

BOARD MEETING

Title	Board Committee's AAA reports and Annual reports		
Paper Date:	2 September 2025	Board Meeting Date:	9 September 2025
Purpose:	Assurance	Agenda Item:	12c
Author:	<i>Kelly-Anne Sutherland, Senior Corporate Office Manager</i>	Exec Lead/ Senior Responsible Officer:	<i>Hannah Iqbal, Chief Strategy, Digital, Transformation Officer</i>
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 26 August 2025 and Annual report 24/25 System Productivity Committee meeting held on 28 August 2025 and Annual report 24/25 ICB People Committee meeting held on 23 July 2025 and Annual report 24/25. Population Health and Patient Experience Committee Annual report 24/25. Place and System Development Committee Annual report 24/25. 			
Action Required			
<p>The Board is asked to:</p> <ul style="list-style-type: none"> Note the content of the Escalation and Assurance reports. Note the content of the Annual Committee reports for 2024/25. 			
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:	26 August 2025
Committee Chair:	Saqhib Ali

Key escalation and discussion points from the meeting

Alert:

- The CFO confirmed that the new financial system ISFE2 (replacing the current Oracle finance system) was expected to be implemented on 1 October 2025. He mentioned significant national concern about the system but assured that it was still on track for the planned implementation date.
- The Committee noted a report on the NHS Shared Business Services control failures identified by the ISAE 3402 detailed in the Assurance report of the Independent Service Auditor for FY 2024/25. The report covers 42 ICBs and did not detail which specific ICBs were impacted.

Advise:

- The Committee approved an update to BOB ICB Standing Financial Instructions reflecting changes in procurement law.
- The Committee reviewed and approved continuation of the Risk Appetite.
- The Committee reviewed and approved continuation of the Strategic Objectives from 2024-25 and agreed the addition of a new Joint Strategic Objective, with Frimley ICB, of **‘Safe dissolution of the ICB and creation of the Thames Valley ICB’**.
- The Committee reviewed and noted eleven Single Tender Waivers approved by the CFO since the last Audit and Risk Committee meeting.

Assure:

- The Committee noted the following governance updates:
 - ICB Policy Controlled Document Review Group Update
 - Transition update including the establishment of the Set-up and Close-down governance programme work strand.
- The Committee noted the update from the Information Governance Steering Group.
- The Internal Audit programme was reviewed and the Committee agreed the updates recommended by the auditors following a risk-based review, with a particular focus around transition activities.

Committee Escalation and Assurance Report – Alert, Advise, Assure

Report From:	ICB People Committee
Date of Meeting:	23 July 2025
Committee Chair:	Sim Scavazza

Key escalation and discussion points from the meeting

Alert:

Transition Update

The committee were updated on the organisational design and change process, including alignment progressing across regional hubs, voluntary redundancy (VR) and mutually agreed resignation scheme (MARS). The timeline is thus pending due to financial clarity on VR funding and the legal risks around TUPE. NHS England approval is awaited on MARS submission.

Annual Staff Survey 2025

The committee noted the proposal not to run the annual staff survey. This change will affect the collection of WRES and WDES data, with a significant loss of qualitative insights. To mitigate this, quarterly pulse surveys and lighter-touch engagement methods are being explored. The ongoing collaborative work with regional OD leads was noted. A paper will be presented to the Board in September for decision on not to run the annual staff survey.

Advise:

OD support through change

The Committee acknowledged the OD support proposal, noting its endorsement by the Joint Transition Executive. External input from the Southeast regional team has eased internal pressures, with initiatives such as CV workshops, career planning, NHS Elect resources, and LinkedIn Learning enhancing career transition support. Despite the breadth of support, low staff engagement remains a concern. The Committee endorsed the concept of a "career station" model and the idea of a podcast series to inspire staff through personal career stories.

Assure:

Fit and Proper Persons Test

The committee was assured that adherence to the required process had been formally reported to NHS England and that the submission has been acknowledged by the South East Regional Director, providing assurance at regional level.

Policies x 2

The committee endorsed the following policies and are supportive of the next steps.

- Bullying and Harassment Policy
- Sexual Misconduct Policy

Health and Safety Annual Report

The Committee received the Health and Safety annual report, which outlined activity across BOB and the need for clearer accountability to mitigate safety risks.

Committee Escalation and Assurance Report – Alert, Advise, Assure

Report From: System Productivity Committee (SPC)

Date of Meeting: 28th August 2025

Committee Chair: Tim Nolan

Key escalation and discussion points from the meeting

Alert:

Operational:

Committee noted improved UEC performance, however, remains concerned about the cancer performance across the system but noted the increased activity and funding that is now in place to address the concerns. Nevertheless, the Committee is eager that Board receive a more detailed presentation on performance & mitigations with respect to cancer as a matter of urgency.

ISFE2:

Committee are particularly concerned around the new Oracle financial payments system (ISFE2) that is due to go live nationally on 1st October 2025.

Specifically, the concerns are:

- Confidence level that the system will actually go live in full on 1st October
- That data output & resulting payments on the 1st October will be accurate (rehearsals did not go smoothly)
- That the volume and quality of training being provided to our teams doesn't appear sufficient.

It was also noted that none of these issues are particular to BOB there appears to be widespread national concern in all three regards.

The Committee believe the Board should consider formal escalation to senior national NHSE/ DHSC management to support representations already made by the BOB Finance team regionally.

Advise:

Finance:

Committee noted that the system is on plan YTD and projected as our FOT, but notes this is versus a deficit plan. More specifically while the Committee was pleased to see a significantly more robust management of the CIPs program this year it continues to be concerned about challenging nature of the CIPs target within the ICB, particularly with regards to the level of unidentified CIPs. Additionally, the Committee pointed to the deviation from plan at the end of M4 regarding both for workforce levels and costs in various organisations. Specifically, it noted that the emergence of such variances was similar to last year, and LY by Q3/Q4 these had become a significant challenge for the System.

Assure:**Digital:**

Committee received a positive report from the DDaT team with good movement both towards alignment with the Model ICB digital approach and supporting the move to the new Thames Valley ICB. In both cases good collaborative working with system partners was evident. The Committee was also pleased to note that the digital maturity assessment and launch of the BHT electronic prescribing system has gone well. Finally, the Committee was happy to receive a positive update on the launch of the AI incubator, including the fact that the system is funding a dedicated resource in this crucial area moving forward.

AUDIT AND RISK COMMITTEE ANNUAL REPORT 2024/25

Introduction

1. As a formal committee of the Board with delegated authority, and in accordance with best practice, the Audit and Risk Committee presents its Annual Report. The report covers 1 April 2024 to 31 March 2025.
2. This report was considered at the Audit and Risk Committee meeting on 26 August 2025 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. An updated copy of the Terms of Reference of the Committee was agreed by the Board of the Buckinghamshire Oxfordshire and Berkshire West Integrated Care Board (BOB ICB) in April 2025.
4. The purpose of the committee is to provide assurance to the board on governance, risk management, and internal control processes. It also provides supporting governance and oversight by NEDs through triangulation at other board Committees.
5. The Committee's duty is to assure the board on:
 - a. Integrated Governance and System Risk
 - b. Internal Audit
 - c. External Audit
 - d. Other Assurance Functions (BOB ICB Policies)
 - e. Counter Fraud
 - f. Financial Reporting
 - g. Information Governance
 - h. Conflicts of Interest

Membership and Meetings

6. Six meetings were held in the reporting period, all were quorate. One meeting was split over two sessions due to the availability of the External Auditors.
7. The membership of the Committee comprises three non-executive directors and attendance was as follows:

Member	Attendance
Saqhib Ali (Chair), Non-Executive Director	6/6
Margaret Batty, Non-Executive Director	5/6
Aidan Rave, Non-Executive Director	4/6

8. The following Officers of the ICB attended the Committee during the year: Chief Executive Officer, Chief Finance Officer, Chief Medical Officer, Chief Nursing Officer, Chief Strategy, Digital and Transformation Officer and Director of Governance. In addition, the ICB's Internal Auditors (KPMG), 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 June 2024 meeting and was reviewed at the August 2024 meeting. The Committee's focus for 2024/25 was to seek assurance of implementation and embedding of the organisational governance systems and processes, and the outcome of the Change Programme.
10. *Governance structure and processes.* The Committee retained oversight of the overall governance structure and processes within the ICB and received assurance of:
 - a. Information Governance (IG) policies and culture within the ICB.
 - b. Single Tender Waiver (STW) management and process improvement.
 - c. Direction from NHSE on amendments to the model constitution received in July 2024, with the updated BOB ICB Constitution presented to Board in September 2024; and approved by NHS England in November 2024.
 - d. A review of the Safeguarding Children's and Adults Risk Policy was undertaken.
 - e. A review of the Annual Leave Policy was undertaken with the Commissioning Support Unit.
 - f. Agreed processes and procedures for the management of the in-housed Freedom of Information service function managed through 'Infreemation', a Software management application compatible with the requirements as set out in the FOI Act.
 - g. Subject Access requests enabling the ICB to deliver against its statutory requirements.
11. *Risk Management:* The Committee has overseen the continued development and embedding of the ICBs risk management process, supported by the RSM Risk Management tool (4Risk). Regular review and acknowledgement of the work being undertaken by risk owners and leads to align risk reporting at place and across the ICS; identify and articulating gaps in controls; mitigating risk in accordance with the organisation's risk appetite, and in line with BOB ICBs four core objectives and the six NHSE Oversight Framework Themes. This information is presented through regular review of the Board Assurance Framework and Corporate Risk Register, with risks requiring escalation due to severity or following a horizon scanning exercise, brought for oversight and assurance.
12. *Information Governance:* 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 work to evidence its Category 1 compliance with the requirements of the Data Security and Protection Toolkit due to be submitted by 30 June 2025. In 2024/25 the work focused on ensuring all processes were widely and systematically embedded and in preparation for the submission of the 2025 DSPT.

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 adherence to the process had continued to improve with a greater level of challenge from the committee and Finance team.
 - b. The ICB continued to prepare for the planned update to the national NHS Oracle finance system. This would introduce a no PO no Pay Policy from 1 Apr 25 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, with the Risk being recorded and managed as part of ongoing financial risk reviews.
14. *Annual report and Accounts for 2024/25.* Timelines and plans for the development of the annual reports and annual accounts were shared, giving assurance that the Committee members will have time for review and that submission deadlines will be met.
15. *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. Appointment of a new Internal Audit provider from April 24.
 - b. Joint development of an audit plan that included consideration of strategic risks and inherent risks, prioritising audit activity accordingly.
 - c. Ten internal audits were planned for 2024/25.
 - d. Nine internal audits for 2024/25 were reported to the Committee– of which one received a significant assurance opinion: four Significant Assurance with Minor Improvements and the two received a Partial Assurance with improvements Required opinion and two were unrated. Some control weaknesses were identified, and the agreed management actions will be implemented by the ICB.
 - e. As at 20 August 2025 there were 7 outstanding management actions from prior audit findings, two high priority, three medium priority and two low priority.
16. *External Audit:* The purpose of the external audit was to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error. The external audit team provided information and assurance to the Committee to complete the 2024/25 audits (as highlighted in paragraph 14) and provide an opinion against value for money and an audit of financial statements. This work was completed within Q1 of 2025/26.
17. *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. The BOB ICB Local Anti-Fraud, Bribery and Corruption Policy was thoroughly reviewed by the

external assurance provider. This work was concluded and approved by the committee in April 2025.

Review of Effectiveness

18. 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 August 2024 meeting. Findings resulted in nine recommendations which were made and progressed, including an update to the committee Terms of Reference.

Conclusion

19. The Annual Report provides a summary of the Audit and Risk Committee's work in the period April 2024 to end March 2025. 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 2024/25.

Looking Forward

20. The NHS England disbandment announcement and changes to ICBs resulted in an uncertain future over 2025/26. The Committee's focus was therefore on ensuring continued compliance with statutory requirements and successful transition. As we cluster, we are looking to identify the relevant risks for the new Thames Valley ICB, and harmonise and co-ordinate Internal Audit, External Audit and Counter Fraud activities.

PEOPLE COMMITTEE ANNUAL REPORT 2024/25

Introduction

1. As a formal committee of the Board and in accordance with best practice, the People Committee presents its Annual Report. The report covers the twelve-month period from 1 April 2024 until 31 March 2025.
2. This report was considered at the People Committee meeting on 2 September 2025 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 reviewed as part of a governance review supported by the Good Governance Institute. Consideration was given to amalgamating the committee with the Remuneration Committee however, due to the significant changes anticipated to ICB structures, this change was not progressed during this reporting period.
4. The purpose of the Committee is to provide assurance to the Board on the delivery of the functions of the ICB relating to the organisation's people (workforce) strategy, planning and delivery.
5. The Committee's duty is to assure the board on:
 - The ICB People Strategy and Plan including implementation of people priorities aligned to the NHS People Plan and People Promise.
 - Provide oversight of the development of the ICBs People Strategy and seeking assurance on workforce recruitment, development and retention plans.
 - Seek assurance on the risks in the implementation of the People Strategy and determine the approach to providing effective oversight of the mitigation of those risks.
 - Seek assurance from the executive regarding the delivery of the ICB People Strategy and Plan.
 - Assure the ICB workforce matters, such as compliance with requirements related to Equality, Diversity and Inclusion, Health and Safety, Workforce policies and all other workforce matters.
 - Receive annual reports on ICB health and safety, equality and diversity (WRES, WDES, Gender Pay Gap), pay in/equalities, and approve their publication on the ICB's website, where appropriate.

Membership and Meetings

6. Five meetings were held via MS Teams, of which all were quorate.
7. The membership of the Committee comprises:
 - Non-Executive Director (Committee Chair)
 - Non-Executive Director
 - Chief Executive Officer
 - Chief People Officer
 - Chief Finance Officer

8. Attendance at the People Committee Meetings between 1 April 2024 to 31 March 2025, are reported as follows:

	May 2024	July 2024	September 2024	January 2025	February 2025
Sim Scavazza Committee Chair and Non-Executive Director, BOB ICB	Y	Y	Y	Y	Y
Tim Nolan Non-Executive Director, BOB ICB	Y	Y	Y	N	Y
Nick Broughton Chief Executive Officer, BOB ICB	N	Y	Y	Y	Y
Caroline Corrigan Interim Chief People Officer, BOB ICB	Y	N	Y	N/A	N/A
Sandra Grant Chief People Officer, BOB ICB	N/A	Y	N/A	Y	Y
Matthew Metcalfe Chief Finance Officer, BOB ICB	N	Y	Y	N	N/A
Alastair Groom Chief Finance Officer, BOB ICB	N/A	N/A	N/A	N/A	N
Catherine Mountford Director of Governance, BOB ICB	Y	Y	N/A	N/A	N/A
Clare Doble Deputy Director of Governance, BOB ICB	N/A	N/A	Y	N	Y

9. Other attendees over the year included the Senior Corporate Governance Manager, Senior Corporate Office Manager, Interim Director of Organisational Development, Senior Equality Diversity and Inclusion Programme Manager, Diverse Ability Network Co-Chair, CARE Network Co-chair, Head of Health Promotion, Ill Health Prevention, personalised Care and Infection, Prevention and Control, LGBTQ+ Network Co-chairs, Senior People Business Partner, Senior HR Project Manager and the FTSU Champion.

Duties within Terms of Reference

10. A forward plan aligned to the organisation's business cycle was presented to the May 2024 meeting. The Committee's focus for 2024/25 was to gain assurance around the management of the 2024 Change Programme, including organisational development support for those staff who remained in post. The Freedom to Speak Up annual report was considered at the February 2025 meeting and a lot of work had been undertaken to ensure that the system was fit for purpose and that the ICB ensured it was an accessible pathway for feedback, with all Guardians being appropriately trained and supported.
11. Provide oversight of the development of the ICBs People Strategy and seeking assurance on workforce recruitment, development and retention plans.

12. Seek assurance on the risks in the implementation of the People Strategy and determine the approach to providing effective oversight of the mitigation of those risks.
13. Seek assurance from the executive regarding the delivery of the ICB People Strategy and Plan.
14. Assure the ICB workforce matters, such as compliance with requirements related to Equality, Diversity and Inclusion, Health and Safety, Workforce policies and all other workforce matters.
15. Receive annual reports on ICB health and safety, equality and diversity (WRES, WDES, Gender Pay Gap), pay in/equalities, and approve their publication on the ICB's website, where appropriate.

Review of Effectiveness

16. The Committee undertook a self-assessment of its processes and effectiveness with information collected via an electronic survey issued on 13 November 2024 to all People Committee members and attendees. The findings of the survey were presented to the meeting held on 2 Jan 25. Four recommendations were provided to enhance the effectiveness of the committee:
 - **24/25 Recommendation 1:** A review of the committee's agenda and cycle of business (forward planner) to ensure that it has been structured to cover objectives.
 - **24/25 Recommendation 2:** Review of the People Committee terms of reference to ensure that it is meeting its duties as described and also review of membership and meeting dates/times in line with the corporate calendar to maintain attendance.
 - **24/25 Recommendation 3:** Further work is required to improve the committee understanding of where it receives key sources of assurances and also improve the quality of the papers received.
 - **24/25 Recommendation 4:** Further work could be undertaken to ensure that the committee is clear about its role in relationship to other committees.
17. As noted above the review of the Terms of Reference of the committee was put on hold pending organisational change within NHS England and ICBs.

Conclusion

18. The Annual Report provides a summary of the People 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 People Committee has effectively discharged its responsibilities for 2024/25.

Looking Forward

19. The NHS England disbandment announcement and changes to ICBs resulted in an uncertain future over 2025/26. The Committee's focus was therefore on ensuring continued compliance with statutory requirements and successful transition.
20. The Committee is focused on the impact on staff, their wellbeing and performance of duties in the current climate and is monitoring the support

packages that are being offered to all staff. The Committee will continue to seek assurance that learning from the 2024 Change Programme will be incorporated into any future work and will also ensure compliance by signing off updated workforce policies for clarity and best practice.

POPULATION HEALTH AND PATIENT EXPERIENCE COMMITTEE ANNUAL REPORT 2024-25

Introduction

1. As a formal sub-Committee of the Board and in accordance with best practice, the Population Health and Patient Experience Committee (PHPEC) presents its 2024-25 Annual Report. The report covers a 13-month period from 1 April 2024 until 31 April 2025.
2. This report is provided to the Board to deliver 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 again reviewed on 24 October 2023.
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. Seven meetings were held in the period; all were quorate and held via MS Teams.
7. The core membership of the Committee comprises of:
 - Non-Executive Director (Committee Chair)
 - Chief Medical, Nursing and Delivery Officers
 - Director of Primary Care
 - Independent Clinical Advisor
 - ICS Lead on Equalities
 - A Director of Public Health
 - A Healthwatch representative

8. Attendance has been as follows:

Attendees	23/04/24	25/06/24	27/08/24	22/10/24	03/12/24	25/02/25	16/04/25
Daniel Alton, Chief Clinical Information Officer, BOB ICB	Y	N	N	N	Y	N	N
Margaret Batty, Non-Executive Director, BOB ICB (Chair)	Y	Y	Y	Y	Y	Y	

Heidi Beddall, Deputy Chief Nursing Officer / Director of Quality, BOB ICB	Y	Y	Y	Y	N	N	N
Shairoz Claridge, Deputy Director of Clinical Programmes (LTCs), BOB ICB	Y	Y	Y	Y	Y	Y	Y
Rachael Corser, Chief Nursing Officer, BOB ICB	Y	Y	Y	Y	Y	Y	Y
Rachael De Caux, Chief Medical Officer, BOB ICB	Y	N	N	Y	N		
George Gavriel, ICB Board Partner Member (Primary Medical Services)	Y	N	Y	Y	Y	Y	N
Steve GoldenSmith, Head of Prevention & Health Inequalities, BOB ICB	Y	N	Y	Y	Y	N	Y
Abid Irfan, Deputy CMO and Director of Primary Care, BOB ICB (or deputy)	Y	Y	Y	Y	N	Y	N
Karl Marlowe, Medical Director Oxford Health NHS Foundation Trust	N	N	Y	Y	Y	N	N
Zoe McIntosh, Chief Executive Healthwatch Buckinghamshire	Y	N	Y	Y	N	Y	Y
David Munday, Director of Public Health, OCC (or deputy)	N	Y	Y	Y	Y	Y	N
Raju Reddy, Clinical Lead for TVPC, BOB ICS	Y	N	N	N	N	N	N
Ben Riley, Chief Medical Officer, BOB ICB							Y
Rashmi Sawhney, Clinical Lead Inequalities, BOB ICB	N	N	N	N	N	N	N
Sim Scavazza, NED and Deputy Chair, BOB ICB	Y	Y	Y	Y	Y	Y	Y
Matthew Tait, Interim Chief Delivery Officer, BOB ICB	Y	N	Y	Y	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*: The Committee received regular updates relating to clinical programmes, quality and performance, all-age safeguarding, mental health services, urgent and emergency care, all-age continuing healthcare, clinical effectiveness, digital programmes, and primary care including pharmacy, optometry and dental services.
- b. *Population Health Management (PHM)*: The Committee received reports relating to patient feedback and complaints, personalised care, weight management, cardiovascular disease prevention, paediatric audiology, diagnostic services, plans to address the variation across health inequalities and access to care.
- c. *Governance*: Committee members regularly discussed the Committee's effectiveness, quality and performance risks, the quality strategy and the quality aspects of the Integrated Care System's Joint Forward Plan.

Review of Effectiveness

10. As part of the ICB Board's ongoing review of its effectiveness, including the delegation and functioning of its Committees and Executives, the Acting Chair and Director of Governance attended at least one Committee meeting.
11. The Committee continued to include a standing agenda item at each meeting to reflect upon its own effectiveness.

Conclusion

12. The Annual Report provides a summary of the PHPEC's work in year. The Committee has complied with its Terms of Reference and Business Cycle. It is the opinion of the Members that the PHPEC effectively discharged its responsibilities for 2024/25.

Looking Forward

13. The NHS England disbandment announcement and changes to ICBs resulted in an uncertain future over 2025/26. The meeting on 16 April 2025 marked the final sitting of the PHPEC, ahead of its anticipated transition to a Quality Committee, this was later adjusted to ensure alignment with Frimley ICB as part of the wider organisational changes. It was agreed that Population Health should become a core theme within the Quality Committee, and that Committee will be closely aligned with the ICB's System Quality Group (SQG) as required by the National Quality Board.

PLACE AND SYSTEM DEVELOPMENT COMMITTEE ANNUAL REPORT 2024/25

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 2024 until 31 March 2025.
2. This report is provided to the Board to deliver assurance that the Committee has been operating effectively and in accordance with its Terms of Reference (ToR).

Overview of Committee

3. The ToR were reviewed at the Committee meeting held on 9 April and 11 June 2024. Over the year there was debate over the form of the committee going forward but its core purpose, ensuring integration and collaboration in the care system, remains critical. A workshop session was held to review the Forward Plan in April 2024.
4. 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.
5. 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 manager

Membership and Meetings

6. Five meetings were held in the period all were quorate and held via MS Teams.
7. The membership of the Committee comprises:
 - Aidan Rave, Non-Executive Director (Committee Chair)
 - Non-Executive Director or Chair of ICB
 - Director of Strategic Delivery and Partnerships
 - Voluntary Sector Representative
 - ICB NHS Trust/Foundation Trust Partner Member (currently vacant)

8. Attendance at the meetings between 1 April 2024 to 31 March 2025, are reported as follows:

		9 Apr 2024	11 Jun 2024	8 Oct 2024	10 Dec 2024	18 Feb 2025
Aidan Rave	Non-Executive Director, BOB ICB (Chair)	✓	✓	✓	✓	✓
Ansaf Azhar	Director of Public Health & Wellbeing, Oxfordshire County Council	✓	✓	✓	x	x
Philippa Baker	BOB ICB Place Director – Buckinghamshire	✓	✓	✓	x	x
Stephen Barnett	Alliance Director, BOB VSCE Health Alliance	x	x	✓	x	x
Nick Broughton	Interim CEO, BOB ICB	x	✓	x	x	x
William Butler	BOB VCSE Health Alliance Chair	✓	✓	x	x	x
Hannah Iqbal	Director of Strategy and Partnerships, BOB ICB	✓	✓	x	x	x
Daniel Leveson	BOB ICB Place Director – Oxfordshire	✓	✓	✓	✓	x
Sim Scavazza	Acting Chair, BOB ICB	✓	✓	✓	✓	✓
Matthew Tait	Chief Delivery Officer, BOB ICB	✓	✓	✓	✓	✓
Sarah Webster	BOB ICB Place Director – Berkshire West	✓	✓	x	x	x

Duties within Terms of Reference

9. The Committee has a forward plan, aligned to the organisation's business cycle.

10. 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. A mental health provider collaborative deep dive was held in the meeting in October 2024. A deep dive into Specialist Commissioning was undertaken in December 2024. Pulse verbal updates were provided during each meeting for the following:

- Oxfordshire Place
- Berkshire West Place
- Buckinghamshire Place

11. System Development: The committee has maintained an overview of the inevitable tensions and risk associated with the development of partnerships across places and the system. It is clear that further work is required to ensure that the maturity continues and explicit actions needed to demonstrate commitment to place-based partnerships. Focus should also remain on the bandwidth of executive sponsors to effectively sustain relationships and lead at place level, given their expanded roles.

In structural terms, the delegation and alignment of the budgets with local authorities was discussed and has been subject to ongoing consideration by the committee.

Further progress has been made through 2024/25, but many operational risks including hospital discharge and flow management, continue to be a challenge.

The governance model requires further refinement to ensure impact and efficiency at scale.

12. An overview of the principal risks considered by the committee include:

- Lack of cohesion between ICB and local places could hinder decision-making and resource utilisation.
- Risk of funds spread thinly across multiple projects with insufficient focus on impactful, systemic changes.
- Without adequate delegation and trust, local authorities may struggle to address health inequalities and achieve prevention initiatives effectively.
- Perceived failures in prioritising place-based partnerships may lead to further strain with stakeholders, risking the ICB's reputation.

Review of Effectiveness

13. The Committee reviewed its effectiveness, with questionnaires being sent to members to seek their views. Committee members noted that while valuable discussions occur, the committee has yet to fully define its role or establish a clear sense of direction. Key recommendations include revisiting foundational principles to clarify objectives and align the committee's structure and function accordingly. There was consensus that the committee plays a crucial role in addressing system and place issues, providing unique insights and oversight that would otherwise be absent.

14. Members emphasised the importance of maintaining the committee but adapting its format and approach to ensure it fulfils its purpose effectively.

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 2024/25, but further work is required to develop the committee in line with the comments above.

Looking Forward

16. The NHS England disbandment announcement and changes to ICBs resulted in an uncertain future over 2025/26. The Committee's focus was therefore on ensuring continued compliance with statutory requirements and successful transition.

SYSTEM PRODUCTIVITY COMMITTEE ANNUAL REPORT 2024/25

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 period from 1 April 2024 and 31 March 2025.
2. This report was considered at the System Productivity Committee meeting on 28 August 2025 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. Six meetings were held either via Microsoft Teams or in person at venues across Buckinghamshire, Oxfordshire, and Berkshire West, of which all were quorate.
7. The membership of the Committee comprises:
 - Non-Executive Director (Committee Chair)
 - Non-Executive Director
 - Advisor (vacant since the departure of Haider Husain on 30th June 2024)
 - 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, as non-voting attendees, to attend meetings of the Committee.

9. Attendance at the System Productivity Committee Meetings are reported as follows:

	May 2024	July 2024	September 2024	November 2024	January 2025	April 2025
Tim Nolan Committee Chair and Non-Executive Director, BOB ICB	Y	Y	Y	Y	Y	Y
Saqhib Ali Non-Executive Director, BOB ICB	Y	Y	Y	Y	Y	Y
Matthew Metcalfe Chief Finance Officer, BOB ICB	Y	Y	Y	Y	Y	
Alastair Groom Interim Chief Finance Officer, BOB ICB		Y	Y	Y	Y	Y
Matthew Tait Chief Delivery Officer, BOB ICB	Y	A	Y	Y	Y	A
Victoria Otley-Groom Chief Digital and Information Officer, BOB ICB	Y	A	Y	Y	Y	A
Haider Husain Advisor, BOB ICB	Y					

10. Other attendees over the year included the Chief Executive Officer, Chief Medical Officer, Chief Pharmacist, Chief Nursing Officer, Director of Governance and other members of the finance & contracting, and digital & 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 ICB financial report. In November 2024 the Committee received a 2025/26 Planning process update, in February and April 2025, the Committee reviewed the Finance Recovery Plan, and in April 2025 received an update from the CFO following the System Plan Assurance Meeting with NHSE region.
13. *Performance against the delivery of the ICB's Strategy and Operational Plan:* Productivity metrics were discussed at each meeting. In September 2024, there was a Workforce Review deep dive.
14. *System Oversight Framework:* The Committee receives regular reports on the cost improvement plans for the ICS within the ICB and ICS financial reports and CFO verbal overlay. Outside the formal Committee meetings, the Chair and the Non-Executive Member of the Committee also discharged some of their duties in Q3 and Q4 by attending a number of the Financial Oversight Meetings held with BOB ICS Trusts senior management.
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).

Review of Effectiveness

16. A governance review was undertaken to consider the outputs of each of the BOB ICB committees. The outputs of the review had been put on hold pending wider organisational changes. The System Productivity Committee's role over the year had focussed on financial turnaround in addition to the responsibilities set out in the Terms of Reference.

Conclusion

17. 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 2024/25.

Looking Forward

18. The NHS England disbandment announcement and changes to ICBs resulted in an uncertain future over 2025/26. The Committee's focus was therefore on ensuring continued compliance with statutory requirements and successful transition. As we cluster, we are looking to identify the relevant risks for the new Thames Valley ICB.