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Oxfordshire Joint Health Overview and Scrutiny Committee (OJHOSC) County Hall New Road Oxford OX1 1ND

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To: OCCG.media-team@nhs.net

Dear BOB ICS Team,

Re: BOB ICS Interim Report response

Thank you for the opportunity to comment on the Buckinghamshire, Oxfordshire and Berkshire West Integrated Care System (BOB ISC) interim report. I have shared the report with the members of the Oxfordshire Joint Health Overview and Scrutiny Committee (HOSC) and collated the responses as follows.

We welcome the aspiration for more partnership working across the area and the potential for a streamlining of systems, which in turn should not only help create a smoother service for patients and residents, but also staff having to navigate and use the various systems. The challenge however will be making that work in practice.

It is also encouraging to see the focus on a bottom-up approach, allowing more people to have greater control over their health and care.

At the moment it's challenging to comment on the priorities, without additional detail behind it. As high-level priorities they appear appropriate, however some clarity is needed around how 'places' are to be held to account for support/delivery, as it is not clear who is responsible. Another aspect of the priorities that'll be interesting to see, is how they are planned to interlink with each other.

As a Health Overview and Scrutiny Committee we'd like to feed in and understand the following challenges:

System Design:

- How is awareness of the NHS long-term plan being promoted and shared locally, to help residents understand how the ICS will work and support that?
- How well are residents and patients being engaged in the design of the ICS? At the moment there doesn't appear to be much widely publicised information available to the public, enabling them to engage with the process.



- The timeline appears tight to be able to both engage meaningfully and then translate that into possible amendments to the BOB priorities.
- Are considerations being given to the projected increase in population in Oxfordshire and beyond, and how is that being factored into the design, in order to help future proof it as far as possible?
- How will Overview and Scrutiny, in the three respective areas be involved in the design and implementation of the system?
- If system leaders are responsible for consulting and engaging their wider populations, what is being done to ensure that is consistent across both Oxfordshire and the wider BOB area? Who would be responsible for overseeing that?
- Are we clear on the constraints within the system, so as to manage the public's perception on what is achievable?

Governance Arrangements:

- Has a board already been established? If so, who sits on it, and are partnership meetings already taking place?
- Where do scrutiny committees sit within the governance arrangement?
- Who will be part of local decision-making processes at the place-based level?
- How will the respective Health and Wellbeing Boards work with the ICS and locally based integrated partnerships? (What happens if there are conflicting health priorities for example)
- How will conflicts and disagreements be managed in the system?
- How will accountability be managed between the separate NHS Trusts and organisations within the current legal framework?
- Is there agreement and consensus between all providers and commissioners on the approach to the ICS? Are there points of divergence?
- How will complaints, feedback and learning about a variety of organisations and providers be integrated and shared across the system?
- How are provider alliances being developed locally and what progress is being made to ensure they can be sufficiently mature to manage complex integrated contracts?

Health:

- Will there be changes in accessibility to services for certain residents (i.e. services rationalised and moved over county boundaries), which may impact on those patients that live remotely?
- How will the ICS work with a large number of distinct Primary Care Networks (PCNs)? And are they sufficiently resourced to do the work expected of them?
- How will the ICS ensure that tackling health inequalities is central to the way the new system operates? How well are health inequalities understood and evidence-based solutions identified?

Other considerations:

• What are the key financial challenges for the ICS? How will financial balance and sustainability of the system be achieved within expected funding allocations?

- How will the ICS work with the community and voluntary sector?How is it planned to ensure the voice of the local people doesn't get lost?

Yours Sincerely

Cllr Arash Fatemian Chairman of Oxfordshire's Joint Health Overview and Scrutiny Committee