

BOB ICB BOARD MEETING

Title	Chief Executive and Directors Report		
Paper Date:	6 September 2023	Meeting Date:	19 September 2023
Purpose:	Information	Agenda Item:	07
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Executive Summary			
<p>This report provides an update for the Board on key topics and items for escalation since the meeting in public on 18 July 2023 that are not covered in other items on the agenda. It ensures the breadth of Executive portfolios are covered.</p>			
Action Required			
<p>The board is asked to note this update.</p>			
Conflicts of Interest:	<p>Conflict noted: conflicted party can remain but not participate in discussion.</p>		
<p>This report contains information relating to organisations that partner members of the Board lead/are employed by. The perspective of these members is an important aspect to enable the Board to focus on where the ICB (Integrated Care Board) and system contribute to improvement.</p>			

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. The main emphasis will be on areas that are not covered in other items on the agenda or those that focus on the importance of our work in convening partners.

System working – Overview

Industrial action

2. Industrial Action (IA) has continued to affect services over the last two months with the following action having taken place:
 - Junior Doctors participated in IA for five days from 7am on Thursday 13 July until 7am on Tuesday 18 July and for a four-day period from 7am on Friday 11 August until 7am Tuesday 15 August
 - BMA Consultant members participated in IA from 7am on Thursday 24 August until 7am on Saturday 26 August.
 - The Society of Radiographers had a mandate in 40 organisations, including Berkshire Healthcare NHS Foundation Trust (BHFT), and took IA from 8am on Tuesday 25 July until 8am on Thursday 27 July
 - BMA Consultant members have announced two further periods of IA, for 48 hours from 7am on Tuesday 19 September until 7am on Thursday 21 September, and for 72 hours from 7am Monday 2 October until 7am Thursday 5 October.
 - Following being re-balloted 98% of BMA junior doctor members voted to continue with IA, their previous mandate having expired at the end of August. Further IA will take place from 7am on Friday the 20th of September to 7am on Saturday the 23rd of September and for 72 hours from 7am Monday 2 October until 7am Thursday 5 October.
 - The recently announced action is the first-time consultant and junior doctors' action will take place at the same time and the table below summarises what the anticipated impact will be over September and October:

September

Date	Consultants	Juniors
19 September	Christmas day cover from 7am	Non-strike day
20 September	Christmas day cover	Christmas day cover from 7am
21 September	Non-strike day from 7am	Full walkout from 7am
22 September	Non-strike day	Full walkout
23 September	Non-strike day	Non-strike day from 7am

October

Date	Consultants and Junior doctors
2 October	Christmas day cover from 7am
3 October	Christmas day cover
4 October	Christmas day cover
5 October	Non-strike day from 7am

- The impact of industrial action cannot be underestimated with 10 separate periods of action taking place across BOB between December 2022 and July 2023, involving 14,007 occasions of staff participating and resulting in at least 16,940 outpatient attendances, 2572 elective and 972 community appointment cancelled and rearranged. This represents around 20% of capacity within our Trusts. The action has also had significant financial implications, moral injury, created tension between staff groups, increased fatigue and resulted in episodes of abuse towards Trust administration teams.

Cyber Incident

3. The South-Central Ambulance Service (SCAS) Electronic Patient Record (ePR) system suffered (via a third party) a cyber-attack on 19 July. The company who suffered the cyber-attack, Hytec, are now in receipt of the digital forensics report and an executive summary has been shared with NHSE Cyber Security Operations Centre. The reconnection timetable will not be clear until the provider has undertaken further work.
4. Fallback contingencies were invoked, and all patient reports are currently being provided by paper.
5. There is thought to be minimal risk of patient data being taken however it is still unclear whether historic patient records, encrypted during the attack, will be restored.
6. The ICB continues to run an Incident Management Team (IMT) to lead the response to the issue. This team is connected into the Regional IMT and other regional working groups which include work on Quality Impact and Clinical Risk. We are also engaged with the Hampshire and Isle of Wight ICB's system IMT, in their capacity as Lead Commissioner.

Health Service Journal Awards 2023

7. Seven BOB services have been shortlisted for HSJ Awards across the six categories listed below. The winners will be announced on 16 November.
 - Acute Sector Innovation of the Year
 - Buckinghamshire Healthcare Trust (BHT) - Bucks Breast Unit: Pioneering the MagTotal approach to improve breast cancer surgery
 - Integrated Care Initiative of the Year
 - Buckinghamshire, Oxfordshire and Buckinghamshire ICB – An 'all-ages by design' approach to Palliative and End of Life Care
 - Medicines, Pharmacy and Prescribing Initiative of the Year
 - BHT - Inpatient Pain Team - Mobile Block Service
 - Oxford University Hospitals FT - Integrated Severe Asthma Project (ISAC)
 - Mental Health Innovation of the Year
 - BHFT and Office of the Police and Crime Commissioner for Thames Valley – BRAVE: Building Resilience and Valuing Emotions after Domestic Abuse
 - Military and Civilian Health Partnership Award
 - Royal Berkshire FT (RBFT), Gurkha Community and SSAFA – Supporting our Gurkha Community
 - Staff Wellbeing Award
 - Oxford University Hospitals FT(OUH) -Our #OneTeamOneOUH approach to supporting staff with the cost of living

System Financial positions

8. The ICB's financial position together with that of the wider system will be discussed later in today's meeting. These are matters which have received considerable focus in recent weeks from both regional and national colleagues including during a first quarter oversight meeting with the regional team on 11 August and a meeting with the national team on 8 September.

9. In response to the challenging financial and performance landscape regular system meetings have now been established bringing together all provider CEOs, CFOs and COOs with the first having taken place on 25 August.

Partnerships

Integrated Care Partnership

10. The Chair and I had a productive meeting with local authority leaders on 8 August confirming commitment to the development of the BOB Integrated Care Partnership and future meeting dates have now been set.
11. At each meeting we will consider progress made against the themes/priorities as set out in the Integrated Care Strategy and ensure that the work we do as a system across BOB is supporting the delivery of each of the five Health and Wellbeing strategies.

Ministerial visit to Oxford Community Diagnostic Centre

12. Will Quince (Minister for Health and Secondary Care) visited the Oxford Community Diagnostic Centre (CDC) on 1 August. Senior Executives from the OUH, Perspectum (the provider of the CDC via a sub-contract with OUH) and the ICB (Rachael de Caux, Chief Medical Officer and Matthew Tait, Chief Delivery Officer) joined the visit. As well as having a tour of the services the Minister was keen to discuss the partnership model between the OUH and Perspectum, the development of new streamlined pathways and how any learning could be used to inform the independent sector's role in the strategic delivery of CDCs.

System leadership role

13. We have now received the summary report from the system-wide education forum held on 15 June 2023 at Oxford Brookes University. Its recommendations are being considered and will be presented to the People Committee along with a proposed action plan.

Thames Valley Police

14. On 29 August I met Jason Hogg, Chief Constable of Thames Valley Police at Police Headquarters in Kidlington. This was a highly productive meeting during which we discussed a variety of issues including the roll out of the Right Care, Right Person programme. We agreed going forward that it would also be helpful to have a four-way meeting including the CEOs of the system's two mental health provider trusts.
15. Meetings such as this with leaders of key partner organisations are forming an important part of my ongoing induction to the ICB.

Strategic system landscape

Changes to Cancer Waiting Time Standards

16. Following the clinically led review of NHS access standards, changes to cancer waiting times standards have been agreed between NHS England and the Department of Health and Social Care. These will come into effect from Sunday 1 October 2023.
17. Developed by clinical experts and supported by leading cancer charities, there will now be three cancer standards, which combine all of the previous standards and cover additional patients:
 - The 28-day Faster Diagnosis Standard (75%)
 - One headline 62-day referral to treatment standard (85%)
 - One headline 31-day decision to treat to treatment standard (96%)
18. The new standards are aligned with modern clinical practice and focus on the measures that matter most for cancer patients and clinical outcomes.
19. These changes will now be incorporated into our regular performance reports.

NHS Confederation ICS Network

20. In August the Confederation published [The state of integrated care systems in 2022/23: - Riding the storm.](#)
21. The report is based on a comprehensive national survey and interviews with ICB and IPC chairs, CEOs and wider system partners.
22. There are several recommendations for how government and national bodies can support ICSs in year two of their existence as formal partnerships, including the need for government to review the amount of capital funding available to ICSs (as well as the complex allocation process) and develop a long-term plan for the social care workforce. In addition, there are recommendations for NHS England to ensure ICBs have access to the data and capacity they need, and around setting a small number of outcome-based targets.

Specialist Commissioning Delegation and Pre-Delegation Assessment Framework submission

23. As part of the national ambition for ICBs to take on delegated responsibility for 59 of the 154 specialised services from NHS England in April 2024, the ICB has submitted a Pre-Delegation Assessment Framework (PDAF) submission that set out the current assessment of the regional state of 'readiness'. The submission, developed collectively by NHS England and SE ICB representatives, identifies areas and processes requiring further development. Progress against defined actions have been prioritised for completion pre-31 March 2024.
24. The submission requires each ICB to assess their state of readiness against 3 readiness categories: 1) 'full delegation', 2) 'delegation with conditions' 3) 'intensive support'. In all 3 categories the financial budget for the 59 services moves from NHS England to the ICB.
25. BOB ICB has assessed its position as being readiness level 2 'delegation with conditions'.
26. The SE Regional Specialised Commissioning Partnership Board has confirmed that the region will collectively submit a level 2 readiness position. The PDAF will require ICB CEO signature by 25 September 2023 before submission to the National moderation Panel for consideration in October 2023 and formal approval by the NHS England Board in December 2023.
27. If supported a 'Delegation Agreement' will require formal ICB agreement prior to 1 April 2024. It is proposed that updates on the work plan will be taken through the Place and System development committee.

Reinforced Autoclaved Aerated Concrete (RAAC)

28. Following heightened public interest in the presence of RAAC in the NHS estate, NHSE has asked trusts to assess their estate again. Initial assessments of additional sites identified through this process are being undertaken and were expected to be completed by 8 September 2023.
29. We are all aware of the risks associated with RAAC as part of the extensive programme of work undertaken over recent years. ICBs will want assurance about the primary care estate. We are working with local primary practices and PCNs to ensure we have confirmation that no RAAC has been identified or, where it has, on the identification and management of RAAC.

NHS IMPACT (Improving Patient Care Together) Baseline for Improvement

30. As part of the launch of this national programme to support NHS organisations and systems to have the skills and techniques to deliver continuous improvement the ICB and local NHS Trust have undertaken a baseline assessment which was submitted on 31 August.
31. This information will inform the NHS IMPACT programme team to develop support, establish peer to peer connections and share good practice. The baseline assessment will be followed up by a more detailed self-assessment exercise undertaken by Acute and Mental Health Trusts by the 31 October.

32. The baseline assessment will be shared through our existing ICS quality improvement collaborative which also involves Oxford Academic Health Science Network (AHSN). Our providers have clearly dedicated resource and explicit quality improvement programmes with examples of improvement outcomes. The ICB does not have a dedicated team although has change, transformation and commissioning skills embedded across directorates and function.
33. As part of the baseline assessment there was a request to identify an Executive lead and a clinical lead for the ICB. These were confirmed as Matthew Tait (Chief Delivery Officer) and Rachael Corser (Chief Nursing Officer).

Integrated Care Board (ICB): Director Updates

ICB oversight Q1 assessment meeting with NHSE Regional team

34. This took place on Friday 11 August and was a productive discussion with NHSE recognising the work being done across the system in challenging circumstances.

Our People and Organisational Development

35. Since the ICB's last board meeting there have been several important changes to the senior leadership team.
36. Hannah Iqbal joins the ICB on 18 September as the Chief Strategy and Partnerships Officer. She therefore succeeds Rob Bowen who had been the acting director since March. I would like to put on record my thanks to Rob for the considerable contribution he has made to the ICB, not least through the leadership he provided in the development of the Joint Forward Plan.
37. Raj Bhamber joined the executive team on 14 August as our interim Chief People Officer and so succeeded Karen Beech who has now been seconded the southwest regional team. Again, I would like to thank Karen for all her efforts during the six months she was the ICB's acting Chief People Officer.
38. Sarah Adair is stepping up from her role of Head of Communications and Engagement to become the ICB's Acting Director of Communications and Engagement. She therefore succeeds Nick Samuels who also played a key role in the development of the ICB over the last six months.
39. In addition to the above Victoria Ottley-Groom be joining the executive team in October from her current role in the Surrey Heartlands ICB as our new Chief Digital and Information Officer, so succeeding Ross Fullerton.

Quality and Safety

40. The Board will be aware of the verdict in the trial of Lucy Letby and NHS England have asked NHS Trusts and ICB's to review arrangements to address some of the issues highlighted in this case. A more detailed paper outlining the requirements and the work underway is included as Item 07 at this meeting.
41. Oxfordshire had a Special Education Needs and Disabilities (SEND) inspection in July. The ICB has worked in collaboration with health and care partners across the County to support the inspection which has welcomed five inspectors from regulatory bodies including CQC and Ofsted, who over their time have followed six children and their families to understand and explore their SEND experience. We are expecting the report to be published this month and we will give a verbal update at the Board meeting.
42. Following the announcement by NHSE to accelerate the Autumn vaccination programs, the ICB is working with providers to stand up services at pace. Our priority is to ensure vaccination is available to all those eligible with a focus on those most vulnerable. The deadline for providers to sign up to support the program has been extended until 4 September following the announcement. We currently have a network of 126 providers, with a mixed delivery model of PCN's, pharmacies and hospital hubs.

Primary Care

43. National GP Survey results were published in July.
- The survey was undertaken in January 2023 and sent to more than 57,000 BOB patients, over 19,200 surveys were returned providing a 34% response rate (but only 1% of our registered list).
 - BOB ICB, like other ICBs across the country, has seen a decline in satisfaction in some of the main survey questions (detail covered in Item 11.1).
 - Although the ICB's performance remains comparable with the national position, the best patient satisfaction is seen in questions relating to reception staff and perception of care.
44. The primary care team at the ICB has been working with key stakeholders to secure the future of local GP services in Botley and Kennington. The work started in March when the current Botley Medical Centre and Kennington Health Centre partners gave six months' notice on their contract. BOB ICB is now pleased to announce that two Oxford-based practices will be taking over GP services at both sites from 1 October 2023.
- The practice team at the Manor Surgery in Headington will provide services to patients from the Kennington Health Centre site.
 - The team at 19 Beaumont Street, Oxford, will provide services to patients jointly from the Botley Medical Centre and 19 Beaumont Street sites.
45. A small number of registered patients living outside the 'catchment' areas of the new providers will be registered with other GP practices, which are likely to be closer to home.
46. Patients do not need to take any action to register with the new providers and patient care will not be interrupted. The NHS will send a formal letter to everyone affected ahead of the changes from 1 October advising them of details of their new practice. There will be an opportunity for people to choose to register with other surgeries at this stage, depending on practice boundaries.
47. The ICB has commenced work with a team from KPMG in order to develop a Primary Care strategy for the system. This is a piece of work that is expected to last 6 months and will begin with a series of engagement events. This will include opportunities for patients and public to be involved, details to be confirmed. I was very pleased to have been able to contribute to the event involving the Oxfordshire place-based team which took place on 1 September.