

Committee Escalation and Assurance Report – Alert, Advise, Assure

Report from: Bradford District and Craven Partnership Board

Date of meeting: 12 January 2024

Report to: WY ICB Board

Report completed by: Catherine Smith for Elaine Appelbee (chair) & Mel Pickup (place lead)

Date: 12 January 2024

Key escalation and discussion points from the meeting

Alert:

- **Financial position** – the increasing pressure on the financial position of the Health and Care Partnership was described. There is significant risk in achieving the revised in-year £13.5m deficit plan position for NHS partners in Bradford District and Craven (related risks on the partnership risk register include in-year financial performance - risk 2386 - and underlying financial deficit - risk 2337). A 'closing the gap' programme has been established in relation to the deficit though there is additional risk on the capacity, engagement and resources needed to enact the changes required to close the financial gap. Of the additional national funding of £800m to address the financial and operational consequences of ongoing industrial action Bradford District and Craven will receive £3.7m (this has already been accounted for in the revised £13.5m planned deficit above).
- The scale of the **financial challenges faced by Bradford Metropolitan District Council (BMDC)** was described. BMDC are reporting an overspend of approximately £73m in 2023-24 which will result in a budget gap of approximately £121m (before one-off use of £48m balance sheet reserves). Exceptional Financial Support has been requested from the government to balance the budget - without it a section 114 notice will be issued which could imply immediate spending restrictions other than statutory or contracted services. It has been agreed by the Partnership Leadership Executive and approved by the Partnership Board that the risk related to BMDC's financial position (risk 2173) should increase in score from 20 to 25 for an interim period to reflect the significant pressures whilst mitigations are put in place.

Advise:

- **Industrial action** – ongoing industrial action by junior doctors was noted alongside the impacts on patients in terms of longer waits for elective care and outpatient appointments. Work continues to mitigate the impacts of further periods of industrial action. The impacts of industrial action are included in the WY ICB risk register (risk 2398).
- **Shortage of ADHD medication** – the System Quality Committee highlighted that the shortages, which are expected to continue until at least March 2024, are leading to delays and backlogs in people being assessed and treated as well as leading to longer waiting times for new medication.

Assure:

- **Citizen Forum** – the Board noted work to review the Citizen Forum which had been held to look at how it can evolve to better meet the needs of the partnership and strengthen citizen voice in decision-making. The Board recognised the role of the Forum in providing a network to get a better understanding of local communities within the partnership, to bring insight and data together to help inform decision-making and the instrumental role of the Forum in the successful ‘listen in’ programme. The Board agreed with a number of proposals related to the further development of the Forum, including a proposal for a priority director to be co-opted to chair the strategic group of the Citizen Forum on a rotational basis in order to enable stronger strategic links and for involvement to be embedded into the priority workstreams. It was noted that the new arrangements would be accompanied with a new Terms of Reference and would be in place from April 2024.
- **Deep dive into the VCSE sector** – an update was provided on the VCSE’s work and involvement in pressured areas in the local health and care system and their role in co-designing and co-delivering transformational services in the district between the VCSE and health. Focus was provided on work within reducing pressures in primary care, secondary care (urgent care), discharge and readmissions. Suggestions for what else could be done to further reduce pressure on health and care services and improve the experience and outcomes for local people. It was highlighted that due to the financial position of BMDC there are cuts to the infrastructure support contract which will impact on the VCSE. Discussions are ongoing as to how the impact of the cuts can be mitigated and how the VCSE can support BMDC and the partnership. The risk on the partnership risk register related to the sustainability of the VCSE (risk 2386) will be updated to reflect the current position.
- It was noted that although the full **planning guidance for 2024/25** had not been published work to plan based on most likely scenarios continues with the planning submission expected to be due at the end of February 2024.

Committee Escalation and Assurance Report – Alert, Advise, Assure

Report from: Calderdale Care Partnership Board

Date of meeting: 25th January 2023

Report to: WY ICB Board

Report completed by: Alex Harris

Date: 31 January 2024

Key escalation and discussion points from the meeting

Alert:

Place Lead report

There remains a risk of further strike action arising from pay disputes.

Place Finance Report

Lesley Stokes highlighted that risks remain in delivery of budget. Finance teams across the ICB were working together but standard efficiencies would not close all gaps.

Advise:

Risk Report

Two new risks have been added to the Place risk register, these relate to

1. Lack of qualified pharmacy staff from 2026 onwards across the West Yorkshire footprint, and
2. Compliance with the Primary Care Access Recovery Plan, Cutting Bureaucracy - requiring acute trusts to have implemented electronic fit notes either through text or email where the patient prefers, by 30 November 2023.

A potential additional risk related to infectious diseases is under consideration due to the current national outbreak of measles.

Quality and Safety Report

A West Yorkshire group has been set up following the November MHRA alert regarding Sodium Valproate, which will develop a West Yorkshire response.

Terms of Reference of the Calderdale Cares Quality Group (CCQG)

The ToR have been revised and approved by the CCQG. The Calderdale Cares Partnership Board APPROVED the revised CCQG Terms of Reference.

Assure:

Place Performance Report

The Board were informed that good practice including partnership working and dedicated funds for Health Inequalities at WY ICB has been shared with other ICBs, and the Place Lead will be talking to the King's Fund on the 6th Feb on the role of place based partnerships to support health and wellbeing.

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Report from: Kirklees ICB Committee

Date of meeting: 10 January 2024

Report to: WY ICB Board / WY ICB Finance, Investment and Performance Committee / WY ICB Quality Committee

Report completed by: Carol McKenna (Accountable Officer, Kirklees)

Date: 21 February 2024

Key escalation and discussion points from the meeting

Alert:

- The Committee discussed the place finance position for 2023/24 and the challenges being faced in planning for 24/25. It was noted that further time would be spent on financial planning in a committee development session in February.
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Advise:

- The Committee received people stories in the form of a presentation from HealthWatch in relation to the carers' lanyard initiative and confirmed its support for this approach.
- The Committee received a report which provided assurance on the actions agreed in relation to the contract recommendation for Locala CIC. The recommendation to undertake a direct award of contract was ratified at the West Yorkshire ICB's Finance, Investment and Performance Sub-Committee in October.
- The Committee received an update from the Accountable Officer which included an update on the Operating Model review and the outcome of the staff consultation.
- The Committee held a session in private to receive a joint presentation from CHFT and MYTT in relation to maternity services.

Assure:

- The Committee received its regular reports on finance, performance and quality.
- In relation to quality, items highlighted from the Quality Sub-Committee included:

- South West Yorkshire Partnership Foundation Trust (SWYPFT) Care Quality
- Commission (CQC) published inspection report
- Emergency Care Standards
- Sodium Valproate Medicines and Healthcare products Regulatory Agency (MHRA) Safety alert
- CHFT Never Events
- MYTT mixed sex accommodation breaches
- National Adult Inpatient Survey 2022
- Infection, Prevention and Control (IPC) update

- The Committee reviewed its High-Level Risk Report and Log, along with the Risk on a Page Report as at the end of the current risk review cycle (Cycle 5 2023/24).

The total number of risks during the current cycle and the numbers of Critical and Serious Risks were set out in the report.

The Committee noted the risk in relation to due to the Home Office proposal to house a large number of asylum seekers in one large accommodation block in Huddersfield town centre, resulting in a significant increase in demand for all health services (including general practice, dental, mental health, safeguarding, secondary care).

Committee Escalation and Assurance Report – Alert, Advise, Assure

Report from: Wakefield District Health and Care Partnership Committee

Date of meeting: 09 January 2024

Report to: WY ICB Board

Report completed by: Joanne Lancaster, Governance Manager

Date: 09 January 2024

Key escalation and discussion points from the meeting

Alert:

- **Serious Incident** - A referral was made to Wakefield Safeguarding Adults Board (SAB) to consider whether a serious incident in contingency accommodation for people seeking asylum met the threshold for a statutory review. Although there was no evidence that the individual had care and support needs (so therefore a safeguarding adults review (SAR) would not be commissioned) the SAR panel discussed the concerns the case raised, and it was felt that follow up action was needed. This included SAB chair to raise concerns through the national network for SAB chairs and for findings from the serious incident investigation to be shared once concluded to consider any further multi-agency/safeguarding learning.

Advise:

- **February WDHCP development session** will consider governance meeting structure aligning to West Yorkshire ICB review of the ICB governance structure.
- **Pontefract Midwife Led Unit** – The committee approved the proposal that the temporary suspension of the birthing facility should be made permanent and that the maternity service at Pontefract Hospital should continue to focus on the provision of ante-natal and post-natal care and family support, complemented by community midwifery services and home births. This followed a decision that had been taken in the autumn of 2019 around the temporary suspension of intrapartum care at the Midwife Led Unit in Pontefract on the grounds of clinical safety and to allow the workforce to be prioritised in areas where there was the most clinical need: the labour ward and MLU at Pinderfields, where most of the district's births take place, and on providing high quality ante-natal and post-natal care. There is a requirement to formalise any permanent solution and to 'consult, engage or otherwise inform' the public. During 2018/19 there had been extensive public and staff engagement, including discussions with the Yorkshire and Humber Clinical Senate and NHSE with the intention of progressing to formal consultation on a revised service model, which would not include provision of intrapartum care (care during active labour/births). As there had been significant engagement previously and the position had not changed it was felt there were no tangible options to consult the public on and it would be better to inform and communicate the service changes. (This position will be revisited in the light of subsequent discussions with the Adult Services, Public Health and the NHS

Overview and Scrutiny Committee.) In the period since the suspension, national guidance has changed with a strong focus on safety and there was strong evidence that outcomes are improved by improving ante-natal and post-natal care. The National Institute for Health and Care Excellence (NICE) guidance was updated in 2023 and says that high performing trusts will offer four places of birth either within the district or in a neighbouring district. These proposals will not affect this and there will be the additional offer of access to a freestanding MLU when the birthing facility was reinstated at Dewsbury in due course.

- **Children's Observation Unit** - has been run as a pilot from mid-October 2023 and is due to end in February. It is being delivered by Conexus Healthcare CIC and 701 children have been supported so far. Of the 701 children seen, 35 patients went on to need admission and the other 95 per cent were supported at home. The number of referrals and day passes issued by practices is going up week by week. In the week from 11 December to 17 December, the hub saw 111 children.
- **Walk-in Centre** – we have successfully secured a further three-year lease for the Walk-in Centre to remain in King Street in Wakefield.
- **Health Determinants Research Collaboration Update** - Wakefield is one of 11 applicants to be awarded funding (£5m) to establish a Health Determinants Research Collaboration (HDRC), from the National Institute for Health and Care Research (NIHR). With a long-term aim of tackling health inequalities, the grant will help build capacity, infrastructure and skills so we can be leaders in research. Leeds Beckett and Sheffield Hallam universities are the academic partners and there is a recruitment phase underway.

Assure:

- **The Month 8 Financial Position** was discussed, and Wakefield have reported £4m adverse variance to its planned surplus of £5.9m in line with the agreed reporting position of the WY ICS with NHS England. There are a number of risks to the achievement of the NHS Financial Plan across all the Wakefield Place. The ICB is in receipt of additional funding from NHS England to cover some of these costs, which should improve this position, but we are awaiting distribution of funding at place level.
- **The Wakefield Place Risk Register** was discussed, there has been a focus on static risks during this risk cycle and meetings have taken place with all risk owners to review risks and determine whether risk scores are still appropriate. Deep dive at a Wakefield place development session had taken place around the critical risks.

Committee Escalation and Assurance Report – Alert, Advise, Assure

Report from: Finance Investment and Performance Committee (FIPC)

Date of meeting: 27 February 2024

Report to: WY ICB Board

Report completed by: Cathy Elliott, ICB Board Chair (chair of meeting)

Date: 7 March 2024

To Note: The Chair of FIPC Arunangsu Chatterjee was on leave and due to limited NEM availability, the ICB Board Chair Cathy Elliott chaired this meeting as an exception with NEM Majid Hussain in attendance.

Key escalation and discussion points from the meeting

Alert:

Finance and Investment - 2024/25 Financial Planning:

- The Committee received the latest 2024/25 system finance plan across 10 NHS providers, and the ICB, noting a deficit plan as of 27 February 2024 which was work in progress.
- The ICB Board's commitment to delivering its statutory duty of a balanced system plan was noted.
- The Committee noted that, based on current planning assumptions, there was an efficiency and productivity requirement of c.8% to deliver a system break-even position, and the existing West Yorkshire planning principles and peer review process continually undertaken to support this.
- The Committee reiterated that safety should not be compromised, and discussed the related consequences of efficiency savings in terms of quality of service.
- Actions agreed to be undertaken across Places and the ICB overall included further engagement with clinicians being required, a need to re-size services to demand, a fair and consistent review of prescribing, improved use of Business Intelligence, and the use of Quality Impact Assessments (QIAs) and Equality Impact Assessments (EIAs) as essential.
- There was agreement to continue to ensure a fair and consistent approach across NHS providers and Places, supported by additional elements being added to system planning principles for 2024/25, including no workforce growth as an NHS England (NHSE) directive and also understanding the subsequent impact on the voluntary, community and social enterprise (VCSE) sector.
- The Committee noted reporting deadlines to NHSE and that the final 2024/25 financial plan would be brought to the ICB Board for approval on 19 March 2024.

Advise:

Finance and Investment

- **2023/24 Financial Position – Month 10:** The Committee received an update for assurance on the system's financial position, noting the continued commitment across 10 NHS providers and the ICB to deliver the ICB's statutory duty of a balanced financial plan, including efficiency savings. The Committee thanked all involved for their efforts to date.

Performance

- **Airedale NHS Foundation Trust:** The Committee noted the provider Trust's adverse performance in relation to the A&E four-hour waiting time standard and other provider Trusts in West Yorkshire. The Committee was informed of the detailed recovery plan being implemented, supported by the Bradford District and Craven ICB Place team, the NHSE regional team and partners in the West Yorkshire Association of Acute Trusts (WYAAT), and noted that the Trust is working within a challenging estate constructed from reinforced autoclaved aerated concrete (RAAC), that has been approved for capital re-development.
- **Prescribing Pharmacists:** The lack of qualified prescribing pharmacists in West Yorkshire was identified and reviewed via the Risk Register update with appropriate action agreed with members, including the ICB Medical Director.

Assure:

Finance and Investment

- **Procurement Policy Approval** – The ICB's Procurement Policy was approved and minor recommendations made to the Board on the related Financial Scheme of Delegation; both due to the new NHS Provider Selection Regime. (A briefing is available for all ICB Board members in relation to the Provider Selection Regime).

Performance

- **2023/24 Winter Planning and Delivery:** Assurance was provided on progress in terms of delivery of the current 2023/24 plan, including compliance with national requirements and progress against local Place priorities, alongside noting a forthcoming review of winter-related vaccine uptake.

For Information - Forward Planning:

- The Committee will receive at a future meeting an ICB briefing on the system level risk in terms of the increase in the number of people seeking asylum in West Yorkshire and therefore the increase in demand for health and care services within existing capacity, and the related issues faced by Places and the ICB overall due to Home Office national policy.
- The Committee will receive at a future meeting an ICB assessment of the recent outputs and outcomes of virtual wards in West Yorkshire, including in terms of quality of service and effective use of resources.

- The Committee's workplan in 2024/25 will include deep dives into areas of strategic risk and priority identified in the ICB's Board Assurance Framework.
- The Committee will consider opportunities in 2024/25 to connect with the ICB Quality Committee on in-common risks identified in the Risk Register across West Yorkshire, particularly due to currently having 18 risks in-common.

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Report from: Quality Committee

Date of meeting: 27.02.2024

Report to: WY ICB Board

Report completed by: Majid Hussain, deputy chair of Quality Committee

Date: 08.03.2024

Key escalation and discussion points from the meeting

Alert:

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Advise:

The **Board Assurance Framework** was discussed, and suggestions made for review, these included:

- Quality to be more explicitly linked to the risks identified.
- Board EDI objectives to be included as part of the risks related to Inequalities.
- Dentistry should be included as a risk, particularly because of access and inequalities – something regularly raised by Healthwatch on behalf of communities.
- Needs to be more agile to incorporate emerging issues.

There was a discussion on medicine shortages, linked to the risk register, and ways in which these can be prioritised based on risk.

Performance reports were discussed and the Committee identified a need for more demographic data, in selected areas to begin with in order to enable the Committee to track progress against health equalities.

Planning continues for a large site in Kirklees for People Seeking Asylum with all system partners participating. The Home Office have now established a monthly Multi Agency Forum to progress plans. This needs to remain under observation.

Assure:

A suite of Equality reports to meet statutory requirements were presented for review and authorisation for publication. The Committee agreed to approve however requested future people related reports to be reported into a more appropriate committee.

Progress updates were provided on:

- Bradford QIG

- Paediatric Audiology
- Update from the Committee's Development Session in December
- Sodium Valporate
- Update on progress in relation to Serious incident at Leeds

The Modern Slavery Statement was discussed and recommended for approval to the Board.

Quality Improvement Framework, future priorities and an audit report which had received limited assurance were discussed at the request of the Audit Committee Chair.

Committee Escalation and Assurance Report – Alert, Advise, Assure

Report from: Transformation Committee (additional meeting)

Date of meeting: 27th February 2024

Report to: WY ICB Board

Report completed by: Ian Holmes, Director of Strategy and Partnerships/Deputy Chief Executive on behalf of Arunangsu Chatterjee, Chair of the Committee

Date: 7th March 2024

Key escalation and discussion points from the meeting
Alert:
No issues on which to alert the Board.
Advise:
<p>The Committee met to consider the decision it had taken in relation to prescribing of gluten free products following additional feedback received following the original decision made in October 2023. The Committee received the Combined Impact Assessment, the Equality and Quality Impact Assessment and a document from Coeliac UK on the Cost of Living implications. This was done to ensure that the Committee was sighted on the full implications of the decision.</p> <p>The Committee made the decision to cease prescribing gluten free (GF) products in Leeds and Calderdale (to bring into line with the other three places in West Yorkshire), noting that:</p> <ul style="list-style-type: none"> • The ability to still prescribe GF products in exceptional circumstances was felt to be a positive thing and would avoid prolonging decision-making processes for both the clinician and the patient. • It was felt that the cost-of-living crisis was a significant contributing element. • The importance of strong signposting for patients was highlighted and support from organisations such as Healthwatch in sharing key messages was noted. It was agreed to work closely with Healthwatch to provide support and signposting to people affected by the change. • The importance of utilising learning and good practice from Places that had already stopped prescribing GF products.
Assure:
There were no items on which to assure the Board.