

BOARD MEETING

Date of Meeting: 17 January 2023	Agenda item: 07
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Title of Paper: Chief Executive and Directors Report

Paper is for:	Discussion		Decision		Information	✓
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<p>Executive Summary and Implications</p> <p>This report provides an update for the Board on key topics and items for escalation since the meeting in public on 18 November 2022 and ensures the breadth of Executive portfolios are covered.</p>
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<p>Action Required</p> <p>The Board is asked to note this update.</p>
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Date and Name of Committee at which Paper Reviewed:
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Authors: Steve McManus, Interim Chief Executive, and the Executive Team
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Date of Paper: 09 January 2023

Conflicts of Interest	
This report contains information relating organisations led by members of the Board. The perspective of these members is an important aspect for enable the Board to focus on where the ICB (Integrated Care Board) and system contribute to improvement.	
No conflict identified	
Conflict noted: conflicted party can participate in discussion and decision	
Conflict noted, conflicted party can participate in discussion but not decision	✓
Conflict noted, conflicted party can remain but not participate in discussion	
Conflict noted, supported paper withheld from conflicted party e.g., pecuniary benefit	
Conflicted party is excluded from discussion	

CHIEF EXECUTIVE AND DIRECTORS' REPORT

Context

1. This report aims to update the Board on key topics of relevance in the Integrated Care System (ICS) and items for escalation across the breadth of Executive portfolios.
2. We have begun the development of this report to reflect a wider system perspective. Feedback is welcomed so this report may be iterated to fit with the needs of the Board.

System working - overview

3. The last two months have been challenging as the system has worked together to maintain safe services during industrial action and to manage sustained periods of increased demand.
4. The Royal College of Nursing (RCN) members at Oxford Health, Oxford University Hospitals (OUH) and Royal Berkshire Foundation Trust (RBFT) took strike action on 15 and 20 December and first reflections on impact are:
 - Thanks to significant preparation to mitigate the impact of the industrial action, the Trusts were able to maintain safe services.
 - Each Trust had an ICB director supporting with escalations throughout the course of the day.
 - Staff working in clinical areas across the Trusts were visited, while those on the picket lines (in -9 degrees on 15 December) were also supported.
 - Local Trusts worked hard to minimise the impact on planned care though there were some cancellations of outpatient, inpatient and diagnostic appointments.
5. On 21 December GMB staff at South Central Ambulance Service (SCAS) took strike action. The next scheduled strike date for the GMS is 11 January. The majority of the GMB members in SCAS work within Patient Transport Services in Surrey and Sussex, therefore, whilst working closely with SCAS, little impact is anticipated for the BOB system.
6. The Executive team took part in a Q2 ICB oversight meeting with NHSE Regional team on Tuesday 6 December. Discussion took a broader focus on:
 - How the ICB is developing its structures, governance, plans for senior/exec appointments
 - Developing work on health inequalities, Continuing Health Care transformation, digital capability, primary care development
 - Strategic focus regarding draft Integrated Care Partnership (ICP) strategy, development of place-based partnerships, provider collaboratives
 - Current performance across access standards, finance and quality governance
7. As the CEO I have continued to meet with partners in Local Authorities, Trusts and with MPs. There is much commonality in the main issues/themes raised, which included the development of place and place-based partnerships, primary care access and facilities, the emerging ICP strategy, and local government relationships. Our Place Directors attended relevant meetings and are making real in-roads into place-based relationships locally.

Partnerships

Local authority areas of focus

8. In line with national experience, all areas are seeing a significant increase in people-based demand including children referred through the multi-agency safeguarding hub, SEND volume and work linked to numbers of people requiring an adult social care service. In addition, challenges around refugees and unaccompanied asylum-seeking children with a numerical target being set for all places linked to accommodating refugees.
9. Council elections (May) -preparations are underway within certain local authorities as council elections are due to be held for some upper tier and lower tier councils in the spring. In BOB this includes Cherwell, Reading, South Oxfordshire, Vale of White Horse, West Berkshire, West Oxfordshire and Wokingham.
10. Workforce -an area of shared challenge across local government and health is workforce availability for service delivery (along with in the case of local government) planners and solicitors.
11. The Local Authority budget round for 2023/24 intensifies over this next period into February when councils will agree their budget via full council meetings.
12. The ICS has been allocated a total of £12.235m from the national Discharge Fund, with £7.735m allocated to the ICB and the rest directly to local authorities (LAs). We submitted our joint spending plans with each of our five LAs on 16 December 2022. There is a requirement that this funding is managed via the Better Care Fund.). The submitted plans recognise that LAs were already delivering service more than base funding with the need to address specific areas where our residents are facing worsening delays. Given the pressures on the system the use of these funds and strong local partnerships are key to ensuring we maximise discharges to support urgent and emergency care (UEC).
13. The Voluntary, Community and Social Enterprise (VCSE) sector are important partners for achieving the ICS goals. William Butler the Chair of the BOB VCSE Alliance, Katharine Barber, CEO, Home-Start Oxford and Emily Lewis-Edwards, Joint CEO, Community First Oxfordshire joined us at a Board workshop to share information about the local sector and their views on how they can help us deliver and what are some of the opportunities and challenges. It was a stimulating session which left us with much to think about and we need to consider how we take this forward to enable working with VCSE to be embedded in our ways of working. We are holding a joint workshop (attended by non-executive and executive members of the ICB) with the BOB VCSE Alliance in March to continue to build this relationship.

Development of provider collaboratives and Place Based Partnerships

14. OUH, RBFT and Buckinghamshire Healthcare NHS Trust (BHT) have developed a Memorandum of Understanding (MOU) as a first step in developing the Acute Provider Collaborative (APC). The APC partners have agreed to work together in a cooperative and coordinated manner to achieve shared priorities that ultimately benefit the Buckinghamshire, Oxfordshire, and Berkshire West Integrated Care System (BOB ICS) and wider population served, whether directly or indirectly. The APC will develop a work plan for 2023/24 and this will include development of governance arrangements. Current priorities are recovery of elective services, digital alignment and efficiencies within corporate services.

15. Berkshire Healthcare NHS Foundation Trust (BHFT) and OH have developed collaborative arrangements for some specialised services (including Tier 4 child and adolescent services, forensic service and adult eating disorder services). Work is ongoing to consider how these arrangements can be used for delivery of a wider set of services to the BOB population.
16. Through the work of the Place Directors, we are advancing arrangements for how Place Based Partnerships (PBPs) will function and working with Place colleagues around local delegation and accountability for service commissioning and resource allocation. As we further develop the ICB structure we are ensuring that the ICB at place has the capacity and capability to support the work of PBPs. A formal position on the development of PBPs will be presented to the Board in March.

Integrated Care Board (ICB): Director Updates

People and Organisational Development

17. The proposed ICB structures have been finalised by the executive team. Staff consultation started on 10 January 2023 and runs until 6 February. We will carry out the changes in two phases; first, we want to ensure all our current staff have a clear role in the organisation; second, we will fill new roles subject to availability of funding. This exercise has allowed us to take a view on the staff size and focus of other ICBs. We have a significantly smaller whole time equivalent size compared with other ICBs and we will review this within the next funding round to ensure we have key functions so we can carry out our work.
18. The People Committee held its inaugural meeting on 24 November and again on 10 January 2023. An update will be given under Item 14.
19. The improvement work is continuing in SCAS with a range of project work aimed at both improving culture and leadership within the organisation as well as the operational aspects of the work. NHS England are leading this.
20. We are progressing the recruitment to our remaining executive positions including the Chief Executive Officer (CEO). All appointment processes will involve our partners in stakeholder panels and the interview panels. The outline timelines are:
 - CEO: Recruitment agency in place to support process. Advert to go live in mid-January with assessment events late February/early March and selection panel mid-March.
 - Executive positions (Chief Delivery Officer, Chief Digital and Information Officer, Chief People Officer and Director of Strategic Delivery and Partnerships): Recruitment agency support in process of being sourced. Outline timetable is for adverts to go live in early February with assessment events early March and selection panels at the end of March.

Strategy

21. The draft Integrated Care Strategy has been developed by the Integrated Care Partnership and is currently in a period of open engagement which can be accessed [here](#). This engagement activity is the first to be hosted on our new Engagement HQ platform, which can host consultations, discussion groups, surveys and more. We anticipate that the engagement will pick up feedback from both partners organisations and members of the public. The proposed ICB response is covered in more detail in Item 11 later on the agenda.

22. Guidance for development of the Joint Forward Plan was published on 23 December and our proposed approach to development of the first plans is covered in Item 12 later on the agenda.
23. The planning guidance for the NHS in England was published on 23 December 2022 and sets out areas of priority and performance expectations for 2023/24 together with system financial allocations that cover the next 2 financial years. This is covered in Item

Operational

24. The NHS remains under significant pressure at a national and local level given the challenge to recover services, deal with the pressure on the urgent and emergency pathways, the continuing impact of COVID-19, industrial action and the wider economic environment.
25. All our providers have been under sustained pressure for the last few weeks with the BOB system declaring OPEL level 4 for the first time on 30 December 2022. All our acute Trusts remain at escalated levels due to demand, workforce shortages and continuing COVID. The Chief Executive Officer, Chief Medical Officer and Chief Nursing Officer have visited all our acute Trust emergency departments this month and have seen at first hand the pressures colleagues have been under and the adaptations around patient care they have had to make. We wish to record our thanks for all they do.
26. The ICB is working with system partners during January and February to focus on maximising the capacity of virtual wards, increasing the capacity of primary and community services, including alternatives to ambulance arrivals at emergency departments and maximising discharges.
27. A new Urgent Care Centre (UCC) opened in Reading on 5 December. It is open seven days a week from 8am – 8pm all year including Bank Holidays. There are 100 appointments available each day at the centre in Broad Street Mall which is being operated by the HCRG Care Group. 50 appointments are available for walk-in patients and 50 appointments are for patients referred by their GP or the Emergency Department (ED) at the RBFT. The centre, which is GP led, treats minor illness - not minor injuries. It is being run for an 18-month pilot period and is aimed at easing pressure on GPs and ED, giving people more healthcare options in an easy-to-access town centre location. This joins the Horton Urgent Care centre in Banbury and the Urgent Treatment Centre at Stoke Mandeville Hospital and Wycombe General Hospital to improve same day access capacity.

Financial

28. As highlighted at the last meeting, continuing financial pressure over the summer had started to worsen the financial position but this has begun to stabilise. At the end of November, the ICS position is a £49.5m variance. We have continued to work closely with all our providers to manage the financial position and we provided an updated position to NHSE at a meeting with the national Chief Finance Officer just before Christmas. More detail is included in the Finance report.

Quality and Safety

29. As has been highlighted nationally, current invasive Group A streptococcus (iGAS) infection notifications have been unusually high over the last two months, particularly in children. Marked increases in scarlet fever notifications are also being seen. Understandably, parents are anxious, and we saw a huge increase in demand on 111, primary care, ED and secondary care. The ICB hosted a webinar in early December involving paediatricians from BHT, OUH, RBFT as well as representatives from primary care, SCAS and ED clinicians to provide support and advice re Strep A and the latest position; more than 850 people attended and the session received positive feedback.
30. There have been challenges in ensuring consistent service provision to the hotels set up to accommodate asylum seekers. We have been working closely with our colleagues at the Home Office and just before the Christmas break conducted a reassuring joint quality visit to one of the hotels. Following this we have continued to highlight the need for a senior clinical decision maker available to support the onsite nurses in unaccompanied asylum-seeking children accommodation. We are continuing to work with primary care providers on securing additional medical capacity but to no avail due to current pressures.

Primary Care

31. Demand for primary care remains extremely high with increased levels of respiratory illness and pressures associated with Strep A. The ICB is working to support practices to manage this demand including through funding for additional clinical capacity. Urgent Treatment/Care Centre and 111 assessment capacity has also been increased to help manage pressures. Wider work to improve access continues, including maximising the use of digital technology to enable practices to manage workload effectively, building the role of community pharmacy in supporting same day care and rolling out advanced telephony solutions.
32. Primary Care Networks across BOB continue to make good progress in appointing staff under the Additional Roles Reimbursement Scheme which provides funding for diversifying the primary care workforce to include paramedics, pharmacists, social prescribers, and others. BOB currently has the highest number of staff in these groups in our region and PCNs are on track to spend almost all the funding available this year.
33. ICB leads are working with GP leaders from across BOB to develop the primary care elements of the Five Year Forward Plan. This will evolve into a wider workstream engaging with practices, the public and other stakeholders to develop a future strategy for sustainable and integrated primary care services. Further updates on this work will be provided in future reports.
34. To help manage winter pressures we are continuing to encourage patients to ensure they have their flu and COVID vaccinations to protect them.