

# **BOARD MEETING**

Title	Chair's Report		
Paper Date:	02 July 2024	<b>Board Meeting Date:</b>	16 May 2024
Purpose:	Discussion	Agenda Item:	07
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# **Executive Summary**

This report aims to provide an update for the Board on the engagement and work undertaken by the Chair of BOB ICB. The Chair plays a key role within the Integrated Care System (ICS) alongside the CEO. This update is intended to be more systems-focused as opposed to the Integrated Care Board (ICB) alone. The report will incorporate reflections on Board effectiveness and any major updates on ICB and systems' governance.

# **Action Required**

The board is asked to note this update.

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 and system contribute to improvement.

# **Chair's Report**

## **ICB Updates**

- 1. The Change Programme is having a significant and adverse effect on our ICB people as they are brought into an extended consultation process. This was evidenced by the strength of feeling at the staff network I attended where feelings ran high. Staff are naturally anxious about their roles and more importantly were seeking clarity on the extent of the exact changes.
- 2. We have also received an increase in the number of Freedom to Speak up reports since the three guardians took up post and this was presented at the ICB People Committee. This all adds to a picture of significant disruption. A robust OD plan is required to ensure those staff remaining in post feel supported and able to continue whilst feeling safe in their role.
- 3. Appraisals for all Board Members and discussions with partner members took place during June. I also was asked to feed into the appraisals of all the Chairs of our six Providers.
- 4. The selection process for the role of CEO has been completed. A recommendation for appointment has been made and rests with NHSE. We are waiting for the Secretary of State to confirm the appointment and we expect to be able to make a formal announcement imminently.

## **Outcome of Fit and Proper person reviews**

- 5. In August 2023, NHS England published a revised Fit and Proper Person Test (FPPT) Framework in response to the recommendations made by Tom Kark KC in his 2019 Review of the FPPT as it applies under Regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The review highlighted areas that needed improvement to strengthen the existing regime. The Framework builds on what was in place in the existing regime for Trusts. Changes include an update to the set of core elements for the FPPT assessment of all board members (now including information about training and development and any disciplinary findings relevant to the FPPT assessment) and the introduction of recording information relating to the testing requirements on ESR. NHS organisations must be able to demonstrate, annually, that they have carried out a formal assessment of the FPPT for each board member. The framework introduces a requirement for the Trust Chair to submit an annual return to the NHS England Regional Director. The Framework applies to executive and non-executive directors of integrated care boards (ICBs), NHS trusts and foundation trusts, NHS England and the CQC, interim as well as permanent appointments where greater than six weeks and those who are called "directors" within Regulation 5. As Chair I decided to apply FFPT to all members of the CEO Team i.e. all Board members and participants.
- The Director of Governance, supported by the CSU, received the individual self-attestation forms, completed all the required checks, and provided reports for review. The ICB People Committee reviewed the proposed approach and will review delivery to ensure this process remains robust.
- 7. The appraisal of all board members undertaken by me, and the CEO completed the process. Aidan Rave as Acting Deputy Chair/Senior Independent Director completed the review of my reports. From this, I can determine that all Board members and participants comply with the FPPT, and I have submitted the annual summary to the Regional NHSE Director. This year the completion date was 30 June, but this will come forward to 31 March next year.
- 8. An NHS Leadership Competency Framework has been published which provides guidance for the competence categories against which a board member should be appointed, developed, and appraised. The Framework will be effective for the next appraisal round, and we are expected to use it for all new board level appointments or promotions and for annual assessments for all board members.



# **Convening and Engaging**

# Integrated Care Partnership (ICP)

9. In line with the pre-election guidance the ICP meeting scheduled for 19 June was cancelled. The ICP is seeking nominations for a new Chair and setting future dates.

## Voluntary, Community and Social Enterprise (VCSE)

- 10. On June 13 I addressed our local VCSE members at their annual seminar. Having had a presentation at the System People Committee where we learned through work commissioned by the ICB that we have 44,500 paid staff working in the voluntary sector and 165,000 regular volunteers, it was particularly important to address the local leaders.
- 11. After my address where I described my own commitment to VCSE sector, the key questions revolved around these elements:
  - a. The challenge for the VCSE sector to find the appropriate contact in the wider NHS BOB system, and having located the right contact, to maintain the relationship through staff changes.
  - b. The challenge of short-term funding allocations and contract management.
  - c. The commitment of BOB to the VCSE sector and how the relationship has evolved since the first MOU was signed.
  - d. The wider cash strapped environment and the challenge of fundraising and a reduction in philanthropy.

#### Engagement

12. I attended a reception at RAF Brize Norton as the representative of the NHS on 18 June. As well as thrilling displays from the Parachute core and a fly by, I had a chance to speak to the RAF Medical Consultant in charge at the base. He explained how the base services are connected to our local GPs and how we collaborate well. I also met with the local CEO of Oxford Citizens Advice Bureau and caught up with Councillor Liz Leffman the leader of Oxfordshire County Council.

#### **System Governance**

- 13. I attended the NHS Confederation Conference in Manchester on 12 and 13 June.
- 14. The conference was well attended by NHS colleagues and third-party suppliers. No Politicians were present due to the announcement of the election. The conference was dominated by the elements of Digital/Data/AI and a noticeable and welcome attention on the Voluntary Sector and its role in working with the NHS to solve some of the workforce issues and its role in reaching those parts of our population where the need is greatest.
- 15. Amanda Pritchard (NHSE Chief Executive) delivered a heartfelt speech outlining the achievements of the NHS and reasons for pride, reasons for hope but also stressing that there is no room for complacency. She was clear that we must not collude with despair and highlighted:
  - Giving our people the tools and the information they need to drive Improvement.
  - Making it easier to innovate in the NHS.
  - Management and Leadership- training and skills.
- 16. Dr Daniel Susskind (senior Research Associate at the Institute for Ethics in AI, University of Oxford), author of A World without Work, explained how the emergence of AI will not eradicate medical roles, contrary to popular belief, but will enhance the practice of clinicians and other professional staff by breaking down job roles into key elements and taking over the repetitive parts of the process, thus allowing professionals to operate at the top of their license. He asked what NHS leaders can do to support the changes that AI will bring.
- 17. The other standout session was delivered by Professor Amy Edmondson on Psychological Safety, which is known as working without fear. Particularly interesting were her assertions that "High quality conversations involved dissent" and "Power is a risk factor. Power needs to be handled with humility".