication of the national inpatient and emergency department surveys, the committee were advised that patients were broadly satisfied with adult emergency department (ED) and acute inpatient services, noting that the longer length of time patients were spending in the adult ED in the Buckinghamshire Healthcare Trust was below expected. The Committee also noted the health inequalities dimension, unpaid carers support, nutrition and hydration elements of the report that will require further focus.</p> <p>The committee were advised on the work underway to progress and develop the primary care strategy and noted the quarter 2 primary care assurance report.</p>	
Assure:	
<p>Urgent and Emergency Care (UEC) and Winter Plan: The Committee took assurance from the information that BOB was 92 percent compliant on its winter plan and that because the national operational pressures escalation levels (OPEL) framework used only acute metrics, BOB had retained its own OPEL framework to run alongside the national reporting.</p> <p>Thirlwall Inquiry Trust Action Plans: The Committee had confidence that its trusts had good mechanisms in place to address the concerns raised by the cause of the Thirlwall Inquiry. The matter would be discussed at each of the tripartite meetings which were held with each trust individually and NHS England.</p>	

Quality Functions: The gap analysis presented gave assurance that work was being undertaken to continue to comply with recent guidance. The review mechanism will be via the Operational Quality Group and will be tabled bi-monthly to ensure progress against defined actions are being met.

The Committee took assurance from the Quality and Performance Report that all areas of the report were being progressed and monitored.

The committee were assured by the work underway to implement the patient safety incident response framework (PSIRF) and noted that the Oxford University Hospitals Foundation Trust (OUH) were the first trust across the system to implement the new framework in full.

Committee Escalation and Assurance Report – Alert, Advise, Assure	
Report From:	System Productivity Committee (SPC)
Date of Meeting:	7 November 2023
Committee Chair:	Tim Nolan
Key escalation and discussion points from the meeting	
Alert:	
<p>SPC sees it as important to update the Board on items which are high risk in particular:</p> <p>Month 6 Finance position.</p> <ul style="list-style-type: none"> Overall, the BOB System position shows a YTD deficit of -£59.1m, a variance to plan of -£34.9m. The Full Year forecast has been held on plan (i.e., a FY deficit of -£20.4m). Our understanding is that while the financial position is very concerning this is not an uncommon position across both the region and nationally. The variance was driven by: OUH over plan by £19.5m (M5 £30.4m), the ICB by £13.4m (M5 £12.6m), and RBFT by £3.5m (M5 £1.3m). BHT, BHFT and OH are reporting close to plan. Despite the ICB itself reporting a worsening position we continue to report a breakeven forecast outturn as per plan. The ICB is not able to change its forecast at this point in the year but we still expect this to be in the region of c£39m if no further mitigations were found. The drivers for the ICB variance to plan are broadly the same as previously i.e., Prescribing CHC, Mental Health and pay related costs (affected by Industrial Action) In addition, the Committee is seeking further detail on both non-pay spend (currently showing a deficit to plan of £20.2m) and agency spend (particularly in OH) The Board should note is that the Net Risk (after mitigations) has decreased to £59.8m from £99.8mm last month primarily driven by reductions to reported risk at OUH. At the November Board meeting, the CFO will give a further update on performance and feedback from NHSE communication due later this week. 	
Advise:	
<p>SPC is seeking further assurance & continuing to monitor carefully:</p> <p>ICS Efficiency Collaboration Group (IECG) Progress</p> <ul style="list-style-type: none"> The SPC received a further update from the IECG which will be central to the goal of delivering improvements in productivity for our residents and taxpayers. The initial 8 workstreams for 2023/24 are now show indicative savings identified of £22.9m 	

- This number grows to £45.5m identified over 5 years (with the potential to be still higher)
- It was noted that the IECG has made positive moves since the previous SPC to ensure that there are clear lines of communication with Provider Collaboratives and other existing working groups to avoid any overlap, confusion or duplication.
- Despite solid progress the Committee continues to want to monitor progress both around the actual firm delivery of the programs and to ensure that momentum is maintained.
- To this aim the SPC noted that the IECG must work hard to improve its profile with the System CEOs and other senior executives across the entire System.

System IT performance

- The Committee received the regular IT update which, continues to show performance & satisfaction levels broadly meeting or exceeding SLA targets.
- The Committee expressed concern that despite good contract management, the SLAs within the contracts are not necessarily either clear enough or stringent enough to meet users ongoing & future requirements. This will be reviewed as contracts come up for renewal.

Deep Dive Report – Medicines Management Workstream

- The Committee received an in-depth presentation outlining the programme structure, methodology and goals relating to the Meds Management programme.
- A comprehensive report outlining several very positive initiatives in 3 key areas of working at scale, clinical effectiveness and workforce transformation. Specifically, these include looking at standardising formulary between primary & secondary care, focussing on using biosimilars to reduce high-cost drug usage and transforming community pharmacies among others.
- These are delivering –savings of £5-7m from 2024/25, qualitative benefits for patients and identifying workarounds for certain challenges
- Due to national structural challenges and trends, over the short and medium term there is limited prospect of the budget being met.

Deep Dive Report – Procurement Programme

- The Committee also received an informative presentation outlining the programme structure, methodology, targets and progress to date relating to the System-wide Procurement plan. To date £7.5m benefit has been identified for a £1.5m investment.
- Collaborative working has improved and some significant “wins” have been delivered with all Trusts seeing benefits (e.g. stents standardisation)
- Some need for further alignment (or “encouragement”) is required to maximise opportunities (in one example only half of a £0.5m upside was secured due to reluctance to standardise products)
- Additional benefits are available through working more closely on non-clinical areas which remain somewhat behind clinical areas.

Assure:

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

Digital Priorities Update

- The report was positively received by the Committee and continued to show that the multiple projects are generally progressing positively.
- There was an update on the first BOB Digital & Data Summit with 200+ attendees and appears to have been a great success & cemented BOB as a leading Digital ICS. The plan is to regularly repeat this.
- Some suggestions for further scrutiny were fed back particularly by our advisor Haider Husain and the wider committee felt that more clarity is still required on both Patient Engagement Portals (PEPs) /NHS App integration and the EPR projects within the ICS.
- A Digital Strategy update presentation will be shared at the November Board meeting

Ophthalmology

- The Committee received a presentation outlining the new arrangements in ophthalmology provision in regard to the use of independent sector providers. While these changes may have a negative impact on the finances of the System and the impact on the training of more junior staff in the Trusts must be monitored the outcomes for patients via reduced waiting lists appear positive in the short-medium term.
- The Committee has requested deep dives into prescribing and medicines management in light of the overspends in these areas.