

# Meeting of BNSSG ICB Board

**Date:** Thursday 4<sup>th</sup> July 2024

**Time:** 12.30 – 15:10

**Location:** Virtual, via Microsoft Teams

<b>Agenda Number:</b>	5
<b>Title:</b>	Chief Executive Update – July 2024
<b>Purpose: For Information</b>	
<b>Key Points for Discussion:</b>	
<p>The purpose of this paper is to provide the Integrated Care Board meeting with an update of key issues, from the Chief Executive’s perspective, of importance to the successful delivery of the ICB’s aims and objectives.</p> <p>The main areas of discussion this month are;</p> <ul style="list-style-type: none"> <li>• <b>The Future of Locality Partnerships</b></li> <li>• <b>Maintaining focus and oversight on quality of care and experience in pressurised services</b></li> <li>• <b>Collective Action in General Practice</b></li> </ul>	
<b>Recommendations:</b>	To note the current position
<b>Previously Considered By and feedback :</b>	No other groups
<b>Management of Declared Interest:</b>	No declared interests

## Chief Executive Briefing – July 2024

### Purpose

The purpose of this paper is to provide the Integrated Care Board meeting with an update of key issues since the last board meeting, from the Chief Executive's perspective, of importance to the successful delivery of the ICB's aims and objectives.

The main areas of discussion this month are;

- **The Future of Locality Partnerships**
- **Maintaining focus and oversight on quality of care and experience in pressurised services**
- **Collective Action in General Practice**

### The Future of Locality Partnerships

As agreed at the May 2023 Board Meeting, we are taking an engaged approach to the BNSSG has six Locality Partnerships, three in Bristol, two in North Somerset, and one in South Gloucestershire. These are the 'place' partnerships as described using NHS England nomenclature. Each Locality Partnership is diverse in terms of the population it serves, however we know communities do not just exist in 'place' but within communities brought together as 'communities of interest'. During our Locality Partnership journey, we have grappled with what we could do as one Integrated care system, three times as Local Authorities, or as six Locality Partnerships and 20 neighbourhoods. We want to do as much as possible at the Local level, as we know this is where we have the most traction for real change. The BNSSG ICP Board has committed to undertake a review of the role of Locality Partnership in BNSSG and the approach and Terms of Reference will be discussed in detail in item 6.2 of the Board Meeting.

### Maintaining focus and oversight on quality of care and experience in pressurised services

On the 26<sup>th</sup> June 2024 senior NHSE staff issued a letter to all ICBs, ICPs, Trusts, Regional Directors and copied to Local Authorities entitled **Maintaining focus and oversight on quality of care and experience in pressurised services**. The letter highlighted the pressures and challenges that our evident in our hospitals with particular reference to urgent and emergency care settings.

The letter asked every Board across the NHS to assure themselves that they are working with system partners to do all they can to:

- provide alternatives to emergency department attendance and admission, especially for those frail older people who are better served with a community response in their usual place of residence
- maximise in-hospital flow with appropriate streaming, senior decision-making and board and ward rounds regularly throughout the day, and timely discharge, regardless of the pathway a patient is leaving hospital or a community bedded facility on

The full details of the letter, and the proposed actions and deliverables will be discussed in detail at the system executive group meeting on Friday 5<sup>th</sup> July. The outcome of that meeting will be shared with the full board at the next open board meeting

### **Collective Action in General Practice**

As presented at the previous Board meeting, there is significant concern across general practice because of the current 2024 to 2025 GP contract offer which the GPC is clear is an imposed contract.

In March the BMA held a referendum and 99.2% of BMA members voted against the 24/25 CMS contract. The BMA is now in dispute with NHS England. This was to be followed by a ballot for collective action to take place in the autumn/winter in anticipation of an election taking place at this time. This has now been brought forward and collective action is scheduled to take place from 1st August. The risk of collective action is included on the system risk register but now needs updating in light of the ballot.

The non-statutory ballot opened on 17th June and closes 29th July.