

BOARD MEETING

Title	Board Committees Assurance Reports		
Paper Date:	14 August 2024 Meeting Date: 17 September		17 September 2024
Purpose:	Assurance / Approval	Agenda Item:	14
	on benair of Committee Chairs.	Exec Lead/ Senior Responsible Officer:	Nick Broughton, Chief Executive

Executive Summary

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.

The focus for these reports is:

- 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?

The following reports are attached:

- Audit and Risk Committee meeting held on 27 August 2024.
- ICB People Committee meeting held on 09 July 2024.
- Population Health and Patient Experience Committee held on 27 August 2024.
- System Productivity Committee meetings held on 2 July and 3 September 2024.

Action Required

The Board is asked to:

• Note the content of the Committee Escalation and Assurance Reports.

Conflicts of Interest:	No conflict identified
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Board Committees Assurance Reports

Committee Escalation and Assurance Report – Alert, Advise, Assure	
Report From:	Audit and Risk Committee
Date of Meeting:	27 August 2024
Committee Chair:	Saqhib Ali

Key escalation and discussion points from the meeting

Alert:

The Committee again noted the continued use of STWs as written below. It was highlighted that the
root cause was linked to our weaknesses in contract management, and this was being addressed as
a priority though turnaround.

Advise:

- The Committee received the revisions to the ICB 's constitution, as directed by NHSE, and were assured of the content and recommends amendments for **approval** to the Board.
- The Committee **approved** the ICB Committee Effectiveness Framework to commence early September 2024 with a target of this being presented to the Board during Q4 2024/2025 and no later than Q1 2025/26.
- The Committee were informed of two new emerging **corporate risks** within the risk management update, clear mitigations and actions in place, which included:
 - o Primary Care GP Collective Action. Responsible Executive: Matthew Tait, Chief Delivery Officer.
 - Change Management around recruitment and operating model. Responsible Executive: Caroline Corrigan, Interim Chief People Officer.
- Two Single Tender Waivers (STWs) were presented for approval. The Committee also received
 assurance and guidance in understanding how the process is managed around single tender waivers
 and that relevant procurements are progressed through appropriate committees of the Board, and
 where we are working collaboratively with our partners.
- Forward planner for Audit and Risk Committee will be reviewed with the Audit Chair. The ICB Audit
 Chair will meet with Audit Chairs across the BOB geography to ensure that key items are aligned for
 reporting where appropriate.

Assure:

The Committee received reports providing assurance in the following areas:

- Counter Fraud Progress Report.
- The Anti-Crime Progress Report for 2024/25 highlighted ongoing efforts in fraud prevention, with the ICB's annual counter-fraud self-assessment rated as GREEN.
- Internal audit progress report and Internal Audit Charter.
- The Board Assurance Framework (BAF) and Corporate Risk Register (CRR) continues to develop
 with improved ways of presenting risk to Committee. Proactive review of BAF is being undertaken
 monthly with relevant Executives and their risk lead. Risk reports to Committee continue to be
 strengthened to ensure that mitigations and actions are actively updated.
- The Committee received assurance on the effectiveness of financial controls following the duplicate salary payment and improvements to contract management – particularly around reducing STWs and implementing the new financial software system.
- Significant assurance was provided regarding the DSPT submission, with ongoing collaboration to address upcoming changes in the Cyber Assurance Framework (CAF).



Committee Escalation and Assurance Report – Alert, Advise, Assure		
Report From:	ICB People Committee	
Date of Meeting:	09 July 2024	
Committee Chair:	Sim Scavazza	

Alert:

 The pause and relaunch of the Change Programme consultation was understandably causing anxiety and uncertainty for staff. The executive team were ensuring more opportunities for engagement for staff and would be prioritising this and the responding to feedback over the next four to six weeks.

Advise:

- The Committee was beginning to see regular workforce information but felt that there needed to be a greater focus on highlighting key issues, trends and areas of concern. It was expected that the Executive Management Committee would be reviewing the detail and if possible, using more timely data.
- The Committee welcomed the OD plan designed to support and embed the change programme. It was noted that we needed to maximise the support we offered staff especially those at risk. It was agreed that timely delivery was essential to ensure that the positive impacts of the programme were felt by our staff. It was greed more regular updates would be provided to the Committee.
- The Chairs of our three staff networks (CARE, Diverse Ability and LGBTQ+) joined the
 meeting and outlined the successes, challenges and next steps of their respective
 networks. The committee acknowledged the staff network chairs time and effort
 dedicated to their networks and recognised that agreement on protected time and
 provision of administrative support were urgently required.

Assure:

- The Committee were assured that the ICB is compliant with current requirements for the
 Fit and Proper Person Test assessment and has submitted the necessary reports to
 NHSE Southeast and as part of the Chair's report to the Board.
- The Committee received a report on statutory and mandatory training. This gave
 assurance of current compliance and a recognition of the need for further improvements
 and alignment with forthcoming NHS guidelines. The committee expressed confidence
 in the People Directorate to manage the ongoing review and update of training
 requirements.



Committee Escalation and Assurance Report – Alert, Advise, Assure	
Report From:	Population Health and Patient Experience Committee
Date of Meeting:	27 August 2024
Committee Chair:	Margaret Batty

Alert:

The committee were alerted to the increasing potential risk to delivering statutory responsibilities in light of the financial recovery programme (FRP). Whilst this has not been reflected in the Board Assurance Framework (BAF) risks presented to the Committee, the articulation of new and emerging risks demonstrates some aggregation of risks. Further work will be done to describe the aggregation of risks and the link to the alerts coming through from the clinical programme board and the impact this will have on quality, safety and operational delivery. The deep dive BAF review of the health inequalities risk was welcomed as an exemplar framework for this.

Advise:

The Committee received a 'deep dive' into the quality and operational performance of our all age continuing healthcare service. Noting the cost pressures highlighted at month four, the Committee can advise the Board that there remains a relentless focus on sustaining the operational and quality performance of the service. Recognising the current vacancies in the assessment teams and the drive to resource the service with the skills and workforce needed, the System Recovery and Transformation Board (SRTB) will retain the oversight of the financial position and the PHPE committee will continue to monitor improvement and challenges.

Assure:

The committee took assurance from the primary care assurance report and noted the work completed by the primary care team in the last quarter. The ICB has approved and supported a GP Fellowship scheme to 15 newly qualified GPs and practitioners.

The Committee were assured by the work being done across all the Clinical Programmes reporting into the Committee, noting the points for alerting, advise and assurance from each programme.

The Committee were assured by the information presented in the Women's Health update, which highlighted the progress made in the workstreams, the plans and priorities for the next year.

The Committee were also assured of the Clinical Effectiveness delivery of ICB duties and related strategic developments.

Recognising the impact of the current Financial Recovery Plan (FRP), the Committee were assured by the Equality Impact Assessment policy and process and will monitor the risks and themes that come through, alerting the Board to escalating and emerging risks.



Committee Escalation and Assurance Report – Alert, Advise, Assure		
Report From:	System Productivity Committee	
Date of Meeting:	02 July 2024	
Committee Chair:	Tim Nolan	

Alert:

- That Month 2 finance figures are not offering assurance that targets will be achieved.
- ICS/Providers M2 figures are incomplete. With specific concern around the workforce data. Around bank and agency staff.
- Risk (Around contract deadlines)
- Mental Health Long term plan, BOB is one of only three ICSs not delivery any of the 6 core LTP targets, however this is in part due to the data issues from OH last year.
 Therefore, updated data will significantly improve this performance in the near future.
 An updated action plan and outline will be taken to the next PHPE

Advise:

Risk register. (2x BAF +13x Risks) of the 15 risks only 2 have up to date criteria. The
remaining are either overdue or have actions outstanding. It is also noted that they
also sit within the high or very high scoring.

Assure:

 Committee is assured that operational reporting M2 is effective, however the report its self-highlighted a number of areas of concern, notably areas of border line performance in long waits, and still a short fall in diagnostic rates, albeit with improvement on last year: along with the MH alert listed above.



Committee Escalation and Assurance Report – Alert, Advise, Assure	
Report From:	System Productivity Committee (SPC)
Date of Meeting:	3 September 2024
Committee Chair:	Tim Nolan

Alert:

SPC sees it as important to update the Board on items which are high risk; in particular:

Month 4 Finance position

- Overall, the BOB System position shows a YTD overspend of -£61.5m, a variance to plan of -£20.2m.
- The variance is made up of providers being over plan by £51.0m, and ICB £10.5m
- The drivers for the ICB variance to plan are broadly the same as previously, High-cost drugs costs, CHC due to increasing patient numbers, Mental Health (s117 aftercare and placement costs.)
- The other area the Board should note is the cash position is a concern for acute trusts with BHT already requiring and receiving cash support.

Draft Financial Recovery Plan (FRP)

 The committee reviewed and approved the draft FRP and the plans to try to achieve £60m BOB ICS deficit for 24/25. However, the committee requested that the document better reflected their significant concerns about the achievability of the £60m deficit.

Advise:

SPC is seeking further assurance and continuing to monitor carefully:

System Recovery and Transformation Board (SRTB)

• The committee reviewed the SRTB workforce plan and action notes/agenda from the last meeting.

The committee believes that it may be appropriate for a summary report – SRTB meetings and activities to become a standing item on the Board main agenda.

M4 BOB operational summary

- The committee received the report for M4 operational performance to date and in particular discussed 65+week wait which is likely to miss end of September target (driven by OUH).
- Mental Health targets currently reported vs Long Term Plan (LTP) (not very helpful), the report will be revised to benchmark vs operational targets.
- Noted that most Ops metrics are reported to Population Health and Patient Experience Committee (PHPE).

Risk register

- Review of risk register remains challenging due to difficulty prioritising multiple red risks.
- The committee is looking to develop a deep dive road map and commence deep dives into highest risks at upcoming SPC meetings.

Assure: