

## BOARD MEETING

<b>Title</b>	Chief Executive and Chief Officers' Report		
<b>Paper Date:</b>	02 July 2025	<b>Meeting Date:</b>	08 July 2025
<b>Purpose:</b>	Information	<b>Agenda Item:</b>	07
<b>Author:</b>	Dr Nick Broughton, CEO, Chief Officers	<b>Exec Lead/ Senior Responsible Officer:</b>	Dr Nick Broughton, CEO

### Executive Summary

This report provides an update for the Board on key topics and items for escalation since the meeting in public on 13 May 2025 that are not covered in other items on the agenda.

The work of the Chief Executive is wide ranging and impacts upon all the ICB and System's objectives:

- *Improving outcomes in population health and health care*
- *Tackling inequalities in outcomes, experience and access*
- *Enhancing productivity and value for money*
- *Helping the NHS to support broader social and economic development.*

### Key risks and mitigations

The Board Assurance Framework (BAF) undertakes regular reviews (monthly) with executives as part of a continual assessment. This will ensure that risks =>12 months old are assessed and updated; and that they remain relevant.

As part of these discussions, the following BAF risks have been updated as follows:

**BOB0001 Health Inequalities:** Updated to maintain good governance around Health Inequalities.

**BOB0003 Resilience:** Updated following Board review and core standards review, a work plan for 2025/26 to be produced. Review of applied scores to be carried out to ascertain if risk is reaching full mitigation.

**BOB0005 Transformation:** Updated to reflect ongoing workstream priorities, organisational and system change.

**BOB0006 Safety, Safeguarding and Quality:** Updated to include the ICB quality strategy published in 2025/26 and revised internal quality governance reporting. In-depth review carried out June 2025.

**BOB0007 Working in Partnership:** Risk to be updated and strengthened to include a focus on Place.

**BOB0008: ICB Workforce:** Updated to reflect a pause to the system programme work due to ICB Change Programme. Governance processes and arrangements to be worked through in the creation of new ICB.

**BOB0009: ICS Workforce:** Updated following an in-depth review of the effectiveness of controls and mitigations in place. The score has been reduced from 16 (very High) to 12 (High) in line with performance.

To provide further assurance in the mitigation of risk, a revised Board Assurance Framework (Vertical Summary Report) provides a summary of key controls and mitigations in place, as well as performance against the ICB's Risk Appetite (Appendix 1).

The two key risks scoring >15 to the delivery of BOB ICB objectives are summarised as follows:

**BOB0002: Financial Sustainability:** A current score of 20 – Very High (Likelihood: 5-Almost Certain) (Impact: 4-Major). *“There is a risk that BOB Integrated Care System is unable to manage its expenditure within its available resource and that it will not deliver its financial plan and/or financial targets resulting in loss of reputation and failure to deliver high quality and safer services for patients”*. The risk has been updated to reflect current financial pressures, with the score remaining very high (20). Mitigating actions are in place, with ICB reporting monthly to NHSE on its financial position, with an action to achieve breakeven position for 2026/27.

**BOB0004: Access to Services:** A current score of 16 – Very High (Likelihood: 4-likely) (Impact: 4-Major). *“The risk of the health and care system being unable to achieve the 2025/26 priorities and operational planning guidance for its population resulting in poorer health outcomes for people across BOB”*. The risk has been updated to reflect BOB ICB’s 2025/26 priorities and remains broad as it covers all areas of care. Controls reviewed in line with agreed review processes providing assurances against each service area. Mitigations in place and performed through period of review.

All BOB ICB risks are being reviewed and assessed considering the current and future transitional risk, with mitigating actions adapted/created to reflect areas of change/impact.

#### Action Required

The Board is asked to note this update.

<b>Conflicts of Interest:</b>	Conflict noted: conflicted party can remain and participate in discussion.
-------------------------------	--

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.

## Chief Executive and Chief Officers' Report

### Context

1. This report provides an update to the Board regarding key topics of relevance in the Integrated Care System (ICS) and items for escalation.
2. The report shares highlights from the work of the Chief Executive, the Integrated Care Board (ICB) and its partners, and key issues that are not reported elsewhere on the Board agenda.
3. Today's agenda includes a resident's story about the children and adolescent mental health services (CAMHS), our annual report and accounts for 2024/25, an item on winter planning, and one on the Nottinghamshire homicide review. We will hear an update from the voluntary, community and social enterprise (VCSE) alliance and discuss our neighbourhood health programme.

### Chief Executive update:

#### *Regional Transition Group*

4. The South East NHSE regional director has established a Regional Transition Group which met for the first time on 29 May 2025. The group reflects the purpose of NHSE's transition executive, particularly overseeing the delivery of the regional turnaround plan for this financial year. This has six priority areas: access, financial turnaround, productivity, workforce, organisational reform and strategic commissioning. The group will now meet on a monthly basis and is jointly chaired by the Regional Director and the Interim CEO of the Frimley ICB. Membership comprises ICB and provider representation together with primary care and public health representation. I sit on the group as executive sponsor for the region's mental health programme. The group has agreed three accelerated delivery or "sprint" workstreams for the first quarter of this financial year namely, outpatients, continuing health care and corporate back office. The aim of these workstreams is to bring about rapid improvements in productivity and efficiency. Medicines optimisation and medical job planning have been identified as the priority areas for the second quarter.

#### *ICB Transition Programme*

5. On 30 May 2025, the BOB and Frimley ICBs submitted, as requested, our joint plan to NHSE to create a new Thames Valley ICB reflecting the content of the model ICB blueprint, the new financial envelope for ICB running costs nationally and the wider reform of the public sector. The plan was presented to the South East regional leadership team on 3 June 2025 and was further scrutinised by members of the regional executive during a check and challenge session on 16 June 2025. The feedback received has been positive and on 23 June 2025 we received confirmation that all plans to consolidate ICBs had received Ministerial approval. This will result in an overall reduction in the number of ICBs from 42 to 26, the majority of which will reflect new clustering arrangements. The Joint Transition Executive, which is made up of representatives from both ICB leadership teams, is now well established. It continues to meet on a weekly basis reflecting the complexity of the transition programme and the pace of change that is required. We have continued to hold all staff briefings, coordinating these with Frimley ICB, in order to ensure that colleagues in both organisations receive timely and consistent communication regarding the programme. Alongside this a joint Trade Union meeting has been established.

6. The scale and challenges of the transition programme should not be underestimated, particularly in relation to the potential impact on the wellbeing of our staff. A comprehensive package of staff support has been developed and continues to be expanded, including advice on CV writing, interview technique and career progression.

#### *Annual Assessment*

7. On 16 June 2025 we received a copy of the NHSE Regional Director's assessment of the ICB's performance in 2024/25. NHSE has a legal responsibility to conduct a performance assessment of each ICB. The assessment is based on a variety of information sources including available data, feedback from stakeholders together with the ICB's annual report and accounts. It follows the annual assessment discussion that took place with the regional team on 7 May 2025. The assessment highlights that the ICB has made progress in a number of key areas; however, has also continued to face significant challenges, reflecting in part the complexity of the landscape in which the organisation continues to operate. The overall conclusion is that the ICB should remain in segment three of the current oversight framework meaning that the organisation will receive mandated support from the south east region of NHSE in respect of the various areas of improvement that have been identified by the review. It should be noted that a new oversight framework for 2025-26 has just been announced by NHSE.

#### *NHS 10 Year Plan*

8. As this report is written at the beginning of July, we anticipate the publication of the new NHS 10 Year Plan later this week, following extensive national engagement and policy development. The plan will set out a long-term vision for transforming health and care, with a strong focus on prevention, digital innovation, and shifting care closer to communities.
9. As an ICB and wider system, we look forward to reviewing the plan in detail and identifying how its priorities align with our local ambitions. This will be a key opportunity to shape our strategic direction and ensure we are well-positioned to deliver meaningful improvements for our population over the coming years.

#### *Chief Nursing Officer*

10. Rachael Corser will be leaving the ICB next month to join Barts Health NHS Trust as their new Chief Nursing Officer. I would like to put on record my gratitude to Rachael for the major contribution she has made to the ICB and our wider system since joining the organisation in September 2022. I am also extremely grateful to her for the support she has provided me personally during my time as CEO. Her professionalism, expertise and dedication to both nursing and midwifery will be greatly missed.
11. In keeping with the plan to create a new Thames Valley ICB I am very pleased to report that Sarah Bellars, the Frimley ICB Chief Nursing Officer, will be seconded to BOB ICB following Rachael's departure and as such will become the joint Chief Nursing Officer for both organisations. In advance of this Rachael and Sarah have been working increasingly closely, as have their directorates.

#### *Chief People Officer*

12. Trusts have submitted ambitious workforce plans for 2025/26, with most of the BOB Trusts now running Mutually Agreed Resignation (MAR) schemes to reduce costs in areas such as corporate services. The overall month 1 position showed us being slightly over on cost and

under on whole time equivalent workforce (1.6% below plan), predominantly driven by reductions in substantive and agency.

13. Our internal focus has been on preparing for the organisational change process ahead. We have been working in partnership with our South East Chief People Officer colleagues to ensure we pool resources and expertise and align our approach. The change process is particularly complex from an employment law perspective, so we are seeking legal advice at key points, specifically relating to Cabinet Office Statement of Practice policy (COSoP) and Transfer of Undertakings (Protection of Employment) (TUPE) legislation. In the absence of a national Voluntary Redundancy scheme, both Frimley and BOB's Remuneration Committees will be asked to consider a MAR scheme for ICB staff, for approval by NHSE. This will give options to staff who wish to leave the organisation at an early stage.
14. We have developed an organisational development plan to support staff through the change process. This has been considered and agreed by our Staff Partnership Forum. This will include outplacement support for those leaving the organisation.

### *Chief Medical Officer*

#### **Project 100 – Targeted Improvement Support for General Practice**

15. BOB Primary Care team is engaged with a quality improvement initiative called Project 100. This is a targeted approach of support and intervention for 100 practices across the region that are showing metrics associated with lower performance; including a range of measures focused on access, patient satisfaction, quality and workforce.
16. 14 of the 100 practices in this category are located in BOB. In many cases, we were already working with these practices on improving these issues. The practices are now being intensively supported through the BOB ICB GP Improvement Plan (submitted to the South East region in June) which details local schemes and interventions which are aligned with the implementation of Modern General Practice as part of the Neighbourhood Health Model.
17. It is anticipated that this programme will contribute to a reduction in unwarranted variation of general practice access and quality experienced by residents in BOB and will support ongoing practice resilience.

#### **General Practice Estates Investment**

18. The Government has announced which schemes are to receive funding from its 'Primary Care Utilisation and Modernisation Fund 2025 to 2026'. This provides new capital funding of £102 million to support improvements in the primary care estate across the country.
19. Locally, 21 GP practices will receive a portion of the £2.8m BOB ICB allocation of this funding to improve their existing spaces to develop more consulting and treatment rooms. This investment is expected to enable local patients across BOB ICB to access more than 220,000 new appointments a year.
20. The next steps will include undertaking due diligence on the schemes and putting in place the necessary legal permissions to progress individual schemes. More details of the programme and the list of local practices being supported can be found here: [Primary Care Utilisation and Modernisation Fund 2025 to 2026 - GOV.UK](#)

#### **Clinical Effectiveness and Medicines Optimisation**

21. We are working with the BOB ICB trusts to streamline processes around evidence-based procedures, including approval of individual funding requests for procedures that are not

routinely funded by the NHS. This will reduce administrative delays and increase the standardisation of updated clinical practice across the ICS (reducing unwarranted variation).

22. We are also progressing work with trusts to develop and implement new processes using validated AI tools to support evidence-based clinical decisions in identified patient cohorts with respect to the undertaking of certain procedures and the reduction of unnecessary follow-up appointments. This will include adopting AI tools that interact directly with patients to ensure their views are included in clinical decisions.
23. Work with the acute trust Chief Medical Officers and Chief Pharmacists has progressed through the Medicines Optimisation Collaborative Leadership group (MOCL) to support biosimilar switching, to ensure cost-effective use of NHS resources.

### Health Inequalities

24. The BOB Health Inequalities work programme funding has been agreed for 2025-26 (£3.6m) and distributed to our three places to support ICB Health Inequalities priorities and Neighbourhood Health development.
25. We have also secured funding for targeted tobacco cessation services for acute inpatients, maternity patients and mental health inpatients for this financial year.
26. Working with Public Health and colleagues from Royal Berkshire Foundation Trust, we have completed a targeted screening programme for a population of asylum seekers hosted in Wokingham to identify cases of latent TB, Hepatitis B/C & HIV, to ensure early access to treatment. A plan for screening in other locations across BOB is being developed.

### Long-Term Health Conditions

27. **Cardiovascular Disease (CVD)** prevention remains a key focus of the ICB, to reduce the rates of heart disease and stroke. The BOB CVD Prevention programme continues to focus on community engagement and empowerment, leveraging national campaigns such as 'May Measurement Month'. Working with local networks and community leaders, the ICB teams are sharing simple, vital messages and resources on the management of high blood pressure, as this condition significantly increases the risk of cardiovascular events and organ damage. Therefore, managing this with appropriate blood pressure targets is crucial for preventing these adverse outcomes.
28. **Early Onset Type 2 Diabetes (EOT2D)** is a significant concern for our population. EOT2D is generally more aggressive than older onset type 2 diabetes. In BOB we have developed and delivered a comprehensive programme to improve care for the EOT2D cohort of patients in primary care. We have had successful first year of the programme in which we have seen a 4% drop in HbA1c levels (a marker of diabetes control) which will reduce future health complications. This will become part of a neighbourhood-based enhanced service for the type 2 diabetic population.
29. **Heart Failure** - A multidisciplinary team (MDT) approach to heart failure management offers significant benefits, including improved patient outcomes, reduced hospital readmissions, and enhanced quality of life. The BOB Heart Failure work aims to map out the patient journey, integration levels, and MDT working across primary, community, and secondary care in each Place. It aims to identify service gaps, barriers, good practices, and opportunities for innovation to improve the current service provision.
30. **Mechanical thrombectomy for stroke** is a minimally invasive surgical procedure used to remove blood clots from blocked arteries in the brain to treat ischaemic stroke and reduce the risk and severity of long-term disability. In BOB, this procedure is now available 24 hours a day



at Oxford University Hospitals NHS FT, one of the first round-the-clock services outside of London. Around 10% of stroke patients are suitable for thrombectomy – trusts in BOB achieved 10.6% in December 2024, which puts our ICS at the top end of national performance for this procedure. Pathway leads both from within and outside BOB continue to meet quarterly to monitor and further improve this.

### *Chief Nursing Officer*

31. In response to growing national concern about child sexual exploitation (CSE), particularly in areas such as Rotherham, Rochdale, and Oldham, the National Audit Office (NAO) published a report that critically examined how effectively government departments and agencies have responded to CSE. The NAO highlighted systemic failings in early intervention, data sharing, and safeguarding leadership. It found that although awareness and policy frameworks have improved since the early 2010s, practical implementation remains inconsistent across local authorities. Crucially, the report emphasised the need for a more joined-up approach to commissioning services, better use of intelligence to identify patterns of exploitation, and a stronger focus on victims' lived experiences.
32. Baroness Casey identified deep-rooted cultural and institutional failings that allowed child sexual exploitation (CSE) to persist unchecked. Her recommendations stress the importance of trauma-informed practice, multi-agency accountability, and the embedding of safeguarding as a collective responsibility, not an individual agency task. She also called for greater political and professional courage in confronting uncomfortable truths, particularly around race, gender, and power dynamics in CSE cases. Her work has significantly influenced national safeguarding reforms and called for robust leadership to ensure that vulnerable children are not ignored, silenced, or blamed.
33. Locally, Operation Bullfinch, led by Thames Valley Police and Oxfordshire County Council, uncovered widespread abuse of girls in Oxfordshire between 2004 and 2012. The investigation resulted in the conviction of several men in 2013 for grooming, trafficking, and abusing vulnerable girls, some as young as 11. These children, many of whom were in care or known to services, had been systematically failed by the very agencies meant to protect them. The Serious Case Review (SCR) that followed was highly critical of professionals across health, social care, and policing, citing a lack of professional curiosity, an underestimation of the risk posed by perpetrators, and a failure to listen to children's voices.
34. For Oxfordshire today, the legacy of Bullfinch means there is an acute awareness of the consequences of organisational denial and fragmented safeguarding systems. It underscores the importance of trauma-informed, multi-agency working, and the need for professionals at all levels to challenge assumptions and escalate concerns. There is also now a stronger focus on contextual safeguarding, recognising that exploitation often happens outside the home and involves peer groups, public spaces, and online environments. The impact on current practice includes heightened scrutiny of how well local systems identify and respond to emerging patterns of exploitation, and how effectively agencies are working together under the local safeguarding partnership arrangements. This highlights the active role health services play in early identification, sharing information, and offering consistent, long-term support to survivors – not just during crises.
35. On 23 June 2025 the Secretary of State for Health and Social Care announced that there would be a national rapid independent investigation into maternity and neonatal services. He announced an independent taskforce would be put in place to lead this review alongside immediate actions to improve care. It was confirmed that up to ten trusts will have an urgent

review where there have been specific issues of concern. NHS England's Chief Nursing Officer and Chief Executive will be meeting with the trusts involved in the rapid review over the next month and the investigation will report by the end of December 2025. Each trust providing maternity and neonatal services is asked to undertake five urgent actions in order to rebuild maternity and neonatal care.

36. The ICB welcomes the proposed Children's, Families and Schools Wellbeing Bill as a timely and important step towards strengthening integrated support around children and families. We recognise the critical role of local systems in shaping place-based responses, and our Families First Partnership (FFP) is well positioned to lead this work. In preparation for the 27 June 2025 deadline, the Partnerships in each Local Authority coordinated a collective response that reflects our commitment to early intervention, joined-up care, and shared accountability across health, education, social care and the voluntary sector. Our collective response has highlighted our commitment to creating innovative opportunities to reduce fragmentation and set out how we will use this legislative opportunity to accelerate delivery of outcomes that matter to children, young people and families across our system. There is a Partnership commitment to the development of joint and equal Multi-Agency Child Protection Teams (MACPTs).

#### *Chief Delivery Officer*

37. The national 2025/26 Urgent Care plan has been issued and outlines three priority actions:
  - Focus as a whole system on achieving improvements that will have the biggest impact on urgent and emergency care services this winter
  - Develop and test winter plans, making sure they achieve a significant increase in urgent care services provided outside hospital compared to last winter
  - National improvement resource and additional capital investment is simplified and aligned to supporting systems where it can make the biggest differenceLocal teams and place partnerships are developing winter plans reflecting these priorities and actions.
38. The contract for a new Wheelchair provider covering Berkshire West has been awarded to AJM healthcare and will commence on 15 August 2025.
39. The ICB has received further guidance around advice and guidance supporting the new locally commissioned service for general practice and developing a systematic approach to working across primary and secondary care to further develop the model. The intention is to significantly increase the use of advice and guidance to support patient care and release outpatient capacity within local NHS trusts.
40. The system's three acute providers have been placed within the Cancer Tiering support model at Tier 2. This involves increased regional oversight on a fortnightly basis to develop improvement plans and support system working. The Thames Valley Cancer Alliance is involved in this process and supporting with additional funding and subject matter expertise.
41. Part 1 of the report of the national independent ADHD taskforce has been published including four recommendations:
  - ADHD should not be seen as the remit of health alone.
  - An entirely specialist, single diagnosis model is not sustainable, or evidence informed
  - Support for ADHD and neurodivergence should begin early
  - ADHD services need to be digitised, and data improved.

Locally we are progressing our system wide work on ADHD through a BOB system wide workshop to design a new ADHD service model for adults on 16 July 2025. Participants include experts by experience, VCSE, Commissioners and providers



*Chief Strategy, Digital and Transformation Officer*

42. A system wide programme is being established to accelerate the development of local neighbourhood models of care. Working in close collaboration with place-based partnerships and neighbourhood leads, the programme aims to support and enable the delivery of local integrated health and care models across communities. Measurable population-focused outcomes will support progress in consistent areas covering prevention, the management of long-term conditions, and proactive supporting people with complex needs linking closely with the ambitions of the 10 Year Health Plan.
43. The NHS has confirmed a national shift from annual to medium term system planning, following the outcome of the Government's Spending Review 2025. As announced by the NHS England Chief Executive in June, ICBs are expected to adopt a three year planning cycle, designed to enable a more strategic, sustainable approach to operational and financial performance. In response to these developments, the ICB has developed a high-level approach to share and test with partners including a review of the 2025/26 planning round. Interviews are being undertaken with system leaders to ensure we are learning lessons from previous years.
44. The ICB Data Security and Protection Toolkit (DSPT) submission was made on 26 June 2025, meeting the deadline of 30 June. This is the first year of the new Cyber Assessment Framework (CAF) based DSPT for Category 1 organisations. The CAF based DSPT was a significant change in both approach and workload which has been recognised by NHS England. There are currently no plans to change the format of the DSPT for 2025/26 or the status of any of the Outcomes. NHSE restricted the achievement level to Standards Met for 2024/25 and BOB ICB made a Standards Met submission.
45. ICS digital governance has been streamlined merging three groups into one ICS Digital and Data Group chaired by RBFT's Chief Information Officer. Terms of reference are to be reviewed as Model ICB digital responsibilities are clearer and as digital governance within the Provider Collaboratives mature.
46. The Community Insight and Involvement Team was established on 6 January 2025 as part of the ICB's restructure. In the first six months, the team has laid foundations for sustainable engagement by building relationships with existing and new community partners.
47. We have developed and recruited residents onto the [Your Voice in BOB](#) engagement platform, which enables people to have their say on projects and proposals related to health and care. People can register to be regular users of the platform and can be kept informed on work of the ICB and partners.
48. We have scoped the development of an insight-bank to store and share health and care insight across BOB. This work is being undertaken with partners across the BOB Integrated Care System and with community representatives.
49. Key engagement activities include:
  - Health Plan Workshops: 14 public sessions held to shape the national 10-Year Health Plan.
  - Youth & SEND: Engaged over 200 young people at the Bucks Youth Summit and worked with SEND groups to amplify their voices.

- Roles within Primary Care Awareness: Held a co-design workshop with Patient Participation Groups (PPGS) and developed PPG pages on Your Voice in BOB to raise awareness of new roles in GP practices.
- Public Outreach: Attended events like the Oxford Sanctuary Fair to support asylum seekers and migrants in accessing healthcare and understanding blood pressure risks.
- CVD Prevention: Focused on engaging people with high blood pressure/cholesterol in deprived areas (East Oxford, Reading, Banbury, Aylesbury). Working with GPs, community leaders, and running a pilot in Banbury to understand and remove barriers to care.

#### *Chief Finance Officer*

50. The ICB has reported financial performance delivery to plan at Month 2 for the ICB and the BOB System as a whole. Some system organisations, including the ICB, are behind on Cost Improvement Plans at Month 2 but there is confidence that this can be recovered in coming months.
51. The ICB has been working intensively with partner organisations concluding contracting and progressing the financial plans that have been agreed across the system. At the time of writing there is confidence that in-system contracts will be signed before or immediately in the days after the 30 June 2025 deadline.
52. Some of the BOB system acute organisations are forecasting cash shortfalls at month ends during the year. In the absence of a national revenue cash support regime the ICB is working with partner organisations to develop short-term cash support arrangements.
53. The ICB progressing with the implementation of ISFE2 the new electronic ledger and enterprise reporting and planning system which is due to go live on 1 October 2025. There are some risks relating to this which have been escalated to NHSE England.

# BOB0001 - Health Inequalities

<b>If:</b>	the ICB is unable to integrate and lead effectively with its system partners in relation to improving health outcomes and reducing health inequalities	<b>Project:</b>	ICB Board Assurance Framework (BAF)		
<b>Gaps in Control Identified:</b>	Yes	<b>Status:</b>	Open		
<b>NHS Oversight Framework Themes:</b>	Preventing ill-health and reducing inequalities	<b>Created:</b>	17 Nov 2022		
<b>Owner:</b>	Ben Riley, Chief Medical Officer	<b>Identified:</b>			
<b>Assignee:</b>	Steve Goldensmith, Associate Director Prevention and Health Inequalities	<b>Scoring</b>			
			Impact	Likelihood	Priority
		Inherent	3	3	9
		Residual	3	3	9
		Target	2	3	6

## Controls

Reference	Control Summary	Owner	Assignee	Score	Last Assurance
1472	The putting in place of agreed priorities as defined in JFP & Integrated Care Strategy to tackle health inequalities through Place and clinical...	No User	No User	0.50	11 Apr 2024
3738	The oversight and maintaining of good Governance around Health Inequalities.	Steve Goldensmith	Jo Reeves	0.50	14 Oct 2024
3739	Resourced Actions - Decisions to inform the allocation and oversight of their delivery of Health Inequalities.	Steve Goldensmith	Jo Reeves	0.50	11 Apr 2024
3740	Population Health Management - improvement of data and analysis to inform health Inequalities priorities and outcomes.	Steve Goldensmith	Jo Reeves	0.50	11 Apr 2024
3741	Capacity and confidence to address inequalities across the multi disciplinary workforce	Steve Goldensmith	Jo Reeves	0.50	11 Apr 2024

## Actions

Reference	ICB BAF Action Summary	Owner	Assignee	Variable Target	Last Updated
1163	Place development of plans for use of HI funding	Ben Riley	Jo Reeves	06 Jun 2025	09 May 2025
3743	Prevention, Population Health and Reducing Health Inequalities meetings established and working well.	Jo Reeves	Jo Reeves	10 Jul 2025	09 May 2025
3744	Population Health Management Collaboration Group spreading good practice across system	Jo Reeves	Jo Reeves	10 Jul 2025	09 May 2025
3749	Map and network with workforce leads to identify opportunities to influence training programmes to become more inequalities aware	Jo Reeves	Jo Reeves	01 Oct 2025	02 Apr 2025
4481	To develop and implement a plan to ensure HI remains a priority across BOB ICB,	Steve Goldensmith	Steve Goldensmith	01 Jul 2025	02 Apr 2025

Risk Appetite: Score 3 - Balanced  
Risk is currently **below** Appetite  
Appetite Lower: 11  
Appetite Upper: 16

**3 - Balanced:** Will consider all options and tolerate a modest amount of risk if the reward is demonstrated. Acceptance that some loss may occur in pursuit of the reward.

BOB0002 - Financial Sustainability

If:	the BOB Integrated Care System is unable to manage its expenditure within its available resource	Project:	ICB Board Assurance Framework (BAF)			
Gaps in Control Identified:	No	Status:	Open			
NHS Oversight Framework Themes:	Finance and use of resources	Created:	17 Nov 2022			
Owner:	Alastair Groom, Chief Finance Officer	Identified:				
Assignee:	Dilani Russell, Director of Operational Finance	Scoring		Impact	Likelihood	Priority
		Inherent	4	5	20	
		Residual	4	5	20	
		Target	4	3	12	

Controls

Reference	Control Summary	Owner	Assignee	Score	Last Assurance
1473	NHSE financial controls implemented across all organisations within the system. All new expenditure by ICB approved by Executive Team,...	Alastair Groom	Alastair Groom	0.50	21 Nov 2024
4152	STRB leading on system recovery. Applying additional focus to short term delivery in light of current financial pressures.	Alastair Groom	Alastair Groom	0.50	21 Nov 2024

Actions

Reference	ICB BAF Action Summary	Owner	Assignee	Variable Target	Last Updated
4543	BOB ICB to achieve breakeven position for 2026/27.	Alastair Groom	Alastair Groom	31 Mar 2026	24 June 2025
4544	BOB ICB to report fortnightly to NHSE on financial position.	Alastair Groom	Alastair Groom	20 Jun 2025	24 June 2025

Risk Appetite: Score 3 - Balanced	3 - Balanced: Will consider all options and tolerate a modest amount of risk if the reward is demonstrated. Acceptance that some loss may occur in pursuit of the reward.
Risk is currently <b>above</b> Appetite	
Appetite Lower: 11	
Appetite Upper: 16	

BOB0003 - Resilience

<b>If:</b>	the BOB health and care system lacks resilience to respond to significant incidents, events and emergencies	<b>Project:</b>	ICB Board Assurance Framework (BAF)		
<b>Gaps in Control Identified:</b>	No	<b>Status:</b>	Open		
<b>NHS Oversight Framework Themes:</b>	Access and outcomes	<b>Created:</b>	17 Nov 2022		
<b>Owner:</b>	Matthew Tait, Chief Delivery Officer	<b>Identified:</b>			
<b>Assignee:</b>	Hannah Mills, Performance and Delivery UEC and Planned Elective	<b>Scoring</b>			
			Impact	Likelihood	Priority
		Inherent	4	3	12
		Residual	4	2	8
		Target	4	2	8

Controls

Reference	Control Summary	Owner	Assignee	Score	Last Assurance
1475	NHSE EPRR Standards and Review	No User	No User	1.00	25 Sep 2024
1476	Review through Audit and Risk Committee	No User	No User	0.75	25 Sep 2024
1477	Production of Annual Report to Board	No User	No User	0.50	25 Sep 2024
1478	Robust risk and capability management in partnership with stakeholders - LRF and LHRP	No User	No User	0.50	25 Sep 2024
1479	EPRR work programme developed against risks	No User	No User	0.50	25 Sep 2024
1480	Internal Business Continuity Management System	No User	No User	0.50	25 Sep 2024

Actions

Reference	ICB BAF Action Summary	Owner	Assignee	Variable Target	Last Updated
4142	Following Board Review and Core Standards Review, a work plan for 2025/26 to be produced.	Paul Jefferies	Paul Jefferies	30 Oct 2025	30 Oct 2025

Risk Appetite: Score 4 - Open  
Risk is currently **above** Appetite  
Appetite Lower: 17  
Appetite Upper: 21

4 - Open: Open to consider all options and take a greater degree of risk and tolerate higher uncertainty to achieve a bigger reward. Likely to choose an option that had a greater reward and accepts some loss.



BOB0004 - Access to Services

<b>If:</b>	The BOB health and care system does not meet its targets	<b>Project:</b>	ICB Board Assurance Framework (BAF)		
<b>Gaps in Control Identified:</b>	No	<b>Status:</b>	Open		
<b>NHS Oversight Framework Themes:</b>	Access and outcomes	<b>Created:</b>	17 Nov 2022		
<b>Owner:</b>	Matthew Tait, Chief Delivery Officer	<b>Identified:</b>	10 Dec 2024		
<b>Assignee:</b>	Ben Gattlin, Associate Director Performance Oversight	<b>Scoring</b>			
			Impact	Likelihood	Priority
		Inherent	4	4	16
		Residual	4	4	16
		Target	4	3	12

Controls

Reference	Control Summary	Owner	Assignee	Score	Last Assurance
1481	NHSE assurance and oversight processes	No User	No User	1.00	31 Jul 2024
1482	Review at PHPE Committee	No User	No User	1.00	05 Apr 2024
1483	System Wide Boards	No User	No User	0.50	05 Apr 2024
1484	Processes with Trusts	No User	No User	1.00	05 Apr 2024
1485	Board Performance Reports	No User	No User	1.00	05 Apr 2024
3982	System Oversight Meeting	Matthew Tait	Ben Gattlin	1.00	23 Jul 2024
4435	Actions assigned and carried out as part of the monthly meeting review process	Matthew Tait	Ben Gattlin		

Actions

Reference	ICB BAF Action Summary	Owner	Assignee	Variable Target	Last Updated
4435	Actions assigned and carried out as part of monthly review process	Matthew Tait	Ben Gattlin	31 Aug 2023	26 Feb 2025

Risk Appetite: Score 3 - Balanced  
Risk is currently **within** Appetite  
Appetite Lower: 11  
Appetite Upper: 16

3 - Balanced: Will consider all options and tolerate a modest amount of risk if the reward is demonstrated. Acceptance that some loss may occur in pursuit of the reward.

BOB0005 - Transformation

<b>If:</b>  <b>Gaps in Control Identified:</b> <b>NHS Oversight Framework Themes:</b> <b>Owner:</b> <b>Assignee:</b>	the ICB is unable to develop a strong strategic commissioning capacity due to ongoing organisational changes and gaps in delivery	<b>Project:</b>	ICB Board Assurance Framework (BAF)			
	Yes	<b>Status:</b>	Open			
	Access and outcomes	<b>Created:</b>	17 Nov 2022			
	Hannah Iqbal, Chief Strategy, Digital and Transformation Officer	<b>Identified:</b>	30 Jan 2025			
	Robert Bowen, Director System Transformation and Development	<b>Scoring</b>				
			Impact	Likelihood	Priority	
		Inherent	4	4	16	
		Residual	3	3	9	
		Target	3	2	6	

Controls

Reference	Control Summary	Owner	Assignee	Score	Last Assurance
4070	Work being undertaken under risk STR0008 in relation to provider collaboratives. ICB forward vision is currently being finalized in the BOB ICB...	Hannah Iqbal	Darcy Carter	0.00	05 Sep 2024
4071	System recovery and transformation board in place	Hannah Iqbal	Darcy Carter	0.00	05 Sep 2024
4313	Monthly update to be presented to Board	Darcy Carter	Darcy Carter	0.50	10 Dec 2024

Actions

Reference	ICB BAF Action Summary	Owner	Assignee	Variable Target	Last Updated
4314	Processes managed as part of system priority workstreams	Hannah Iqbal	Darcy Carter	30 Jan 2025	01 Apr 2025

Risk Appetite: Score 4 - Open

Risk is currently **below** Appetite

Appetite Lower: 17

Appetite Upper: 21

4 - Open: Open to consider all options and take a greater degree of risk and tolerate higher uncertainty to achieve a bigger reward. Likely to choose an option that had a greater reward and accepts some loss.

BOB0006 - Safety, Safeguarding and Quality,

<b>If:</b>	the ICB does not have the correct safeguarding and quality assurance mechanisms in place	<b>Project:</b>	ICB Board Assurance Framework (BAF)			
<b>Gaps in Control Identified:</b>	Yes	<b>Status:</b>	Open			
<b>NHS Oversight Framework Themes:</b>	People and leadership and capability	<b>Created:</b>	17 Nov 2022			
<b>Owner:</b>	Rachael Corser, Chief Nursing Officer	<b>Identified:</b>				
<b>Assignee:</b>	Heidi Beddall, Director Quality & Deputy CNO	<b>Scoring</b>		Impact	Likelihood	Priority
		Inherent	4	3	12	
		Residual	4	3	12	
		Target	4	2	8	

Controls

Reference	Control Summary	Owner	Assignee	Score	Last Assurance
3675	Operational and system quality groups embedded	Rachael Corser	Heidi Beddall	1.00	23 Aug 2024
3676	ICB internal equality and quality impact assessment panel established	Rachael Corser	Heidi Beddall	0.50	23 Aug 2024
3677	Contracts for 24/25 updated to include safeguarding and quality requirements	Rachael Corser	Heidi Beddall	0.50	23 Aug 2024
3678	Contract review meetings to be established in 25/26 including safeguarding and quality....	Rachael Corser	Heidi Beddall	0.00	04 Jun 2025
3679	Quality insight visits protocol published - forward planner for 24/25 visits	Rachael Corser	Heidi Beddall	0.50	23 Aug 2024
3734	Quality assurance framework updated for 24/25	Rachael Corser	Heidi Beddall	0.50	23 Aug 2024
3735	ICB quality strategy to be published in 25/26	Rachael Corser	Heidi Beddall	0.00	04 Jun 2025
4273	New Framework for Assurance Reporting has been implemented and rolled out to our providers. This aligns with Safeguarding contractual schedule.	Katherine Elsmore	Katherine Elsmore	0.00	30 Dec 2024
4429	PSIRF oversight model in place	Heidi Beddall	Heidi Beddall	0.00	04 Jun 2025

Actions

Reference	ICB BAF Action Summary	Owner	Assignee	Variable Target	Last Updated
3823	Quality Strategy- awaiting national quality strategy publication prior to drafting ICB quality strategy	Heidi Beddall	Heidi Beddall	17 Jun 2025	17 Apr 2025
3824	Establish Contract review meetings (with Finance)	Heidi Beddall	Heidi Beddall	17 Jun 2025	17 Apr 2025
4275	a. Consulting with provider safeguarding leads monthly...	Katherine Elsmore	Katherine Elsmore	17 Jun 2025	17 Apr 2025
4430	Prepare for delegation of POD and specialised commissioning quality oversight	Heidi Beddall	Heidi Beddall	31 Mar 2026	31 Mar 2026
4431	Develop quality dashboard	Heidi Beddall	Heidi Beddall	06 Aug 2025	04 Jun 2025
4432	Revise internal quality governance reporting	Heidi Beddall	Heidi Beddall	17 Jun 2025	17 Apr 2025

Risk Appetite: Score 2 - Cautious  
Risk is currently **above** Appetite  
Appetite Lower: 6  
Appetite Upper: 10

2 - Cautious: Preference for safe delivery options but is able to tolerate low level risk and uncertainty. Every decision will be with the aim of mitigating the level of risk.

BOB0007 - Working in Partnership

<b>If:</b>	BOB does not develop effective partnerships across place, system and beyond	<b>Project:</b>	ICB Board Assurance Framework (BAF)		
<b>Gaps in Control Identified:</b>	No	<b>Status:</b>	Open		
<b>NHS Oversight Framework Themes:</b>	People and leadership and capability	<b>Created:</b>	17 Nov 2022		
<b>Owner:</b>	Matthew Tait, Chief Delivery Officer	<b>Identified:</b>	10 Dec 2024		
<b>Assignee:</b>	Matthew Tait, Chief Delivery Officer	<b>Scoring</b>			
			Impact	Likelihood	Priority
		Inherent	4	3	12
		Residual	4	3	12
		Target	4	2	8

Controls

Reference	Control Summary	Owner	Assignee	Score	Last Assurance
1492	NHSE assurance and oversight	No User	No User	1.00	16 Sep 2024
1493	Review at SPD Committee	No User	No User	1.00	16 Sep 2024
1494	Processes with Trusts	No User	No User	1.00	16 Sep 2024
1495	Board Reports & Updates	Matthew Tait	No User	1.00	16 Sep 2024
3571	Implementation of new Operating Model	No User	No User	0.50	16 Sep 2024
3969	Specific agenda item on Quarterly NHSE Review meetings to look at Partnership Development	Matthew Tait	Dawn Riddell	0.50	16 Sep 2024
3972	Update at PSD Committee meetings on Partnership working / Acute Provider Collaborative and Mental Health Collaborative.	Matthew Tait	Dawn Riddell	0.50	16 Sep 2024
3975	Single Place focus at every Board meeting	Matthew Tait	Dawn Riddell	0.50	16 Sep 2024

Actions

Reference	ICB BAF Action Summary	Owner	Assignee	Variable Target	Last Updated
3637	Development of a new assurance & oversight framework.	Ben Gattlin	Dawn Riddell	31 Dec 2024	16 Sep 2024

Risk Appetite: Score 4 - Open

Risk is currently **below** Appetite

Appetite Lower: 17

Appetite Upper: 21

4 - Open: Open to consider all options and take a greater degree of risk and tolerate higher uncertainty to achieve a bigger reward. Likely to choose an option that had a greater reward and accepts some loss.

BOB0008 - ICB Workforce

<b>If:</b>	the care system within the BOB geography is unable to attract and retain a suitably qualified workforce	<b>Project:</b>	ICB Board Assurance Framework (BAF)		
<b>Gaps in Control Identified:</b>	Yes	<b>Status:</b>	Open		
<b>NHS Oversight Framework Themes:</b>	People and leadership and capability	<b>Created:</b>	17 Nov 2022		
<b>Owner:</b>	Sandra Grant, Chief People Officer	<b>Identified:</b>	31 Jan 2025		
<b>Assignee:</b>	Sandra Grant, Chief People Officer	<b>Scoring</b>			
			Impact	Likelihood	Priority
		Inherent	3	3	9
		Residual	3	3	9
		Target	3	2	6

Controls

Reference	Control Summary	Owner	Assignee	Score	Last Assurance
1496	Build targeted recruitment strategies that align workforce planning with long-term business strategies.	Sandra Grant	Sandra Grant	0.50	11 Dec 2024

Actions

Reference	ICB BAF Action Summary	Owner	Assignee	Variable Target	Last Updated
4145	System projects in place to manage mental health patients in a non mental health setting to ensure we optimise our mental health workforce.	Sandra Grant	Dailshad Cunnan	11 June 2025	11 June 2025
4146	Aligning our bank payment levels so that we ensure that staff are treated fairly and that retention is consistent across organisations.	Sandra Grant	Dailshad Cunnan	11 June 2025	11 June 2025
4147	Reviewing skills shortages and taking a system wide approach to increasing supply.	Sandra Grant	Dailshad Cunnan	11 June 2025	11 June 2025
4419	All Controls and actions are reviewed as part of the monthly review process	Sandra Grant	Dailshad Cunnan	11 June 2025	11 June 2025

Risk Appetite: Score 4 - Open  
Risk is currently **below** Appetite  
Appetite Lower: 17  
Appetite Upper: 21

4 - Open: Open to consider all options and take a greater degree of risk and tolerate higher uncertainty to achieve a bigger reward. Likely to choose an option that had a greater reward and accepts some loss.



BOB0009 - ICS Workforce

<b>If:</b>	NHS BOB ICB does not work with system partners to ensure an appropriate and affordable NHS workforce	<b>Project:</b>	ICB Board Assurance Framework (BAF)		
<b>Gaps in Control Identified:</b>	No	<b>Status:</b>	Open		
<b>NHS Oversight Framework Themes:</b>	Access and outcomes	<b>Created:</b>	02 Jan 2025		
<b>Owner:</b>	Sandra Grant, Chief People Officer	<b>Identified:</b>	02 Jan 2025		
<b>Assignee:</b>	Sandra Grant, Chief People Officer	<b>Scoring</b>			
			Impact	Likelihood	Priority
		Inherent	4	4	16
		Residual	4	4	16
		Target	4	3	12

Controls

Reference	Control Summary	Owner	Assignee	Score	Last Assurance
4391	Review of the System People Governance Structure	Sandra Grant	No User	0.50	31 Jan 2025
4392	Increasing performance approach to workforce planning and improving productivity	Sandra Grant	No User	0.50	31 Jan 2025
4395	Continuing to deliver the south east temporary staffing programme	Sandra Grant	Sandra Grant	1.00	31 Jan 2025
4396	A facilitated event with Julian Emms - System Planning	Sandra Grant	Sandra Grant	0.00	11 June 2025

Actions

Reference	ICB BAF Action Summary	Owner	Assignee	Variable Target	Last Updated
4393	Embedding SPGS once approved	Sandra Grant	Sandra Grant	31 Mar 2025	11 June 2025
4394	Developing NHS Trust workforce productivity and improvement plan	Sandra Grant	Sandra Grant	31 Mar 2025	11 June 2025
4396	Introducing the Scaling Corporate Services Programme	Sandra Grant	Sandra Grant	31 Mar 2025	11 June 2025

Risk Appetite: Score 4 - Open  
Risk is currently **below** Appetite  
Appetite Lower: 17  
Appetite Upper: 21

4 - Open: Open to consider all options and take a greater degree of risk and tolerate higher uncertainty to achieve a bigger reward. Likely to choose an option that had a greater reward and accepts some loss.