



HUMBER AND NORTH YORKSHIRE INTEGRATED CARE BOARD

MINUTES OF THE MEETING HELD ON WEDNESDAY 13 SEPTEMBER 2023

Attendees and Apologies

ICB Board Members: "Ordin	nary Members" (Voting Members)
Present	
Sue Symington (Chair)	HNY ICB Chair
Stephen Eames	HNY ICB Chief Executive
Amanda Bloor	HNY ICB Deputy Chief Executive / Chief Operating Officer
Dr Nigel Wells	HNY ICB Executive Director of Clinical & Professional Services
Teresa Fenech	HNY ICB Executive Director of Nursing & Quality
Jane Hazelgrave	HNY ICB Executive Director of Finance & Investment
Stuart Watson	HNY ICB Non-Executive Director
Councillor Jonathan Owen	Local Authority Partner Member
Dr Bushra Ali	Primary Care Partner Member
Simon Morritt	Provider Partner Member
Apologies	
None recorded	
ICB Board Members "Partic	cipants" (Non-Voting Members)
Present	
Anja Hazebroek	HNY ICB Executive Director of Communications, Marketing & PR
Jayne Adamson	HNY ICB Executive Director of People
Karina Ellis	HNY ICB Executive Director of Corporate Affairs
Helen Grimwood	Partner Participant (Healthwatch)
Louise Wallace	Partner Participant (Public Health)
Shaun Jones	NHS England Locality Director
Councillor Michael Harrison	Partner Participant (Local Authority: North Yorkshire Yorkshire)
Jason Stamp	Partner Participant (Voluntary, Community & Social Enterprise)
Mike Napier	HNY ICB Director of Governance and Board Secretary
Apologies	
Andrew Burnell	Partner Participant (Community Interest Companies)
Cllr Stanley Shreeve	Partner Participant (Local Authority: N & NE Lincolnshire)
Michele Moran	Partner Participant (Mental Health)
Professor Charlie Jeffery	Partner Participant (Further Education)
"Observers" and Individual	s Presenting Items
Name	Title
Emma Jones	HNY ICB Business Support Manager (Secretariat)
Paula South	HNY ICB Director of Nursing Governance (For Item 11)
Michele Carrington	HNY ICB North Yorkshire and York Place Director of Nursing (For Item 11)

1. Welcome and Introductions

Sue Symington, the Chair, commenced the meeting by extending a warm welcome to all attendees and observers.

2. Apologies for Absence

The ICB Board noted the apologies as detailed below. It was noted that the apologies received did not impact on the Board being quorate:

ICB Board Members "Participants" (Non-Voting Members)		
Andrew Burnell	Partner Participant (Community Interest Companies)	
Cllr Stanley Shreeve	Partner Participant (Local Authority: N & NE Lincolnshire)	
Michele Moran	Partner Participant (Mental Health)	
Professor Charlie Jeffery	Partner Participant (Further Education)	

The Chair informed the Board that Andrew Burnell was absent due to a last-minute invitation to a social care event at Downing Street.

3. Declarations of Interest

In relation to any item on the agenda of the meeting Board Members were reminded of the need to declare:

- (i) any interests which were relevant or material to the ICB;
- (ii) that nature of the interest declared (financial, professional, personal, or indirect
- (iii) any changes in interest previously declared;

The following Declaration of Interest update was received at the meeting:

Name	Item	Nature of Interest and Action Taken
Simon	12	Declared a Professional Interest regarding the Care Quality
Morritt		Commission (CQC) report as the Chief Executive of York and
		Scarborough Teaching Hospitals NHS Foundation Trust. It was agreed
		that Simon could remain in the room for this item.

No other declarations of interest were made by the Board members.

4. Minutes of the Board Meeting held on 12 July 2023

The Chair referred to the minutes of the previous Board Meeting held on 12 July 2023. The Chair invited the Board members to provide any points of accuracy or matters arising from those minutes. No points of accuracy or matters arising were raised by the Board members.

Outcome:

(a) Board Members approved the minutes of the meeting held on 12 July 2023 and these would be signed by the Chair.

5. Matters Arising and Actions

The Chair invited the Board members to discuss or receive any matters arising or actions from the previous meeting. The below matters arising were noted.

Date Raised	Action Ref	Item No. and Action	Owner	Due Date	Progress / Status
July 23	01- 0723	 Item 7: Board Assurance Framework Review the financial risk rating. (A3) Further develop the recruitment and retention risks under workforce (C3) risks more clearly. Further develop digital risk (B1) 	 Jane Hazelgrave Jayne Adamson Nigel Wells 	Sep 2023	COMPLETED
July 23	02- 0723	Item 10: Quality Domestic abuse and serious violence partnership arrangements would be considered further by the Board at a future meeting.	Teresa Fenech	Sep 2023	COMPLETED
July 23	03- 0723	Item 11: Finance Report Further consideration of reporting of prevention initiatives and return on investment.	Jane Hazelgrave	Oct 2023	COMPLTED - Email circulated

Outcome:

(a) Board Members noted the arising from the meeting held on 12 July 2023.

6. Notification of Any Other Business

Board Members were reminded that any proposed item to be taken under any other business must be raised, and subsequently approved, at least 48 hours in advance of the meeting by the Chair. No items for any other business were raised by the Board members.

Outcome:

(a)	Board Members noted that there were no items of Any Other Business to be
	received.

7. Board Assurance Framework (and Corporate Risk)

The Board discussed the Board Assurance Framework (BAF) and Corporate Risk escalations. The Chair emphasised that the purpose of reviewing the BAF at the beginning of the meeting was to remind the Board members of the key strategic risks to the achievement of the ICB's objectives.

The Chair asked the Board members to express their satisfaction with the mitigation measures in place for the risks identified in the BAF. Several Board members provided their feedback and suggestions.

Teresa Fenech noted that some updates had been requested at the private Board Meeting held in August in relation to mitigating actions for risk A1. It was agreed that these would be made.

It was noted that work was ongoing with regard to capturing strategic estates risks,

particularly in relation to backlog maintenance across the system.

Outcome:

(a)	Board Members approved the changes to the BAF as highlighted in the report and summarised above.
(b)	Identify any further areas of risk that impact of delivery of the ICB strategic objectives
(c)	Note the three corporate risk items highlighted by the executive.

8. Chief Executive Update

The Chief Executive provided an update on the Humber Acute Services (HAS) review, health inequalities, industrial action and drew attention to a recent national report commissioned by the Royal College of Surgeons (RCoS) which considered the extent of harassment of female surgeons.

With respect to the HAS in particular, the Board were reminded that it had approved the programme progressing to consultation at its meeting in public on 12 July 2023, subject to the successful completion of the NHS England (NHSE) Gateway Review.

Members were advised of some key changes in the programme assumptions following the decoupling of maternity and neonatal services requested by NHSE/ICB and the NHSE Gateway Review Process. These changes primarily related to reductions in the revenue cost saving forecasts and also the capital costs attributed to the implementation of the changes proposed. The revenue and capital costs would be finalised in the Decision-Making Business Case presented to the ICB Board following the end of the consultation period.

A Joint Health Overview and Scrutiny Committee (JHOSC) was being coordinated to review the consultation process and decision arising from consultation. The first meeting was planned for early October 2023.

The Chief Executive advised Members of the commencement of Jonathan Lofthouse as the first Group Chief Executive for Hull University Teaching Hospitals NHS Trust (HUTHT) and Northern Lincolnshire and Goole NHS Foundation Trust (NLAG).

In addition, the ICB focus on encouraging children and young people to engage with health and wellness initiatives, with a particular emphasis on addressing health inequalities in education. A new consultation process is due to start in October 2023, aiming to ensure clinical viability and robustness of services while addressing health inequalities. The Board is also set to discuss the outcomes from the Lesbian, Gay, Bisexual, and Transgender (LGBT) community. Finally, the ICB is working to promote a smoke-free NHS and has seen around 2,000 NHS workers participate in a local scheme, with a third of them quitting smoking completely.

Outcome:

(a)	Board Members noted the Chief Executive's update.
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9. ICB response to the letter from NHS England to the NHS following verdict in the trial of Lucy Letby

The Board examined the issues raised in the light of the verdict in the trial of Lucy Letby and the response of the ICB, via the paper presented. They noted that the case highlighted "managerial group think" in an NHS body, where challenges were not being recognised.

The Board emphasised the need for support for whistleblowers and a cultural shift to greater transparency and openness in the NHS. The recently re-launched Fit and Proper Person Test (FPPT) by NHS England (NHSE), which strengthens individual accountability and Board transparency, was highlighted as a critical tool in this regard.

The Board also discussed the need for robust Human Resource (HR) processes and the importance of creating a safe environment for individuals to raise concerns. The Board agreed on the importance of regular reports on freedom to speak up issues, the development of champions within the workforce, and the need for a culture that encourages open conversation. It was agreed that the Constitution would be updated to made to emphasise the organisational commitment to public service and accountability.

Outcome:

(a)	Board Members noted the current ICB Freedom To Speak Up arrangements
	(approved previously by the Board on 1 July 2022) and agreed that an
	addition to the ICB Constitution would be made to emphasise the
	organisational commitment to public service and accountability.
(b)	The board requested an update report on FTSU in HNYICS. Nigel Wells is the
	FTSU guardian and will provide the report.

10. Voice of the Lived Experience Update

The Executive Director of Communications, Marketing & Public Relations presented and update and first dashboard for the Voice of the Lived Experience to the Board. The report was a culmination of collaborative efforts between the ICB and Healthwatch, aiming to provide a comprehensive view of lived experience data from the public.

The report highlights the diversity of the community and emphasises the importance of reflecting this diversity in engagement and insight work. The information gathered would be used to develop a more comprehensive data bank to better understand the needs of the community. It was agreed that the dashboard and subsequent reports would be presented at each public Board meeting.

Important, recurrent issues raised by the public include access to services, waiting times and difficulties making appointments.

The Board discussed the importance of using this information and feedback from the public to develop and improve services, particularly in deprived communities. The need for better communication and honesty with the public about what services the NHS could and cannot provide was also emphasised.

(a)	Board Members noted and discussed the key themes and recommendations
	and welcome a full report at each public meeting of the board.

11. Quality Committee Update

The Executive Director of Quality and Nursing provided an update on the work of the Quality Committee and System Quality Group (SQG). The Quality Committee had considered a number of quality governance matters as well as receiving the findings of two audit reports. No significant issues were found, although a few minor administrative actions were identified.

The Committee had also received the Quality Accounts from the ICB's providers and considered the ICB's responding statement to each. A log of quality priorities had been developed and would be incorporated into a Quality Assurance Framework (QAF) which would be brought to the Committee subsequently.

It also approved several new policies, including a standard operating procedure for care and treatment reviews for individuals with learning disabilities and autism.

The System Oversight Group (SOG) had considered Place-based quality risks, as well as other significant quality concerns. Common themes from all six Places included impact of system pressures, workforce, the cost-of-living crisis, industrial action and looked after children.

The SOG also noted the latest Quality Improvement Group (QIG) status of the four local providers, as follows:

- North Lincolnshire & Goole Hospitals NHS Foundation Trust Out of special measures but surveillance continues; de-escalation out of special measures will be conditional. An update was given from NHSE regarding a transition support package that has received national funding, and the outcome decision is still awaited.
- Tees, Esk & Wear Valleys NHS Foundation Trust Segmentation work is ongoing together with assurance assessments. Progress has been made but the ICB and NHSE are to focus on niche reports.
- York & Scarborough Teaching Hospitals NHS Foundation Trust Continue at Intensive SOF Level 3 and remains the greatest concern at the present time.
- *Hull University Teaching Hospitals NHS* Trust Continue at intensive System Oversight Framework Level 3.

The SOG also considered a forensic pilot scheme which aimed to introduce the same level of forensic oversight for safeguarding adults as was inherent within safeguarding children services. It would be evaluated with the possibility of being rolled out across the rest of the ICB. The need for improved cross-system learning and a greater emphasis on patient and staff involvement were also discussed.

The Director of Nursing Governance was welcomed to the meeting and gave a presentation on the new legislative and strategic framework in relation to the Serious Page 6 of 12 Violence Duty. This places a duty on Specified Authorities to work together to prevent and reduce serious violence (set out in the Police, Crime, Sentencing and Courts Act 2022 and accompanying statutory guidance).

In relation to the healthcare system in England, accountability rests with ICBs however all parts of the system and the NHS should be thinking about prevention of violence. The Board heard how the ICB s working with the two police forces in its area – North Yorkshire Police and Humberside Police – including through ICB Business Intelligence staff taking a lead in a project to improve data sharing between agencies who play a role in tackling serious violence, a plan for Serious Violence Navigators to be placed in Accident and Emergency (A&E) departments and taking a public health approach to serious violence and focusing on what lies behind the issue particularly the impact of adverse childhood experiences and adverse community environments.

The North Yorkshire and York Place Director of Nursing gave a presentation on the new national Patient Safety and Incident Reporting Framework (PSIRF). The briefing outlined the key changes from the previous Serious Incident Framework and set out the arrangements put in place by the ICB to discharge its responsibilities around PSIRF, governance and risk.

The Board reaffirmed its commitment to:

- Oversight and support to the effectiveness of systems to achieve improvement following patient safety incidents;
- Support to cross system learning; and,
- The sharing of insights and information across organisations/services to improve safety.

Approval was also given for the Board to undertake the PSIRF Board level training provided by NHS England (NHSE).

Outcome:

(a)	Board Members noted the updates provided in relation to the Quality
	Committee, System Improvement Group, the Serious Violence Duty and
	the new Patient Safety and Incident Reporting Framework.
(b)	Further updates on progress in relation to the Serious Violence Duty and
	Domestic Abuse to be provided
(C)	Board level training to be provided for the Patient Safety and Incident
	Reporting Framework.

12. CQC Report for York and Scarborough Teaching Hospitals NHS Foundation Trust

Simon Morritt, Chief Executive, and Dawn Parkes, Interim Director of Nursing, at York and Scarborough Teaching Hospital NHS Foundation Trust presented the Trust's response to the recent CQC report. to the meeting to discuss the report, which was published in early summer.

It was acknowledged that the report was not something that the Trust was proud of and that it highlighted the need for significant change however the Board was assured that measures were being taken to address the issues raised in the report. A 12-month recovery programme, named 'Journey to Excellence', had been implemented at the Trust. This included eight improvement workstreams encompassing areas such as maternity, fundamentals of care, and urgent care. Other measures include staff morale and feedback loops, a focus on infection prevention and control (IPC), and a review of staffing. The CQC feedback has been positive regarding the Trust's action plan and proposed measurements of its delivery.

The Chair mentioned that leadership changes have been made within the organisation, including new appointments for the Chief Operating Officer, Chief Nurse, and Medical Director roles. She also highlighted the importance of staff morale and engagement in driving change.

Outcome:

(a)	Board Members noted the updated provided.

13. Clinical and Professional Committee Update

The Executive Director of Clinical and Professional Services provided an update from the Clinical and Professional Executive Committee. The Committee discussed vaccination programs, including COVID-19 and Measles, Mumps, and Rubella (MMR) vaccinations. The importance of vaccinations in saving lives and preventing serious illnesses was stressed.

The Committee discussed the 'Let's Get Better' campaign, aimed at reaching hardto-reach communities and increasing vaccine uptake. The Committee also announced its initiative to bring the BABY network, a local birth cohort study, to the Humber and North Yorkshire area. This study links data across health, education, and social care to create a comprehensive picture of families' lives over time, aiming to shape local services and create healthier environments. A workshop on this initiative was scheduled for 3 October 2023.

Lastly, the Committee discussed procedures of limited clinical value, aiming to ensure that all procedures are clinically and evidence-based. The Committee was looking to operationalize this through commissioning pathways and would bring updates as they progress.

Outcome:

(a) Board Members noted the updates provided in the report.

14. Finance Update

The Executive Director of Finance and Investment presented the finance update to the Board.

The Month 4 system financial position with respect to revenue was a deficit of £32.5m against a planned deficit of £19.3m, representing a year to date overspend of £13.3m.The main reason for the adverse variance was slippage against efficiency targets, with delivery being £7.1m below plan as at month 4, impact of strikes and inflationary pressures. These pressures have been offset in part through budgeted expenditure starting later in the year than initially planned.

It was noted that at month 4, the system was still forecasting to deliver the planned

year-end £30m deficit. There are, however, significant risks to delivery of this plan that require management in year.

The month 4 system financial position with respect to capital was a £17.6m underspend. This reflected an underspend of £6.3m against the system's capital department expenditure limit (CDEL), £2.3m underspend against International Financial Reporting Standards (IFRS) 16 – leases - and £8.9m against provider specific schemes.

The system financial risk at month 4 showed a £112m of gross risk, with £61m of risk with providers and £51m with the ICB. Provider risk was mainly related to delivery against challenging efficiency targets, impact of industrial action and bed pressures. The ICB risks related to delivery against efficiency targets, independent sector elective recovery fund risks, prescribing, continuing healthcare and high-cost mental health patients and primary care delegated cost pressures.

Following initial mitigating actions and management, the residual risk reported at M4 was £51m (£40m providers and £11m ICB). The system continued to work to identify further mitigating actions, including additional sources of income where available, to minimise these risks as much as possible.

Outcome:

(a)	Board Members Note the system financial position for both year to date
	and forecast outturn.
(b)	Noted the significant level of risk identified at Month 4 that will need be
	managed to deliver planned/forecast position.

15. Performance Update

The Deputy Chief Executive / Chief Operating Officer provided an update on performance, including notable improvements in the emergency care standard. The recovery plan has reached 75%, surpassing the 70% target. This was achieved by ensuring accurate data and the diligent work of partners. The new emergency department facility in York was highlighted.

It was noted that waiting times have reduced for long-wait patients, with no one waiting over 104 weeks. However, there are still challenges around waiting times for diagnostic access and cancer treatment.

The Chair emphasised the importance of vaccinations for staff and the public., and it was noted that despite the challenges of industrial action, maintains that the situation was a system problem requiring a system solution. Industrial action and the potential around COVID and flu makes the link between urgent emergency care and emergency preparedness, resilience and response (EPRR) of great importance.

Outcome:

(a)	Board Members noted the development of the Board performance report.
(b)	Considered and discuss the performance report: - in particular, the issues highlighted in the report for further attention.

16. Preparing for Winter 2023/24

The Deputy Chief Executive / Chief Operating Officer set out the ICB's and system's plans for winter resilience. These included examining the strengths and weaknesses of the organisation's services and focusing on high-impact interventions to ensure maximum delivery impact. Key areas of focus include improving patient flow and access to services, with efforts to standardise processes across the system.

The ICB has identified 15 Urgent and Emergency Care (UEC) champions to facilitate shared learning and best practice. It was also noted that the NHS Humber and North Yorkshire ICB was a Tier 2 Integrated Care System (ICS), which means it has been identified as one of the more challenged ICSs for urgent and emergency care performance. This brings scrutiny, but also regional support.

The Board also discussed the role of urgent community response in managing patients outside of hospital and improving access to care in the community. The meeting item concluded with a discussion about workforce challenges and the need for further review.

Outcome:

(a)	Board Members noted the national requirements for each ICB in preparing for Winter 2023/24, and the approach being taken across Humber and North				
	Yorkshire to respond to the national requirements.				
(b)	Received a presentation at the meeting of the Board summarising the plans submitted on 11 September 2023, providing challenge and identifying potential areas for further assurance as required.				

17. Governance Items Reserved to the ICB Board

The Executive Director of Corporate Affairs presented minor amendments to the ICB Constitution and updates for the Workforce Board (Committee) Terms of Reference.

The amendments for both the Constitution and the Terms of Reference were approved. It was further agreed to resubmit the Constitution to the November 2023 Board meeting to incorporate the additional wording to emphasise the organisational commitment to public service and accountability.

Outcome:

(a)	Board Members approved the additional minor changes to the Constitution.
(b)	Approved the changes to the Workforce Board Terms of Reference.
(c)	A further update to the ICB Constitution, in relation to the ICBs commitment to public service and accountability be submitted to the November 2023 meeting of the Board.

18. Items for Information

The Board noted the updates provided on the Workforce Breakthrough Programme and the ICB good news briefing.

Outcome:

(a)	Board Members noted the updates.	

19. Board Assurance Framework Review

The Chair reviewed the Board Assurance Framework (BAF) and confirmed that the Board was satisfied with the risks identified in the BAF.

Outcome:

(a) Board Members were satisfied with the risks identified in the BAF.

20. Any Other Business

The Chair asked for any other business items. No items were raised.

21. Time and Date of Next meeting

The Chair noted that the next meeting would be on Wednesday, 8 November 2023.

22. Exclusion of the Public and the Press

The Chair proposed that representatives of the press and other members of the public be excluded from the remainder of the meeting due to the confidential nature of the business to be transacted. The Board approved this proposal.



Humber & North Yorkshire Integrated Care Board: Matters Arising Action Log

Date Raised	Action Reference	Item No. and Action	Owner	Due Date	Progress / Status
13/07/023	03-0723	 Item 11: Finance Report Further consideration of reporting of prevention initiatives and return on investment. 	Jane Hazelgrave	Oct 2023	COMPLETED – EMAIL CIRCULATED
13/09/2023	01-0923	 Item 7: Board Assurance Framework (and Corporate Risk) Update mitigating actions in relation to risk A1 (TF) Consideration of an Estates risk (MN) 	Teresa Fenech Mike Napier	Oct 2023 Nov 2023	COMPLETED On November agenda
13/09/2023	02-0923	 Item 9: ICB response to the letter from NHS England to the NHS following verdict in the trial of Lucy Letby Update to ICB Constitution to reflect that We are all members of public service 	Mike Napier	Nov 2023	This will be brought to the December meeting as further changes need to be made to the Constitution
13/09/2023	03-0923	Item 10: Voice of the Lived Experience Committee Update • Dashboard to be brought to every meeting in public	Anja Hazebroek	Nov 2023	On November agenda