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REPORT TO:		NHS SOMERSET INTEGRATED CARE BOARD ICB Board Part A	ENCLOSURE:	
		ICB BOAIG PAILA	L	
DATE OF MEETING:		28 March 2024		
REPORT TITLE:		Key Meeting Reports		
REPORT AUTHOR:		Non-Executive Directors and System Group Chairs		
EXECUTIVE SPONSOR:		Jonathan Higman, Chief Executive		
PRESENTED BY:		Non-Executive Directors and System Group Cha	irs	
PURPOSE DESCRIPT		ION	SELECT	
Approve		receive a report and approve its recommendations,		
Endorse		body/committee for the final decision) the recommendation (not the authorising		
Liluoise		ittee for the final decision)		
Discuss	To discuss,	in depth, a report noting its implications		
Note	To note, wit	hout the need for discussion		
Assurance		ne Board/Committee that systems and processes are to advise of a gap along with mitigations	×	
	PR	EVIOUS CONSIDERATION/ENGAGEMENT		
N/A		EVIOGO CONCIDEIXATION/ENCAGEMENT		
14/74				
Executive summary and reason for presentation to Committee/Board		The Key Meeting Reports are a record of the most recent Board Committee and System Group meetings. They are presented to the ICB Board and are published in the public domain through the NHS Somerset website, to provide clarity and transparency about the discussions and decisions made, and to ensure the principles of good governance are upheld.		
Recommendation and next steps		The Key Meeting Reports are provided for Assurance .		
	(Please sele	Links to Strategic Objectives ect any which are impacted on / relevant to this paper		
	1: Improve th	e health and wellbeing of the population		
☐ Objective 2: Reduce inequalities				
☐ Objective 3: Provide the best care and support to children and adults				
☐ Objective 4: Strengthen care and support in local communities				
☐ Objective 5: Respond well to complex needs				
☐ Objective 6: Enable broader social and economic development				
□ Objective 7: Enhance productivity and value for money				

Impact Assessments – key issues identified (please enter 'N/A' where not applicable)			
Reducing Inequalities/Equality & Diversity	N/A		
Quality	N/A		
Safeguarding	N/A		
Financial/Resource/ Value for Money	N/A		
Sustainability	N/A		
Governance/Legal/ Privacy	N/A		
Confidentiality	N/A		
Risk Description	N/A		

Please keep these front pages to a maximum of three





REPORT OF THE FINANCE COMMITTEE MEETING HELD ON 21 FEBRUARY 2024

1 ITEMS DISCUSSED

1.1 2024/25 Capital Plan and Risk – including impact of Stroke DMBC

Following the Board's reference to Finance Committee of the capital implications of the decision to support the Stroke business plan, the committee reviewed the capital plans and received confirmation that the capital requirements to support the stroke business case have been included within the 2024/25 capital plan. This therefore gives a balanced capital plan going into 2024/25, including an anticipated capital cost of £1m in 2024/25 (and the same in 2025/26) reflecting the expected costs related to the development of stroke services at SFT and DCH.

The Committee was assured that detailed planning on costs and timelines continues with DCH.

My Life My Future Update

The Committee heard from Newton Europe that, six months into the design phase, all five workstreams were live with trials established to test new ways of working across services. Improvements were being seen and momentum was building. A breakdown of financial targets against each workstream was received together with key risk areas and issues.

It was acknowledged that further focus needs to be brought to the continuing high levels of NCR including discussions with patients about discharge taking place from their date of admission into hospital.

The committee was pleased to hear that Newton Europe were shortly to meet finance directors to identify cost savings from work already in hand.

Update on outcomes of system planning workshops

The committee received an overview of the workshops identifying areas for transformation and cost saving, with a focus on key areas: Out of Hospital/Localities/INT, Care Delivery: Discharge, and Workforce. Welcoming these and a further 31 opportunities to be explored, the committee noted that the transformation needed to be delivered at pace to deliver the financial savings moving into 2024/25 and the future.

Operational Plan Overview

The committee received a preliminary flash report on the 2024/25 Plan showing a financial gap. The Committee recognised that further work needed to take place, including gaining a better understanding of workforce issues, prior to fuller consideration at the March meeting.

Financial Performance

The NHS Somerset position for month 9 showed a £1.8m forecast overspend due to costs of industrial action (not taking into account any industrial action planned in February), with clarification awaited on the national funding for these additional costs. The system's capital position is forecast to be £2.2m over plan due to lease liability reimbursement relating to IFRS 16. The system finance group is working with the regional team to resolve this position.

The Somerset Council finance report at month 9 which is showing a £17.5m overspend with significant adverse variances being seen in Adult and Children's Services. The committee discussed how the reduction in Council spending would impact health over the next 5 years, particularly in supporting people in communities, and how the ICB might support prevention and health management.

The committee also received the quarterly Risk Report, agreed recommendations for Extensions after Contract Reviews, and supported testing the market for the Children and Young People's Community Wellbeing Service contract.

- 2 NEW ISSUES AND/OR NEW RISKS IDENTIFIED
- 2.1 None
- 3 DECISIONS TAKEN BY THE COMMITTEE UNDER DELEGATED AUTHORITY
- 3.1 None
- 4 ITEMS REQUIRING ESCALATION TO THE ICB AND/OR OTHER SYSTEM BOARDS

Items for Consideration/Decision

4.1 None

Reports for Information for Future Board Agendas

4.2 Capital Plan 2024/25 (see above)

5 CHAIR'S SUMMARY

I confirm that the summary above indicates the committee's assurance in the matters listed and the further work we expect, particularly to finalise the value for money assessment on the revenue consequences of the stroke business case and the Operating Plan, both of which are major items for discussion at the next Committee.

Chair: Christopher Foster

Date: 18 March 2024





REPORT OF THE AUDIT COMMITTEE MEETING HELD ON 5 MARCH 2024

1 ITEMS DISCUSSED

- The committee discussed and noted progress updates from external audit, internal audit and counter fraud colleagues
 - The committee reviewed and discussed the latest risk report and draft risk appetite statement
 - The committee noted the draft triple lock process and controls, including the progress made against the HFMA financial controls checklist
 - The committee discussed and noted the outcome of the 2022/23 NFI data matching exercise
 - The committee reviewed, discussed and agreed the most recent requests for waivers of the standing orders
- 2 NEW ISSUES AND/OR NEW RISKS IDENTIFIED
- 2.1 None
- 3 DECISIONS TAKEN BY THE COMMITTEE UNDER DELEGATED AUTHORITY
- 3.1 None
- 4 ITEMS REQUIRING ESCALATION TO THE ICB AND/OR OTHER SYSTEM BOARDS

Items for Consideration/Decision

4.1 Support given to requests for waivers of the standing orders relating to advertising across the South West, licences for general practice to refer patients to community pharmacy and evaluation work on NHS @ home pathways and pre-hospital video triage.

Reports for Information for Future Board Agendas

4.2 2023/24 pre-adoption annual report and financial accounts, Internal audit annual report and annual statement of assurance and external audit: NHS Somerset ICB audit findings report

5 CHAIR'S SUMMARY

5.1 I confirm that the summary above indicates the committee's assurance in the matters listed and the further work we expect, particularly to recommend the 2023/24 annual report and financial statements.

Chair: Alison Henly

Date: 21 March 2024





REPORT OF THE QUALITY COMMITTEE MEETING HELD ON 28 FEBRUARY 2024

1	ITEMS DISCUSSED		
1.1	Paediatric Audiology Non emergency hospital transport Flu and Covid vaccination coverage Continuing Health Care – likely increase in referrals due to new national requirements Measles 111 operational pressures Primary care practices - CQC updates General Practice Nursing workforce report NICHE recommendations regarding Child L Maternity CQC and MIS submission Quality committee risk report and risk appetite Patient experience and complaints report Freedom to speak up Guardian update Feedback from system quality group		
2	NEW ISSUES AND/OR NEW RISKS IDENTIFIED		
2.1	None		
3	DECISIONS TAKEN BY THE COMMITTEE UNDER DELEGATED AUTHORITY		
3.1	The following policies were approved: Safeguarding adults policy Sexual safety policy		
4	ITEMS REQUIRING ESCALATION TO THE ICB AND/OR OTHER SYSTEM BOARDS		
	Items for Consideration/Decision		
4.1	None		
	Reports for Information for Future Board Agendas		
4.2	None		
5	CHAIR'S SUMMARY		
5.1	The committee will seek further updates and assurance regarding paediatric audiology, non emergency patient transport, continuing health care and 111 at future meetings of the committee.		

Assurance was received on the actions being taken in relation to maternity services, the 'Freedom to Speak Up Guardian', feedback to the family of child L, the actions being taken to support primary care services and the plans for development of the primary care nursing workforce.

Chair: Caroline Gamlin

Date: 18 March 2024





REPORT OF THE PRIMARY CARE COMMISSIONING COMMITTEE MEETING HELD ON 5 MARCH 2024

1 ITEMS DISCUSSED

1.1 Minehead Medical Centre
 New Funding Framework
 The Somerset Dental Recovery work plan

2 NEW ISSUES AND/OR NEW RISKS IDENTIFIED

2.1 The collaborative commissioning hub risks are now incorporated into the PCCC risks and are to be incorporated into the risks reported to this committee in future.

3 DECISIONS TAKEN BY THE COMMITTEE UNDER DELEGATED AUTHORITY

3.1 Minehead Medical Centre

The Primary Care Commissioning Committee were asked to ratify the decision to award the 3 month contract to One Medicare t/a One Primary Care LLP in relation to Minehead Medical Centre, this was agreed.

It was noted that this process had been undertaken under an emergency situation due to an urgent suspension notice being issued by CQC under section 31 of the Health and Social Care Act on 23 January 2024.

Under the Provider Selection Regime the ICB can issue a time limited contract for up to 12 months as long as they satisfy governance arrangements.

The committee also approved an extension of the contract by a further nine months for a total contract period of twelve months.

Primary Care - New Funding Framework

The Primary Care Commissioning Committee were asked to note the updates regarding the proposal for the new primary care funding framework and requested approval to progress virtual sign of outside of the meeting to enable timely implementation of the contract post final negotiations and agreement with general practice via the LMC expected 21 March 2024.

4 ITEMS REQUIRING ESCALATION TO THE ICB AND/OR OTHER SYSTEM BOARDS

Items for Consideration/Decision

4.1 The Somerset Dental Recovery work plan

A working update on the key areas related to the Somerset Dental Recovery plan was presented. The finalised dental recovery plan will be brought to a future PCCC along with the schemes and resource allocations for Somerset.

Reports for Information for Future Board Agendas

4.2 Draft risk appetite statement was discussed and is due to be brought to the ICB board in March 2024.

5 CHAIR'S SUMMARY

On Minehead Medical Centre, we had an in-depth conversation, including about the perceived pace at which events occurred; for example, from receiving resilience funding (£232k) in November 2023 to the CQC suspension on 18 January 2023. Whilst assurance was given and received, it was noted that there may be benefit in considering the potential learnings from a viewpoint that took into context, Springmead and Burnham as well.

On the Healthwatch dental feedback, contained in the Primary Care Quality report, there was some disquiet expressed about the implications on population health, particularly relating to young people, further down the road. At the time, it was not wholly clear how we might orient ourselves to the Healthwatch feedback and it was suggested this comes back to committee, for us to seek assurance vis a vis the dental recovery plan.

Chair: Suresh Ariaratnam

Date: 18 March 2024





REPORT OF THE PEOPLE BOARD MEETING HELD ON 21 FEBRUARY 2024

1 ITEMS DISCUSSED

1.1 **Bridgwater Academy**

The Board was updated on the programme's Mission, Vision and Aims for delivering integrated workforce training at the Bridgwater and a satellite facility at Minehead. We were assured that the objectives are closely linked to our wider system strategic objectives and that this is a transformational opportunity to support our health and care system and to build socioeconomic status via a homegrown workforce.

The project's Executive Board is being established and is expected to move the Academy to the next stage of building regeneration, but this meeting has subsequently been postponed.

NHS Long Term Workforce Plan – Regional Engagement

The Board received information and assurance on workshops to date – 2 completed - on delivery in the SW, comprising seven ICSs, of the NHS LTWP as we await national plans. Outputs from these workshops are informing regional collaborative planning with Somerset to undertake an audit/analysis of our readiness to achieve the plans. The Board recognised that this work is ongoing, and the workforce challenge considerable, but was reassured by the proactive engagement underway.

ICS People Plan

The Board received from the People Delivery Group its regular quarterly highlights report, giving assurance on delivery of our People Plan. The report demonstrated positive movement against our strategic priorities with no red (RAG) status areas identified.

- 2 NEW ISSUES AND/OR NEW RISKS IDENTIFIED
- 2.1 None
- 3 DECISIONS TAKEN BY THE COMMITTEE UNDER DELEGATED AUTHORITY
- 3.1 None

4 ITEMS REQUIRING ESCALATION TO THE ICB AND/OR OTHER SYSTEM BOARDS

Items for Consideration/Decision

4.1 None

Reports for Information for Future Board Agendas

4.2 None

5 CHAIR'S SUMMARY

5.1 I have indicated above, in section 1, the assurance received and the scope of work to be undertaken, to carry forward the medium and longer term initiatives considered.

Chair: Christopher Foster

Date: 19 March 2024





REPORT OF THE SOMERSET COLLABORATION FORUM MEETINGS HELD ON 9 FEBRUARY 2024 AND 15 MARCH 2024

1 ITEMS DISCUSSED

- The role and purpose of the Collaboration Forum.
 - 2024/25 Financial and Operational Planning
 - Preparation (9 February) and Feedback (15 March) for the Board Development Session on 29th February.
 - Joint Forward Plan (JFP) Development including priority programmes and resourcing.
 - Future Model for Community Hospitals.

2 NEW ISSUES AND/OR NEW RISKS IDENTIFIED

2.1 None.

3 ADJUSTMENT TO THE MEMBERSHIP OF THE COLLABORATION FORUM

3.1 Dr Robert Weaver (Chair of the Somerset GP Provider Board) will become a member of the Collaboration Forum to replace Berge Balian from the meeting on 21 June 2024. In addition, Pip Peakman, Director of Innovation from Health Innovation South West (formally the Academic Health Science Network) has become a member.

4 DECISIONS TAKEN BY THE COMMITTEE UNDER DELEGATED AUTHORITY

- 4.1 **Community hospital temporary bed closures** The collaboration forum agreed the following proposals and recommendations:
 - 1) The forum supported a co-production process that is underway looking at the provision of health and wellbeing services within Shepton Mallet. This has resulted in the development of proposals for an integrated health and wellbeing centre. As part of this consideration is being given by the project team (which includes members of the local community) to the impact that this has on services currently being provided from the community hospital.
 - 2) It was agreed that a similar co-production process should be established to review the temporary inpatient bed closures at Chard and Wellington Community Hospitals.
 - 3) It was noted that any further changes to community hospital bed provision would need to be linked to the improvement work focussing on Intermediate Care.

4.2 **Operational Planning Update** – Members of the Collaboration Forum supported the first cut operational and financial plan for 2024/25. However, concern was raised regarding the ambition particularly associated with the reduction in 65-week elective waits, the triangulation of workforce modelling with the overall plan and the level of the cost improvement plan requirement. The ambition, dependencies and risks associated with the target to reduce the level of patients with no criteria to reside in Somerset Acute Hospitals was also noted.

5 ITEMS REQUIRING ESCALATION TO THE ICB AND/OR OTHER SYSTEM BOARDS

Items for Consideration/Decision

5.1 To review and approve the Joint Forward Plan (Item 10 on this agenda).

Reports for Information for Future Board Agendas

- 5.2 Further topics for discussion at future meetings of the Collaboration Forum include:
 - Joint forward plan oversight and governance
 - System programme management arrangements
 - Understanding the priority work programmes of the system delivery boards and alignment with system priorities
 - Planned care strategy
 - Neighbourhood working
 - Intermediate care and 'No criteria to reside' improvement.
 - South Western Ambulance Service strategic priorities
 - SW peninsula research and innovation programme

6 CHAIR'S SUMMARY

6.1 The Collaboration Forum continues to develop as the joint Executive Forum for the Somerset system. Further work is required to ensure clarity around governance of the group, including strengthening its oversight of the system delivery boards. In the next period the priority of the forum will be on establishing and ensuring programme oversight of the system major change programmes as defined in the 24/25 operating plan and joint forward plan.

Chair: Jonathan Higman

Date: 15 March 2024