

BOB ICB Board Meeting in Public

Responses to the public questions submitted to the 14 January 2025 Board meeting:

Ref	Questions / Comments
No.1	<p>BOB ICB Achievements</p> <p>I can find nothing in any of your literature that states your achievements during your tenure. Please could you let me know what you feel ICB BOB has achieved that has benefited the community you serve. You have provided/facilitated no new GP surgeries, nor improved the provision of NHS healthcare.</p> <p>I would appreciate having an answer to my question that is factual, not management speak.</p> <p><i>Received from Mrs S A Wilde, Chair, Alchester PPG</i></p>
Response	<p>The ICB's annual report for 2023/24 can be found on our website at this link: qu9_icb_annual_report_2023-24_final.pdf. An overview was taken to the public Board meeting on 16 July 2024 and can be seen here: 20240716-bob-icb-board-item-15-annual-report-and-accounts-202324-overview.pdf. There is also plenty of information about the work of the ICB and partners across the NHS in BOB available in our newsletter which is available on our website: BOB ICB Newsletter BOB ICB Plus we share regular press releases which are available in the news section of the ICB website: News BOB ICB</p>
No. 2	<p>The entry of new providers into the market</p> <p>Whilst we do, of course, understand the financial and governance challenges faced by the Board and, equally, the large number of potential providers in the market, is the Board able to explain why it appears impossible to speak with Commissioners or decision-makers about the possible introduction of a nurse-led service for adults with complex care and support needs, particularly in the West Berkshire area?</p> <p>Again, whilst understanding the time-constraints under which officers of the ICB are working, there should surely at least be a response to emails sent, especially when there is no apparent way to reach officers by phone. We have sent several to a variety of email addresses in an attempt to open up lines of communication, but to no avail.</p> <p><i>Received from Peter Lewis, Supported Living Mental Health Specialist Lead Salis Care Ltd</i></p>
Response	<p>We apologise that a formal reply was not received by Salis Care. The information was shared with the Berkshire West Section 117 Discharge Co-ordinator and the ICB Discharge Co-Ordinator who are responsible for placing individual patients. We note that the ICB has commissioned Salis Care in the past. Contact has been made with Salis Care and a meeting will be set up to meet Mr Lewis.</p>
No. 3	<p>Great Western Park, Didcot, GP Surgery</p> <p>In your news release in Sept 2024, it was stated that Assura would be submitting Planning Application in the Autumn and expecting approval in New Year with building starting in 2025.</p> <p>Great Western Park, Didcot GP Services BOB ICB bucksoxonberksw.icb.nhs.uk</p>

	<p>In the Board meeting minutes for 19 November 2024, the Board’s response to member of public Q 5 indicated that the planning application was now ‘due to be submitted shortly’.</p> <p>In the recent Minutes from the Vale Cabinet meeting, it would appear the planning application will not be submitted til January 2025 and approval after a couple of months.</p> <p>In fact the new surgery is still no closer to providing the important healthcare this area desperately needs and everybody’s quality of health is suffering.</p> <p>Having read the minutes of the November Board meeting of BOB ICB - I can see no mention or review of the project to deliver the new surgery. Surely such a critical investment has been set up as a project following Public Sector best project management practice. As such I would expect to see a report from the Project Sponsor to the Board. I see no evidence that BOB ICB is carrying out due diligence on the timelines and progress of the project beyond accepting that various parties are making progress ... and yet the planning application is going backwards.</p> <p>I would like to know how this important project is being governed, who is leading it, who is managing it and how often is progress against the timeline (which is presumably in the Business Case) reported to the Project Sponsor. Also, what actions are being taken to keep it on track.</p> <p><i>Received from Maura Launchbury</i></p>
Response	<p>A previously stated work to create a new Great Western Park Surgery building is complex and involves multiple stakeholders. The planning application has now been submitted by the practice’s specialist medical developer Assura and is now on the Council’s website soon for consultation. Planning Application P18/V1826/RM</p> <p>The project is overseen by a joint group with representation from both the Vale of White Horse District Council and the Vale of White Horse District Council and the ICB. The ICB Director of Place and Communities is the Project sponsor for the project.</p> <p>The ICB will continue to publish updates on our website Great Western Park, Didcot GP Services BOB ICB</p>

No. 4	<p>ICB Media / press function</p> <p>I would like to know what the operating purpose is for the ICB media/communications function?</p> <p>Decisions and changes about health provision in the Bucks, Oxon and Berks West area are extremely important and we should be able to give up to date information on decisions being made, changes implemented, consideration about service cuts, outsourcing and improvements and public consultations. We should also be able to let people know what the reason is for changes and what the cost will be.</p> <p>However the most we (as the only dedicated local newspaper for the north Oxfordshire, south Northants and south Warwickshire areas) receive is reminders to obtain repeat prescriptions before public holidays, and opportunities to receive vaccinations.</p> <p>It means that the publicly funded body that organises and implements NHS health services, and uses public funds to ensure communities receive adequate and fair social and medical care and public health/prevention services, appears to be unaccountable to the public.</p>
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	<p>We believe the public should be aware of plans before they are confirmed and implemented.</p> <p>The ICB, using public funds, operates a media office but we do not see that any of the major issues that affect our readers are being communicated to us. We are expected to trawl an extremely complicated website to go through long Board papers, much of which relates to other archive papers, which is clearly not feasible or fair to expect. Public information is the basis on which media offices were initially established. Spin doctors were established by companies to protect commercial information but that should not relate to NHS bodies.</p> <p>We require financial and medical decisions or proposals to be declared and explained in a language that the public can understand.</p> <p>Can you comment on the ICB's approach to disseminating information via the media and tell us a) how much the ICB communications operation costs per year and b) whether the ICB will ensure that the media are provided with information relating to services and service changes that affect their readers.</p> <p><i>Received from Roseanne Edwards, Banbury Guardian</i></p>
<p>Response</p>	<p>The ICB is mindful that all media outlets serve as important intermediaries between healthcare providers and the public. We take our obligations seriously to be publicly accountable and to communicate and engage with our residents about health services and decisions of the ICB and its partners.</p> <p>During 2024, the ICB communications team issued more than 40 media releases about a variety of important issues which make a real difference to the wellbeing of our communities, and which reflect our priorities. Over and above vaccinations and repeat prescriptions, we highlighted among others: our primary care strategy, blood pressure monitoring to reduce heart attacks and strokes, new services provided by community pharmacies, better management of long-term conditions, winter planning, and the increasing importance of digital technology in enabling people to access health services. We kept our communities aware of the effects of NHS industrial action to ensure people were able to get the care they needed.</p> <p>The communications team also received nearly 200 inquiries and requests for interviews from across local, national and professional/trade media outlets on a huge number of issues during 2024, which we answered in as timely a way as possible, with professionalism and care.</p> <p>In addition, we invite our communities to take part in meetings, webinars and to feedback on services both locally and nationally. Our health and care system finances, the performance of our services and decisions about them are discussed openly at Board meetings, which anyone is welcome to attend, and which journalists frequently report on.</p> <p>We believe our commitment to further develop public engagement and involvement, outlined in the report we are bringing to the Board, will increase public understanding of the NHS, and lead to service improvements made in partnership with our population. The ambition is that services will truly answer community needs and priorities within the resources available.</p>

<p>No. 5</p>	<p>Privatisation of Patient Transport Services</p> <p>We are opposed to the privatisation of health services because profiteering undermines the NHS.</p> <p>1 Why has NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board appointed EMED Group to provide NHS non-emergency patient transport services?</p> <p>2 Was South Central Ambulance Service invited to tender? Why was it not chosen as the preferred provider?</p> <p>3 Why was the intent to tender not publicised earlier?</p> <p>4 What public consultation or communication with elected representatives in local government was there?</p> <p>5 What has been/will be the impact on NHS staff employed in the PTS (transfers, 'redundancies', redundancy terms, etc.)?</p> <p>6 What is the duration of the contract?</p> <p>7 What are the provisions for monitoring performance in the delivery of the contract?</p> <p>8 What provisions are there for bringing the service back in-house if performance is not satisfactory?</p> <p><i>Received from Bill MacKeith Secretary, Oxon Keep our NHS Public</i></p>
<p>Response</p>	<p>NHS Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board has appointed EMED Group to provide NHS non-emergency patient transport services after a thorough and competitive procurement process undertaken in accordance with the Procurement Act 2023, with the new enhanced service starting on 1 April 2025.</p> <p>An Invitation to Tender was published on the national government portal Contracts Finder Contracts Finder - GOV.UK and the award was published following completion of Bidder evaluation. The contract was awarded to the highest scoring Bidder against the scoring mechanism set out in the Bidder guidance issued with the Invitation to Tender.</p> <p>The new contract does not constitute a significant change to current provision and as such did not require public consultation, however we did undertake a public engagement exercise with current users of the service with feedback received used to inform the service specification.</p> <p>EMED is working with South Central Ambulance Service (SCAS) and other subcontracted providers to ensure affected staff are transferred to EMED in accordance with Transfer of Undertakings (Protection of Employment) Regulations 2006.</p> <p>The contract has been awarded for an initial five-year period with the option to extend for a further five years – 10 years in total.</p> <p>A range of quality indicators are detailed in the contract, linked to delivery of the service specification which will be reviewed and managed through regular contract management meetings. Non delivery of the quality/performance indicators will be managed via this mechanism and in accordance with the NHS National Standard Contract as necessary.</p>