

# **BNSSG ICB Board Meeting**

**Date: 5 September 2024**

**Time: 15:30 – 17:00**

**Location: Bristol Citadel Community Church and Family Centre, 6 Ashley Road, St Paul's, Bristol BS6 5NL**

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| <b>Agenda Number:</b>   | 5   |        |
| <b>Title:</b>   | Chief Executive Report                                      |        |
| <b>Confidential Papers</b>  | <b>Commercially Sensitive</b>                               | No     |
|   | <b>Legally Sensitive</b>                                    | No     |
|   | <b>Contains Patient Identifiable data</b>                   | No     |
|   | <b>Financially Sensitive</b>                                | No     |
|   | <b>Time Sensitive – not for public release at this time</b> | No     |
|   | <b>Other (Please state)</b>                                 | Yes/No |
| <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>• Response to the recent riots</li> <li>• Delivering sustainable system performance standards 24/25</li> <li>• Delivering financial sustainability in 24/25</li> </ul> |   |        |
| <b>Recommendations:</b>   | To discuss and note the annual assessment                   |        |

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| <b>Author(s):</b>  | Shane Devlin |
| <b>Sponsoring Director /<br/>Clinical Lead / Lay<br/>Member:</b> | Shane Devlin |

## Agenda item:6

### Report title: Chief Executive Report

#### Introduction

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.

The main areas of discussion this month are;

- Response to the recent riots
- Delivering sustainable system performance standards 24/25
- Delivering financial sustainability in 24/25

#### Response to the recent riots

As board members will undoubtedly be aware, the fatal stabbing of three young girls at a dance class in the seaside town of Southport was followed by the worst unrest the UK has seen in more than a decade.

The violence, in towns and cities across England and in Northern Ireland, was fuelled by misinformation online, the far-right and anti-immigration sentiment.

On the weekend of 3rd / 4th August riots took place in parts of Bristol.

As Chief Executive of the ICB I was appalled and horrified by the actions. I subsequently issued the following statement to all staff.

*Colleagues,*

*I think it's important that we take a moment to acknowledge the horrendous attack in Southport last week and the deplorable violence that has ensued. Our hearts go out to all those that have lost their loved ones, those recovering and those that have been touched by violence.*

*Within our own community this weekend we have seen violence, intimidation, and thuggery. More is expected over the coming days, with the next planned in Bristol for Wednesday evening. This is unacceptable and goes against everything we as a country, as an NHS, and as the Healthier Together partnership stands for.*

*I am proud of the NHS and our diverse workforce who all give so much. I want to make it really clear that everyone in our community is welcomed and valued. We will always take a zero-tolerance approach to racism. No one should feel frightened to go to work or walk the streets of our city and towns.*

*As disruption continues, please look out for one another during this time and stay safe. If you have been impacted by any of these events, please remember we have a confidential employee support service. Details are on [The Hub](#). If you are worried or are feeling vulnerable, please do talk to your line manager. I would encourage everyone to take a look at their schedule for the next week and ensure you feel safe with where you are going to be, again please discuss this with your line manager and if you are travelling then please keep in touch with members of your team.*

*As we get more information about planned disruption across our area we will share this with you so that you can avoid specific areas.*

*Our local councils have information about how to report incidents of hate crime, and the links below also have some further information.*

- [www.n-somerset.gov.uk/hatecrime](http://www.n-somerset.gov.uk/hatecrime)
- [Hate crime \(bristol.gov.uk\)](http://Hate crime (bristol.gov.uk))
- [Hate crime | BETA - South Gloucestershire Council \(southglos.gov.uk\)](http://Hate crime | BETA - South Gloucestershire Council (southglos.gov.uk))

*I would also like to thank any of our colleagues on the frontline that have been working during this difficult time.*

*Shane Devlin, Chief Executive Officer*

Feedback from our staff networks has indicated that the statement was welcomed however this must be recognised as a teachable moment and we must take further actions. The Executive Team have reflected on the events and a clear commitment to drive forward the ICB as an antiracist organisation is our next step. Further papers will be brought to the Board over the next couple of meetings.

## **Delivering sustainable system performance standards 24/25**

As previously reported at the ICB Board, levels of No Criteria to Reside (NCTR) remain high across BNSSG. This is despite good progress in admission avoidance and discharge programmes which have achieved pathway shifts and length of stay reductions. Other indicators of system flow show BNSSG to be benchmarking well across ambulance, A&E performance, admissions and length of stay but the NCTR position remains a challenge for our system

To support improvement in system flow and achievement of 78% target in 4 hr Emergency Department standard, all Integrated Care System partners have committed to a system ambition to reduce No Criteria To Reside (NCTR) to 15% for BNSSG by the end of Q2 2024.

Teams from across the system have utilised a modelling tool developed by the “Whole System Partnership” (WSP), to better understand capacity and demand across discharge

pathways. This analysis has now enabled the development of action plans to increase capacity and improve flow across the whole pathway to deliver the system's NCTR ambition

The modelling shows that despite improvements to date, made in both admission avoidance and discharge pathways, that there is still a residual backlog of demand in the system and recovery "capacity" is required to improve NCTR. New activity levels and discharge targets have been calculated to maintain 15% NCTR after backlog clearance

Operational and finance colleagues are now working through the final details of the proposals with the intention of bringing additional capacity on-line by the end of September.

## **Delivering financial sustainability in 24/25**

As can be seen in Agenda item 7.1 – Finance Report, the Integrated Care System is reporting a year to date deficit position of circa £13 million. As previously reported to the Board, we have established a performance and recovery board, consisting of system partners, to manage corrective action when deviation from agreed and required performance is identified. At the meeting on the 6th August all partners presented their position and their current action plan for recovery.

To support the recovery of financial recovery all partners are working in the context of the "Financial Forecast Outturn Change Protocol". The Financial Forecast Outturn Change Protocol is a standard operating procedure for NHS partners in BNSSG ICS that is designed to ensure that risks to financial deterioration are identified early, and supportive and corrective action is undertaken collaboratively, to ensure that BNSSG ICS can maintain its financial performance trajectory as set out in the Medium Term Financial Plan. This should also be aligned to the Strategic Funding principles, including delivery of an in-year breakeven position.

This protocol sets out the standard operating process that the System Executive Group should follow, in the event that this risk is escalating for an organisation(s) in the system.

Phase 1 – Business as usual

Phase 2 – Risk identified – actions for organisation including submitting to peer review

Phase 3 – Enhanced expenditure controls

Phase 4 – System level Financial Recovery Plan

Phase 5 – Approval to change forecast outturn

It was agreed that the system should move to Phase 4 and therefore develop a system wide recovery plan. This plan will identify, with the help of an external facilitator, opportunities for further grip and control and provide assurance to the board that financial performance will improve and help define our route to a breakeven position for 2024/25.

As is evidenced in other systems, failure to deliver system breakeven will result in intervention by NHS England, through the appointment of mandated support. This position

would dramatically reduce the control that we as a board would have over expenditure as it would result in imposed spending controls.