

NHS Cornwall and Isles of Scilly Integrated Care Board - Corporate governance review and improvement programme

November 2022

Final Report




Cornwall and Isles of Scilly

 Cornwall and Isles of Scilly
Integrated Care System





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18 November 2022

NHS Cornwall and Isles of Scilly - Corporate governance review and improvement programme

Dear Carolyn,

Please find below our **final report** which outlines the findings from the governance review and improvement & education programme we have recently concluded. This report sets out the scope of work, the context, approach, and methodology, the findings of our diagnostic review of your existing governance arrangements, and the recommendations for strengthening those arrangements. This culminates in a high-level improvement plan to support discussions regarding next steps.

This document reflects comments received on the 3 working draft versions of the report we previously shared with you.

Thank you for your support and engagement throughout this piece of work, if you have any questions please do not hesitate to contact me.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Karen Finlayson'.

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1 - Introduction

Scope of work

Purpose of the review

The NHS Cornwall and Isles of Scilly Integrated Care Board ('the ICB') commissioned a review into the current governance arrangements of the newly created ICB, followed by an improvement and education programme.

This programme was designed to review the existing arrangements and to identify opportunities for strengthening governance, whilst also recognising the evolving landscape of the NHS and the ongoing development of associated operating models. The purpose of this review is to provide recommendations and support on:

- The implementation of a governance improvement programme that spans the ICB board, its committees, the executive groups, and governance relationships with local partner organisations.
- Incorporating lessons learned arising from a recent independent review of decisions at the former NHS Kernow CCG, and ensuring those lessons are imbedded in the newly established ICB.

The review commenced in August 2022, focusing on the "as is" governance arrangements, to provide a baseline assessment from which an improvement and education programme of work can be developed. This is the summary report captures the findings of this review.

Methodology

We utilised the PwC governance framework as a basis for undertaking the governance review. This focuses our assessment on the following key areas:

- Leadership, behaviours & culture;
- Structure and effectiveness;
- Risk identification and ownership;
- Management information & controls; and
- Strategy and reporting transparency.

A summary of the PwC governance framework is included in Section 3, and a complete set of Key Lines of Enquiry is included in Appendix 1.

Approach

We started our work on 8th August and as agreed with the Senior Responsible Officer (SRO) for the review, our approach consisted of:

- 1-2-1 interviews with ICB members (both executive and non-executives) and other ICB staff that work directly with matters covered by this review (i.e. governance, risk, audit, etc.).
- A desktop review of documentation (specifically with key documentation relating to the functioning of the ICB, and any transitional documentation detail the move from CCG to ICB).
- Observations of key committees and system meetings.

A complete list of interviews conducted, documentation reviewed, and meetings observed, has been provided in Appendix 2 for reference.

We also held frequent 'touchpoints' with the reviews SRO and SteerCo to keep all interested parties appraised of progress and emergent themes. These included:

- Weekly 1-2-1 meetings with the review's Senior Responsible Officer (SRO);
- Weekly meetings with the review's SteerCo; and
- Ad hoc meetings with ICB members.

Limitations of scope

The scope of our review was limited to the stated purpose, governed by our engagement contract. As such:

- We have not assessed the completeness or accuracy of information provided to us;
- Our review is not designed to provide advice or assurance to third parties and should not be shared with them without our prior consent;
- Decisions on the governance arrangements and responsibility for their implementation sits with the ICB alone.

We acknowledge that the work to date has not included capturing the views of system partners or other stakeholders.

2 - Executive summary

Executive Summary - Findings of the Diagnostic Review

The ICB has recognised that there is a challenge in making governance work and that improvement is needed to operate more effectively. Our main observations to date against the PwC governance framework are as follows. Further detail on our observations are in Section 4 below.

Leadership, behaviours and culture	Structure and effectiveness	Risk identification and ownership
<p>An ICB board has been established at which the key elements of the system are well represented. The ICB Executive and Non-Executive Members (NEMs) have a range of relevant background and experience. There has been a focus on improvement in response to challenges being faced as a new organisation, reflected in an openness to engage with our review. We also noted during our review that:</p> <ul style="list-style-type: none"> There was not a consistent understanding demonstrated of the vision, values, and strategic priorities of the ICB and wider system amongst the people we interviewed. More could be done to ensure these are widely understood and consistently articulated. Actions are being taken to address this, for example at the November board. It is also acknowledged that a consensus is missing on what will be done as a result of the 'True North' discussions, how progress will be measured, who is accountable for delivering the priorities and how they will be specifically held to account. This needs to be communicated more widely throughout the ICB and wider system so there is a broader understanding. Actions are being taken to address this, for example at the November board. There is a blurring of lines between the Executive and NEMs that needs to be resolved. Relationships between the Executive and NEMs continues to develop and every two months there will be protected time to support this process. As a new organisation it is recognised that a focus is needed on driving the cultural change, including focus on performance management and continuous improvement in both the ICB and across the system. From the interviews we noted an inconsistent induction experience, which is currently being addressed and a new need to improve staff development and performance management. The updated staff survey results for 2022 will provide further insight when available. From an EDI perspective the ICB has considered the membership and how it represents the population demographic and system partners for diversity of views. 	<p>The ICB have established a clear set of committees which are widely known, with NEM chairs and Executive leads having been established where appropriate. Terms of Reference have been agreed for each of them and initial meetings held. These are, supported by the wider governance infrastructure that is in place including the ICB's Governance Handbook. We also noted during our review that:</p> <ul style="list-style-type: none"> The delegation of authority is not widely understood and comprehensive enough. For example some roles (e.g. ICA Managing Directors) have job descriptions in place and but this is inconsistent with the role they are expected to do. It was noted that in some cases it could be made clearer on what authority individuals have to make decisions. The System Executive Group (SEG) is not yet functioning effectively, which is crucial to success. Finalisation of Terms of reference, membership and purpose is important to resolve quickly and this is currently being addressed. The ICB has established a number of committees and there may be opportunities to be more streamlined and efficient as the ICB develops. A continuous appraisal of their effectiveness is needed so that changes can be made if appropriate. There is scope for developing thinking on how system representatives could be more involved in the ICB committee structure below board level to input into system discussions where appropriate. Not doing so may risk siloed discussions being held where committees have a broader system remit. Further communication is needed on the Executive portfolios so its clear to board members and staff. In particular, greater clarity of the role of ICB clinical leadership and building the system's clinical advisory architecture would be beneficial. We understand that work is already underway to develop the clinical executive and a clinical advisory group. This needs to be addressed as a priority. The governance and board secretariat functions are currently insufficient to support the relatively complex arrangements that are required. 	<p>The ICB has a risk register in place and has been developing a Board Assurance Framework (BAF) to reflect the priorities that have been agreed. We noted during our review that:</p> <ul style="list-style-type: none"> The inconsistent understanding and articulation of the ICB's strategic priorities, and those of the system, inevitably result in a more immature risk environment that is desirable (for example through the linkage of strategic priorities to strategic risks). There are therefore also opportunities to ensure there is consistent reporting of risks, and that they are aligned with organisational strategy. A review has been completed of the internally focussed risk register, and it is acknowledged that the system risk register also needs to be reviewed and updated. This needs to be addressed through the development of an effective BAF, with governance colleagues working in conjunction with board members. We understand that the BAF has been aligned with the strategic priorities agreed at the 'True North' event and that more work is going on to develop and articulate the system wide risks, reflecting the ICB's status as a new organisation. Inconsistencies in risk reporting across the system could result in sub-optimal decision making, with potential efficiencies and benefits being missed. In responding to significant risks, including setting up the Winter Room and dealing with significant operational challenges in the system, there is a need to ensure there is sufficient capacity and resilience to deliver on business as usual activities. Not doing so risks creating additional challenges and impacting negatively on staff.

Executive Summary - Findings of the Diagnostic Review

Management information and controls	Strategy and reporting transparency
<p>In a relatively short period of time the ICB has established a suite of information that is presented to key committees and the Board to provide details about performance, quality and financial matters on a routine basis. We noted during our review that:</p> <ul style="list-style-type: none"> • Since our appointment the quality of the information presented in key committee meetings has improved from being heavily reliant on historically available information, which was considered by a number of interviewees to be of relatively poor quality. • Improvements are needed to provide a better system-wide view of performance, quality and financial metrics. Steps need to be taken to align reporting across the system, working towards one version of the truth, a challenge which reflects the ICB's status as a relatively new organisation. • We noted during our fieldwork that the ICB lacked an integrated view of performance in the early stages of its development to allow for the effective triangulation of information. This was acknowledged by the ICB and an initial Integrated Performance Report has been developed for review at the October ICB Board meeting, with further actions proposed to improve the availability of real-time information. • Similarly, the volume of information can make engaging with data constructively a challenge. • We noted insufficient visibility of forecasts and trajectories in performance reporting, to allow NEMs and others to take a forward-looking rather than backward-looking view. This has been acknowledged and is being addressed, such as the creation of an Integrated Performance Report. • There is an opportunity for greater alignment of key information and controls related resources across the system, such as analysts, internal audit, which could generate added benefits and cost savings. 	<p>Work has been undertaken as part of the True North initiative to establish a vision, values and strategic priorities for the system, and action has been taken to develop plans for how decisions are made in the context of those priorities. We also noted during our review that:</p> <ul style="list-style-type: none"> • As noted under leadership, behaviours and culture, once agreed and consistently understood, the strategic priorities need to be socialised and agreed more widely to help instil clarity and facilitate the alignment of activity with the key areas of focus for the ICB. • A consistent theme from our work has been the difficulty of relationships with partners in the system and the impact that has the potential to have on the success and achievement of systemwide strategic priorities. System engagement and relationships with partners needs to be focused on as priority. • Across the system it is not clear on how pathway change will be decided and enacted. The definition of pathway change, and how it will be implemented, needs to be made clearer; for example, at what point does citizen engagement occur and when during the process? This could be addressed through the development of additional guidance to assist with interpretation. • There is not yet a sufficient understanding and clarity on statutory obligations which impact the ICB and how they will be discharged. We understand some initial work has been undertaken but there is a need to continue to communicate this in light of the newly formed ICB.

Executive Summary - List of all actions for improvement and education by theme

The table below collates all actions for improvement listed in Section 4.0 into one place. It will also support the production of (and culminating) a high-level improvement plan for discussion. In a number of instances this will involve the continuation of work the ICB is already delivering and we acknowledge that this will continue to be a work in progress as arrangements are developed and actions taken.

Note on the education element of the improvement actions: The education element of the improvement plan (i.e. ensuring that stakeholders under-take the same improvement journey, and learning what good looks like through that process) is embedded across the improvement actions listed above. The high-level improvement plan detailed on page 11 includes a series of workstreams, through which stakeholders can jointly develop and learn best practice, whilst also having a dedicated communications and engagement workstream for ensuring that learnings are disseminated across the system to ensure that the improvement programme doesn't happen in isolation.

PwC Governance Framework Theme	Actions for improvement	ICB only or requires system input
Leadership, behaviours and culture	Continue to develop and refine the ICBs strategic priorities	System input required
	Ensure appropriate resourcing for communicating and engaging stakeholders in discussions on strategic priorities	ICB only
	Implement an ongoing development programme for the board and executive	ICB only
	Clarify executive leadership and ownership	ICB only
	Instigate a cultural change (with a focus on performance management and continuous improvement) programme	ICB only
	Implement a clear process for creating timely ICB agendas and supporting documentation	ICB only
	Implement a consistent approach to induction and onboarding	ICB only
Structure and effectiveness	Providing further guidance to support the mapping of process for reaching decisions, to ensure consistency of interpretation and application.	System input required
	Finalise and agree ICB governance structures and clarify the inter-play between ICB and system structures	System input required
	Periodic committee effectiveness reviews	ICB only
	Review alternative governance models being implemented in other systems	ICB only
	Develop a system accountability and assurance framework between partners	System input required
	Clarify the role and remit of ICAs and ICA Managing Directors (MDs)	ICB only
	Agree what oversight mechanisms will govern the delivery of ICAs	ICB only
	Incorporating lessons learnt from recent investigations	ICB only
	Formalise clinical advisory and engagement structures	ICB only
	Clarify roles and responsibilities of the ICB clinical executive	ICB only

Executive Summary - List of all actions for improvement by theme

The table below collates all actions for improvement listed in Section 4.0 into one place. It will also support the production of (and culminate in) a high-level improvement plan for discussion.

PwC Governance Framework Theme	Actions for improvement	Requires system input
Risk identification and ownership	Review, agree, and seek to standardise risk management framework across the system	System input required
	Align the risk framework to strategic priorities	ICB only
	Continue to develop and updating the BAF, agreeing the strategic risks upon which the BAF is predicated.	ICB only
	Determine the ICB and system's risk appetite	System input required
	Reviewing the risk frameworks of partnering organisations	System input required
Management information and controls	Continue to develop and refine integrated reporting	ICB only
	Continue to improve overall data quality and the production of reliable reports	ICB only
	Review to current set of KPIs	ICB only
	Tailor reports to their respective audience	ICB only
	Incorporate forecasts, trends and trajectories, as appropriate, into board reports	ICB only
	Establish the architecture for generating consistent system reporting	System input required
	Take measurable steps to align audit plans across the system	System input required
	Disseminate the process of garnering system-wide assurance through partners	System input required
Strategy and reporting transparency	Establishment of peer networks between ICB and partners	System input required
	Clinical executive to define this process and socialise with stakeholders	System input required
	Clarify statutory obligations under the new legislation	ICB only
	Clarify the statutory responsibilities of key executive roles (if any)	ICB only

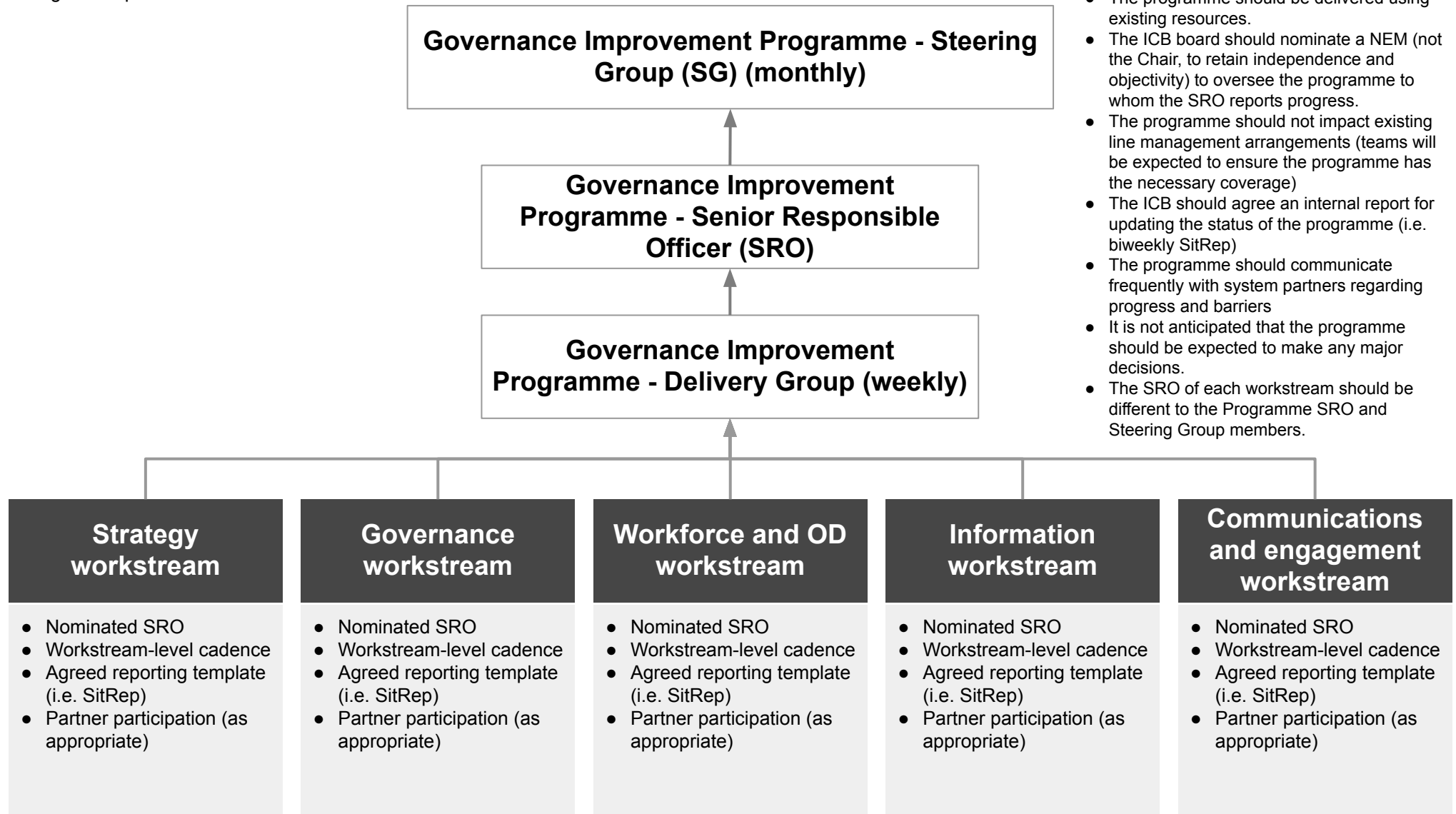
Executive Summary - High-level improvement plan

Based on the actions for improvement listed in Section 5.1, the following improvement plan has been developed in order to take measurable steps towards addressing the observations raised.

Workstream	Sept/Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023
Strategy	Finalise strategic objectives, iterate based on feedback from the ICB board.	Socialise approved list and supporting documentation with key stakeholders. Iterate as appropriate.	Embed agreed strategic priorities and agreed key performance indicators across ICB structures.	Embed agreed strategic priorities and agreed key performance indicators across stakeholder reports	Utilise agreed strategic priorities, prior engagement with stakeholders, and support evidence as a starting point for the development of the ICB's Five Year Plan.	
Governance	Continue to develop the ICBs decision mapping, and defining the inter-play with system partners. Process BAF updates. Implement recommendations from recent investigations. Confirm the role and remit of ICAs, ICA MDs, the new clinical executive.		Establish joint or delegated committees as required, supported by appropriate documentation.		Establish a programme and template of committee effectiveness reviews. To be finalised before the end of the financial year.	
			Develop a system assurance and accountability framework between partners, clarifying ways of working and establishing principles around subsidiarity, equity, and transparency.		Commence discussions regarding the establishment of an integrated risk framework and audit plan across the system.	
Workforce and OD	Board and Committee observations to help inform our ongoing ICB and Executive development (workshops, coaching, peer support, etc.)					
	Define scope of the Cultural Change programme	Commence cultural change programme with a series of briefings and kick-off events, to be conducted as a Roadshow across the patch)		Establish an ongoing programme of work (separate to the Governance Improvement programme) with its own workstreams, SRO, and working group (including involvement from system partners		
Information	Continue to refine the system's Integrated Performance Reporting and key performance indicators	Establish an ongoing programme of work (separate to the Governance Improvement programme) with its own workstreams, SRO, and working group (including involvement from system partners). This should cover all elements of system reporting (including both data and wider management information).				
		Based on the agreed reporting framework, establish a methodology for determining targets and trajectories based on information captured.		Creating a singular view of information resources across the system (analysts, developers, modellers, etc.) to plan for standardisation and integration across the patch,		
Communications and engagement			Support with the socialisation and stakeholder briefings regarding confirming strategic priorities.			
		Support with the socialisation and stakeholder briefings regarding the ongoing iteration, refinement, and embedding of the agreed system governance framework.		Ongoing support the the cultural change programme		
				Ongoing support the information integration programme.		

Executive Summary - High-level improvement plan - programme architecture

Based on the improvement plan outlined above, this slide details further information regarding the programme architecture which we anticipate will be required to delivered the agreed improvements:



3 - Methodology - PwC governance framework

The PwC governance framework

The diagnostic review of your existing governance arrangements has utilised the PwC governance framework summarised below to drive our work, tailored to your specific requirements and the ICS Development Framework. Key Lines of Enquiry (KLOEs) were developed from our governance framework (included in Appendix 1 for reference) to drive our documentation review and the meetings we held with stakeholders:

Key themes	Leadership, behaviours and culture	Structure and effectiveness	Risk identification and ownership	Management information and controls	Strategy and reporting transparency
Combined code principle	Leadership	Effectiveness	Accountability	Performance	Relations with stakeholders
Sub-themes	Trust Ethics Culture Shared Vision / Strategic Priorities Tone from the Top Values Management of Crises Incentives Skills and capability	ICB and committees Composition and structure Roles and responsibilities Delegation of authority Effectiveness Assurance Internal / external audit / other	Effectiveness of risk management (e.g. risk identification, evaluation and reporting) Reputational risk Escalation processes	Non financial information KPIs and metrics Balanced scorecard Information systems Robustness of data/information	Value creation vs compliance Stakeholder engagement Statutory requirements, including constitution and legal obligations
Alignment with ICS Development Framework	Partnership principles (leadership)	Board arrangements/ decision making	Risk management	Accountability, reporting and oversight	Stakeholders and communities

4 - Detailed findings from the diagnostic review of governance arrangements

4.1 Leadership, behaviours and culture

Detailed Findings

Our key observations arising have been summarised in the table below, with a suggested improvement action and our own assessment of relative priority

Area	Observation	Action for improvement	Complexity (H/M/L)	Priority (H/M/L)
Alignment and understanding of vision, values, and strategic priorities	<p>The 'True North' event took place in June 2022 with 75 stakeholders and partners from across the system. Together a collective vision (Cornwall and Isles of Scilly is a great place to be born, live and grow old) and aim (Connected, healthy, caring communities for one and all) were agreed. Six themes were also agreed at the True North event and were articulated at the July ICP meeting as follows:</p> <ul style="list-style-type: none"> • Person at the centre: Every conversation will be honest and starts with 'what matters to you?' • My place: Creation of transdisciplinary, flattened hierarchy, citizen centered approach that is so good nobody can change it! The closer to the citizen, the more effective and the more innovative we can be. Live / Eat / breathe subsidiarity – it starts and ends with the citizen! • Finance strategy for channel shift: We have enough money, but are we spending it in the right way? Driving out inefficiencies to further invest in prevention. • Population health management (PHM): Focusing on data to better enable the system support the people of Cornwall and the Isles of Scilly. Ensure they feel listened to, see actions leading to improvements, feel supported to keep healthy, feel their care is integrated and they are at centre. • Employment: Building & retaining a health and care workforce, fit for the future, from our local communities. • Better working together: Looking at how we show compassion, how we communicate, our culture and our behaviours. <p>The ICB has agreed 5 top priorities for 2022/23, covering flow, intermediate care, elective recovery, mental health learning disability & autism, and dementia. In addition workforce is considered to be a priority and population health management as an enabler. Core ICB values have been identified - citizen first, outcome focused, respectful and excellence in all we do.</p> <p>These were not consistently articulated during our interviews, and where referenced they were described as being worked through and needing to be formalised. There doesn't appear to be a consensus about how meaningful they are, what will be done as a result, how progress will be measured, who is accountable for delivering them and how they will be held to account. There is also some confusion when linking to wider system priorities.</p>	<ul style="list-style-type: none"> • Continue to develop and refine the ICBs strategic priorities and strategic objectives - a working group should be established to further refine the strategic priorities into measurable indicators and outcomes. This would seek to: <ul style="list-style-type: none"> ○ Clarify the strategic priorities and socialise with stakeholders (where appropriate); ○ Establish clear, measurable indicators which all parties can use to assure delivery (and deviation); and ○ Ensure that these strategic priorities form the foundation of the ICS's five year plan. • Ensure appropriate resourcing for communicating and engaging stakeholders in discussions on strategic priorities - continue to socialise and agree these priorities accordingly (both pre and post ongoing development). This will aid the understanding, alignment, and support for these priorities. Once formalised, a communications and engagement plan should be developed in order to encourage recognition of these priorities from across the system. 	Low	Medium

4.1 Leadership, behaviours and culture

Detailed Findings (continued)

Area	Observation	Action for improvement	Complexity (H/M/L)	Priority (H/M/L)
Protected time for Executive and NEM ICB members	A consistent theme at the time of our interviews was the sense that, to date, the Executive and Non-Executive Members (NEMS) have spent time together separately (particularly the NEMS), but that time spent together as a core ICB board (ICB Executives and NEMS) had been relatively limited and that risks their ability to come together and agree on priorities as a unitary board. This was particularly felt to be the case in relation to time spent outside of formal board meetings. It reflects a number of factors including the variation in timing of recruitment into Executive and NEM positions, the focus on establishing the ICB from 1 July and an ongoing focus on day-to-day operational matters. We understand that the Chair has scheduled in protected time for the ICB board to take place every two months for ongoing development.	<ul style="list-style-type: none"> • Implement an ongoing development programme for the board and executive - as the ICB continues to establish, mature, and grow; both the board and, separately, the executive group should establish an ongoing development programme to align, explore, strengthen relationships, and developing towards unitary working. 	Low	Low
The role of NEMs in establishing the organisation's governance	Throughout the interviews, many ICB members reflected on the role non-executive members have played in the development of the organisations governance arrangements. Whereas this likely reflects the status of the organisations (newly established, etc.) the feeling amongst those interviewed is that the executive should take a leading role in establishing these arrangements, and then proposing them to the board for approval. Chairs of committees and Executive leads needs to agree on effective ways of working; this blurring-of-lines impacts perceived ownership of key strategic matters, and dilutes executive ownership of the key activities and roles and responsibilities which is likely to be considered disempowering.	<ul style="list-style-type: none"> • Clarify executive leadership and ownership - ensure that executive members are both responsible and accountable for the development of organisation structure which support governance and assurance processes. This should also consider how the executive management team meetings and the senior management team meetings operate effectively. 	Low	Medium
Cultural change across the system and moving towards new ways of working	One of the strongest themes from our interviews was the broader need for cultural change (focused on performance management and continuous improvement) to take place to reflect the change in the nature of the organisation from a CCG to an ICB. In particular, the need to move away from an inward looking CCG model to an outward looking, system focussed role is widely recognised, as is the challenge in facilitating that cultural change amongst all levels in the ICB and helping to change behaviours as part of wider Organisational Development challenges. Another common theme in our interviews, particularly when speaking with NEMS, was the importance of ensuring the empowerment of staff to both make the most of the skills and experience available within the ICB. Greater staff empowerment would also help to free up Executive time spending less of it on operational matters and focusing more on strategy and key issues.	<ul style="list-style-type: none"> • Instigate a cultural change programme - beyond improvements in the governance domain, Directors of Workforce and OD from across the system should work together to establish a system-level cultural development programme - first at the ICB and then at the system level. This programme should also include performance management and partners will hold each other to account in a constructive way in the best interests of the system. This is required in order to work-through nearly a decade of working practices (i.e. commissioner / provider) which remain perceived barriers to constructive collaboration. 	High	High

4.1 Leadership, behaviours and culture

Detailed Findings (continued)

Area	Observation	Action for improvement	Complexity(H/M/L)	Priority(H/M/L)
Ongoing staff development and acting on recent staff survey results	The former NHS Kernow CCG participated in the most recent NHS staff survey; the results highlighted that 'opportunities to develop my career' and 'access the right learning and development opportunities when I need to' were two of the lowest scores when compared to the average. We understand that actions are being taken to address the underlying issues, and further insight into how well these have been received will be identified through the results of the 2022 staff survey, which has recently opened.	<ul style="list-style-type: none"> • Instigate a cultural change programme - following on from the previous point, the cultural programme should also focus on creating an environment where staff feel empowered to develop themselves and their careers, supported by training and development opportunities. 	Medium	Medium
Clear process for the creation of ICB agendas and board papers	<p>A forward plan for board meetings has now been developed. It was noted that there wasn't a clear process, which is widely understood and consistently implemented to date, for deciding agenda items but this is now being addressed. In some instances, board papers had been circulated for comment prior to the Executive having visibility. This has resulted in uncertainty between some Executives and NEMS as to how the governance process works when introducing proposals and preparing for Board meetings. There is also a need to ensure that last minute changes to agendas and papers are avoided where possible. These factors potentially impact the Executive's ability to optimise efficiency and ensure constructive dialogue during board meetings.</p> <p>As part of this process, the governance and board secretariat functions need to be strengthened to support the relatively complex arrangements that are required.</p>	<ul style="list-style-type: none"> • Implement a clear process for creating timely ICB agendas and supporting documentation - this process should be agreed between the Chair, the CEO, and the Board Secretary (or equivalent), whereby the Board Secretary holds responsibility for ensuring the production of papers and the issuing of agendas (leveraging input from executive colleagues, as required). This should be done as part of a process to strengthen the governance and secretariat functions supporting the ICB and wider system, including ensuring that appropriate, regular meetings are in place to feed the Board agenda. Sufficient time should also be given to ensure that, where appropriate, propositions can progress through the required governance structures of partner organisations. 	Low	High
Recruitment - induction and training	Whilst induction activities take place for individuals on their appointment to their current roles, these tended to be ad hoc and not necessarily undertaken as part of an integrated programme of induction and mandatory training. This in part reflects the challenging circumstances of the past 6 months, however a standard induction programme - encompassing mandatory training requirements, key policies and strategy - would support a greater consistency in the experience of new joiners. This would be particularly beneficial to be in place in advance of any future recruitment drive e.g. of apprentices. We understand that action is currently being taken to facilitate a more consistent induction programme.	<ul style="list-style-type: none"> • Implement a consistent approach to induction and onboarding - induction activities should be consistent across the organisation. The formalising of a 'buddying-style' relationship should also be encouraged within teams (specifically during times of remote working). 	Low	Low

4.2 Structure and effectiveness

Detailed Findings

Our key observations arising have been summarised in the table below, with a suggested improvement action and an assessment of relative priority:

Area	Observation	Action for improvement	Complexity (H/M/L)	Priority (H/M/L)
Lack of delegated authority between ICB and ICS structures	<p>The ICB currently lacks a widely understood delegation of authority throughout the ICB. Whilst a financial scheme of delegation for the ICB has been developed covering authorisation limits throughout the organisation, it is yet to be formally approved. It was consistently felt that a delegation of authority to make decisions is unclear. For example, there were some concerns expressed about the role of the 3 ICA Managing Directors and what authority they have to make decisions.</p> <p>This contributes to a concern raised that the ICB may continue to make decisions through its committees, which is consistently felt to have been the case in the former CCG. Clarity over delegation of authority would assist the committees in working like the NEMS indicate they should work e.g. as assurance committees, with clear arrangements in place to feed those committees with the right information.</p>	<ul style="list-style-type: none"> • Map the process for reaching decisions - to complement the newly proposed governance structure (subject to approval) the ICB should draft a supporting decision map; clarifying what forums have decision-making authority over which areas. • Finalise and agree ICB governance structures and clarify the inter-play between ICB and system structures - this decision map should also articulate how ICS structures will interact and establish jointly agreed delegation arrangements via all relevant boards 	Medium	High
Volume of committees and the need to continuously appraise effectiveness	<p>The current committee structure covers all key responsibilities to be discharged by the ICB, and are considered to be a safe starting point for business to be discharged through (although there is an acceptance that these arrangements are remain a work in progress). The board should continue to appraise the effectiveness of the 8 committees plus 3 ICA forums. For example, it was raised whether ICA and Primary Care Commissioning Committees are both needed, and whether there is risk of duplication and overlap. We understand a review will be undertaken as part of establishing a meeting rhythm over winter to address current system challenges.</p>	<ul style="list-style-type: none"> • Periodic committee effectiveness reviews - the ICB corporate governance team should conduct periodic reviews of these newly created committees for effectiveness. The template should be agreed in advance and consistent. The ICB should also review the effectiveness of committees annually (supported by evidence provided by the corporate governance team). 	Low	Medium
Clarity of purpose within committees	<p>All existing committees in the governance structure now have a Terms of Reference which will initially drive their activity. However, the arrangements and purpose are not consistently well understood by all. The following quote provides a poignant example of this; <i>"The governance of the ICB is not clear and the governance of the system is not clear; so how we discharge our duties, and hold others accountable, is inevitably not clear"</i>. A separate example shared was the question of whether Transforming Care for Cornwall (TC4C) reports into the System Executive Group (SEG) or sits alongside it.</p>	<ul style="list-style-type: none"> • Periodic committee effectiveness reviews - as above, the proposed template should also appraise committees against the objectives stated in their terms of reference. 	Low	Medium

4.2 Structure and effectiveness

Detailed Findings (continued)

Area	Observation	Action for improvement	Complexity (H/M/L)	Priority (H/M/L)
Involvement of partners in the committee structure	<p>The current proposal regarding ICB governance overly-leverages previous CCG forums, without due care or attention to the wider system. Whilst there is a need to ensure statutory obligations are met, the risk of implementing a limited-access approach for partnering organisations will limit the benefits of legislative change and could risk discussions being held in silos.</p> <p>Some ICBs have proposed the establishment of joint committees, others have some representatives from across the system attending specific committees to provide system insight, whilst others are proposing full delegation to providers (with NEM membership). One example suggested during the review was that the System Executive Group (SEG) becomes a joint committee. However there were comments made that questioned the effectiveness and size of this group and how decisions are being made and acted on in a timely fashion. Given SEG includes executive representation from across the system they should have delegated responsibility to make decision on in the best interest of the system, otherwise it may be considered a 'talking shop' which it taking up senior time and actions needed to be taken do not get done. At the time of writing this report the Terms of Reference were still being discussed and agreed.</p>	<ul style="list-style-type: none"> • Develop a system accountability and assurance framework between partners - pre-legislation, some systems invested resources in the creation of a quasi-contractual mechanism to formalise their partnership arrangements, in the absence of legislation. The benefit of this approach is that it encouraged alignment regarding working practices and how decision making will be made in the best interest of the system. This should also be explored by the ICB, in collaboration with partners. 	High	High
Clarifying the role of ICB clinical leadership and building the system's clinical advisory architecture	<p>The role of a Medical Director is new to the former CCG/ICB. In common with other Executive roles, there is a need for the clinical executive – the new Medical Director and Nursing Director - to work together effectively, changing the approach from clinical engagement to clinical leadership. This leadership needs to be broadened to ensure empowerment across all medical, clinical, and associated health professional domains. There also needs to be consideration of the resources needed to deliver their roles effectively.</p> <p>We understand that work is already underway to address this point through the development of a clinical executive and a clinical advisory group.</p>	<ul style="list-style-type: none"> • Formalise clinical advisory and engagement structures - the system will need to level multidisciplinary perspectives to ensure optimum leadership and input across clinical domains. System-wide forums (formal and informal) should be leveraged to galvanise system-thinking. • Clarify roles and responsibilities of the ICB clinical executive - ensure the role and remit of both clinical executive posts are clearly defined and suitably resourced. 	Low	High

4.2 Structure and effectiveness

Detailed Findings (continued)

Area	Observation	Action for improvement	Complexity (H/M/L)	Priority (H/M/L)
Lack of understanding regarding the role of ICAs	<p>There is a consistent commitment expressed to the principle of ICAs, working at a place-level and being community-focused. During our interviews there was limited clarity of understanding regarding the function and focus of ICAs. Job descriptions are in place and there is support to help clarify expectations, although concerns were raised during our interviews, including the following:</p> <ul style="list-style-type: none"> • No statutory functions or tactical levers to effect change; • No delegated authority - nor what the relationship should be with locality partners; • ICA MDs have no staff, administrative resource or delegated budgets which makes delivering on ambitions difficult; and • Confusion regarding the role and remit of ICA MDs; in particular a lack of clear direction through mixed messaging on whether their focus should be strategic or operational. <p>If it persists it may result in ICA MDs being held accountable for delivering a role without the requisite authority, resources, or leverage to do so. There is a commitment in the ICB leadership to working alongside ICA MDs to support the development of their plans and vision for their respective places. We understand actions are in progress to provide more support to the ICA MDs, for example to help with administrative and financial tasks.</p> <p>If the ICB plans to present information based on the 3 localities and then aggregate that information upwards to form an ICB view, improvements to the information available at an ICA level will be required.</p> <p>The focus of the ICAs to date has been on building integrated care through relationships rather than acting as an area commissioning function. The timing of the introduction of any commissioning arrangements to ICAs needs to be carefully considered in light of the factors noted above.</p>	<ul style="list-style-type: none"> • Clarify the role and remit of ICAs and ICA MDs - this should be done in consultation with ICA partners. If this is done collaboratively, it will increase the likelihood of delivering what, at face value, appears to be a vague and challenging role. • Agree what oversight mechanisms will govern the delivery of ICAs - ensure partners are aligned on what information and key performance indicators are being reported; and how this information will be used for oversight and collective scrutiny purposes. 	Medium	High

4.3 Risk identification and ownership

Detailed Findings

Our key observations arising have been summarised in the table below, with a suggested improvement action and an assessment of relative priority:

Area	Observation	Action for improvement	Complexity (H/M/L)	Priority (H/M/L)
The consistent reporting of risks, and the alignment with organisational strategy	<p>The current approach to risk management, largely inherited from the former CCG, appears to be used inconsistently across the organisation. Different teams utilise different mechanisms for reporting on risks; which makes the delineation between operational and strategic risk challenging. It's also not clear how risks align to the stated strategic objectives (recognising that these have only recently been proposed and not yet been agreed).</p> <p>The further development and refinement of the ICBs strategic priorities, and ongoing efforts to embed these through formalised reporting, will support the alignment of these objectives with the way in which risks are reported and treated.</p>	<ul style="list-style-type: none"> • Review, agree, and seek to standardise risk management framework across the system - take steps to standardise the way risks are identified, reported, and monitored. Ensure consistent classification and scoring. • Align the risk framework to strategic priorities - this can be completed once the strategic objectives have been further developed and communicated. 	Low	Medium
Strategic risk and Board Assurance Framework (BAF)	<p>The current Board Assurance Framework (BAF) was highly commended; and interviewees recognised that it's clearly well developed and maintained. However, many indicated that this needed updating, in order to be in-line with the new ICB, and support the delivery of its stated purpose. This reflects the ICB's status as a new organisation, and we understand that this has been updated to be driven by the agreed priorities, but that more work is needed to develop how it addresses system-wide risks.</p> <p>Many interviewees raised the point that given the current circumstances (changing health and care landscape, significant operational pressures, etc.) that now would be a good time to discuss the system's risk appetite (i.e. as an ICB, whilst also with key partners). There is also a need to ensure that, when responding to significant risks such as winter pressures, the impact on business as usual activity is considered and effectively managed to avoid generating further negative impacts.</p>	<ul style="list-style-type: none"> • Updating the BAF - the BAF should be updated to reflect the revised strategic priorities and agree the strategic risks upon which the BAF is predicated. • Determine the ICB and system's risk appetite - a future board workshop should be dedicated to the understanding and alignment of strategic risk and representative risk appetite. 	Low	Medium
Aligning risk reporting across the system	<p>Although our review has not covered the framework by-which risks are managed in partnering organisations, many interviews say the inconsistencies in risk management and treatment as a barrier to accurately reporting on system operational and strategic risk. Forward planning and development in this domain; working towards standardisation and integration, will aid efforts to align reporting across the system and help to avoid sub-optimal decision making.</p>	<ul style="list-style-type: none"> • Reviewing the risk frameworks of partnering organisations - work towards system alignment on templates, treatments, risk management frameworks, and reporting to improve system oversight of risks. 	Medium	Medium

4.4 Management information and controls

Detailed Findings

Our key observations arising have been summarised in the table below, with a suggested improvement action and an assessment of relative priority:

Area	Observation	Action for improvement	Complexity (H/M/L)	Priority (H/M/L)
Lack of an integrated view of performance	At the time of our fieldwork the ICB lacked a clear view of system performance, reflecting its status as a newly formed entity. This impacts consistency in reporting, the ability to reliably scrutinise data captured, the ability to set deliverable targets, and the ability to track key performance indicators reliably. Not only does this impact the ICBs ability to deliver its statutory responsibility, it also impacts the system's ability to hone in its most pertinent issues. We understand this is now being addressed through the development of an Integrated Performance Report (IPR), a version of which was considered at the October ICB Board meeting. Further actions are proposed to improve the availability of real-time information to support decision making with the intention, over time, to create interactive reports using visualisation tools	<ul style="list-style-type: none"> • Continue to develop and refine integrated reporting - ensuring the governance structure is supported by timely, accurate, and relevant information. 	Medium	High
Quality of information	<p>Interviewees expressed mixed views relating to the quality of the management information, and whether this supports informed decision making. There is a recognition that there were gaps in the information the ICB wants to present for its broadened remit, arising from what was available in the former CCG. Information is also captured inconsistently, making it challenging to produce a standardised integrated performance report.</p> <p>This has started to be addressed through the development of an IPR. This is a sector wide challenge and reflects where the ICB Executives expected the presentation of information be at this stage in its development.</p>	<ul style="list-style-type: none"> • Continue to improve overall data quality and the production of reliable reports - establish a workstream to look into data quality, harmonising reporting, and utilising new technologies (i.e. dashboards reporting) to standardise, increasing visualisations, and create performance reports the encourage constructive engagement. 	High	High
The volume of information makes engaging with data and management information constructively a challenge	The volume of meetings and information, contributed to by the lack of clarity over the governance structure in parts (as noted earlier in the report), creates a significant volume of management information. This makes for a laborious task of creating reports, whilst also limiting the recipients ability to engage constructively. Many interviewees comments on, for example, the volume of key performance indicators (60+) which are monitored; and debated whether this aids decision making or dilutes strategic focus. A more consistent, simplified, integrated information for the system (one version of the truth) would support engagement and assurance in taking informed decisions.	<ul style="list-style-type: none"> • Review to current set of KPIs - and take steps to reduce the number to a more manageable amount. • Tailor reports to their respective audience - ensure that the same report is not being repurposed for different audiences; instead that reports are going to a specific forum with a specific purpose, supported by a tailored briefing. 	Medium	High

4.4 Management information and controls

Detailed Findings (continued)

Area	Observation	Action for improvement	Complexity (H/M/L)	Priority (H/M/L)
Improve visibility of forecasts and trajectories in performance reporting	Many of the papers currently submitted to board are retrospective (looking back, and providing a rationale for prior performance). There is a clear desire, specifically from NEMs, to promote more forward-looking perspectives (i.e. forecasts, targets, and trajectories) to inform better strategic discussions. This reflects the development of the ICB and is the planned next stage of development in reporting. There is also a focus on ensuring that information provided to committees is clear about what is being asked e.g. whether it is for information or a decision - the 'so what' question.	<ul style="list-style-type: none"> • Incorporate forecasts, trends and trajectories, as appropriate, into board reports - deciding on a framework for agreeing trajectories, including how NEMs are engaged. 	Medium	Medium
Take steps to align reporting across the system, working towards one version of the truth	Although the ICB and associated structures are relatively recent creations, there is an acknowledgement that reporting needs to be improved in relation to the view it gives of system performance. Information on the performance of the system as a whole, across all dimensions and domains, is inconsistent and needs to be gathered and presented in a unified manner. This is dependent on partners working closely; sharing information on a timely basis, and working towards one version of the truth for the system. We understand there are conversations already underway to create a single function for business intelligence across the system, for example.	<ul style="list-style-type: none"> • Establish the architecture for generating consistent system reporting - via the aforementioned system data workstream, take measurable steps to consistently report on performance which befits a system narrative. 	High	High
Aligning analytical resources across the system	Analytical resources are currently dispersed across the system (i.e. embedded within providers and other system partners). The ICB should initialise discussions with partnering organisations regarding the establishment of improved collaboration and sharing of information and insights to further iterative system reporting.	<ul style="list-style-type: none"> • As above - ensuring that there is alignment between system partners regarding information an analytical resources, and what can and can't be achieved in terms of system reporting. 	Medium	High
Align existing internal audit arrangements and plans	There is a long standing Internal Audit function in place that has transitioned over from the former CCG, and there were mixed views expressed about its overall effectiveness in providing assurance. Opportunities for improvement were identified in relation to effective work across the system to reduce duplication and increase the opportunities for triangulation. This would aid the development of alignment between partners, ensuring that system controls and processes can be scrutinised via the audit plans of sovereign organisations and that the risk of duplication or inconsistent recommendations in different parts of the system is mitigated. We understand that work to address this is already underway.	<ul style="list-style-type: none"> • Take measurable steps to align audit plans across the system - this could be achieved via a system working group. • Disseminate the process of garnering system-wide assurance through partners - through the sharing of internal audit plans and outputs (as appropriate) for wider visibility. • Undertake an effectiveness assessment of the internal audit service at the financial year end. 	High	High

4.5 Strategy and reporting transparency

Detailed Findings

Our key observations arising have been summarised in the table below, with a suggested improvement action and an assessment of relative priority:

Area	Observation	Action for improvement	Complexity (H/M/L)	Priority (H/M/L)
Socialising the strategic priorities and instilling clarity and alignment	As noted in Section 4.1, there is a lack of clarity regarding the purpose of ICB (specifically who recent legislative changes have impacted this) and what the strategic priorities of the patch are. This has meant that the national agenda (i.e. addressing the elective backlog, delivering a balanced budget) and local operational matters (ambulance performance, patient flow, etc.) has filled the gap. Although not within the scope of this review, this lack of clarity suggests that partners, stakeholders, and the public also lack clarity.	<ul style="list-style-type: none"> • As covered in 4.1 - continue to develop and refine the ICBs strategic priorities, and socialise these through consultation with partners and stakeholders. 	Medium	High
System engagement and relationships with partners	<p>It has been consistently recognised throughout our review that relationships with partners and stakeholders are key to ensuring that the ICB operates effectively. However, many have commented that currently, relationships across the patch have been strained and challenging given the changes in structures and operational issues being faced.</p> <p>It is important that new ways of working need to be founded based on trust and compassion, and rooting out old ways of working will be key to ensuring that the vision of system-working comes to delivers the intended outcomes Where we have observed other ICB's working well there has been the following characteristics in place - adoption of the 5 Systems Oversight Framework and additional principles that are respected (system first / collaboration) and upheld by the various parties.</p>	<ul style="list-style-type: none"> • Joint away days between ICB and partners - building relationships, agreeing and adopting key principles and shared understanding between partnering boards (and encouraging reciprocity between other system partners) • Establishment of peer networks between ICB and partners - supporting the development of new relationships between individuals and current role holders. 	High	High
Clarification on how pathway change will be decided and enacted across the system	<p>The documentation covering how pathway changes will be made and progress through the governance structure could be refined. For example, at what point does citizen engagement occur and when during the process? This could be addressed through the development of additional guidance to assist with interpretation.</p> <p>We have shared some examples of how this is documented and clarified at other similar organisations with the ICB that could be used as basis for understanding potential options for explaining how pathway changes are made.</p>	<ul style="list-style-type: none"> • Clinical executive to define this process and socialise with stakeholders - this could also be explored through a joint working group, in order to jointly support collaboration and active consultation. 	Medium	Medium

4.5 Strategy and reporting transparency

Detailed Findings (continued)

Area	Observation	Action for improvement	Complexity (H/M/L)	Priority (H/M/L)
Clarification regarding the statutory obligation of the ICB and key executive members	<p>Other than in the NHS national scheme of delegation, the statutory responsibilities relevant to the ICB are not currently fully documented in one place to reflect the requirements of key pieces of legislation. This has the potential to be a particular challenge where new executive posts exist (for example an ICB-level Medical Director). Some initial work has been undertaken but will need to continue to be reviewed over time in light of the ICB's experience as a relatively new entity.</p> <p>Linked to this we also understand the Executive Directors are still in the process of understanding their portfolios, staff, and budgets, with some aspects (e.g. an office of the coroner) only being identified as and when business as usual activities occur. The lack of a complete picture risks a lack of transparency and accountability if left unresolved. If changes are made, this may need to be reflected in the ICB committee membership and the Scheme of Reservation and Delegation, for example.</p>	<ul style="list-style-type: none"> • Clarify statutory obligations under the new legislation - either commission specifically (ideally via a legal firm specialising in healthcare matters) or actioned by the corporate governance team, building on the work already undertaken. Should the ICB feel that this has already been implemented, take measurable steps to socialise these obligations and ensure alignment across portfolios. • Clarify the statutory responsibilities of key executive roles (if any) - as above. 	High	High

Appendices

Appendix 1 - Key lines of enquiry (KLOEs)

Leadership and behaviours

- Is there a clear vision and set of values within the leadership team?
- How does the leadership team build consensus around key issues and resolve challenges?
- How does the leadership team effectively set the tone from the top and lead by example?
- How do you ensure that you are proactively demonstrating appropriate behaviours within your areas of responsibility, whilst also encouraging others to do the same?
- How are individuals held to account for poor performance and behaviours?
- Do you have personal development plans in place? How are these informed by your roles within the ICB to ensure tailored support and training is provided to you?

Governance structure and effectiveness

- How does the current governance structure enable you to effectively deliver your duties?
- Are the roles and responsibilities of key governance committees clearly articulated?
- Do you have clear oversight of all the key governance Committees / Groups within your area of responsibility? Do you feel they are effectively contributing to the performance of your objectives and statutory responsibilities?
- How has the ICB ensured that there are the required competencies in place to deliver on the expected roles and responsibilities across the committees within the governance structure?
- How does the ICB governance structure interface with the ICP?
- How has the ICB governance structure been set up to allow for future changes?
- Is the delegation of authority clearly defined and is it operating effectively in practice, including decision making and appropriate escalation?

Management Information Controls

- How is performance information used in governance and decision making?
- How do you use performance information to plan and deliver key priorities and statutory responsibilities?
- How is data being captured and integrated to provide insight to the ICB Board to support its decision making in areas such as population health management?
- Do you use a balance of financial and non-financial information to assess how the ICB is achieving against its strategic objectives?
- How clear is the reporting produced within the ICB?
 - o Are you easily able to assess compliance with statutory obligations?
 - o Are you able to easily identify key risks and concerns?
 - o Are there clear action plans in place to address risks and concerns flagged, with clear action owners and planned delivery dates for accountability?

Risk identification and ownership

- Is there an effective process to identify and understand current and future risks?
- Is there an effective Integrated Risk Management Framework in place? X
- Is there clear ownership by the Board of key strategic risks and what are the assurances and controls mechanisms are in place to monitor risks
- Are risks clearly mapped through committee papers and appropriately escalated through to Board?

Strategy and reporting transparency

- Does the ICB have a clearly defined and understood strategy/set of strategic aims in place?
- Are these strategic aims aligned to strategic risks?
- Do the strategic aims/risks drive the agendas for the committees in the governance structure?
- Is there alignment between the differing strategic sources:
 - o ICB strategy
 - o ICP Strategy
 - o Health and Wellbeing Board Strategy
- Do you feel there is sufficient clarity and challenge on the plans that management develops to deliver the strategic outcomes of the ICS?

Appendix 2 - Interviews undertaken and documentation reviewed

Interviews

We undertook the following 1-2-1 interviews as agreed with the Director of Transformation:

Name	Role
Kate Shields	Chief Executive
Patrick Weir	Director of Workforce and OD
Simon Gittoes-Davies	Chief Finance Officer
Helen Skinner	Chief Medical Officer
Susan Bracefield	Chief Nursing Officer
Rachel O'Conner	Director of Integration
Clare Bryan	Director of Finance, Strategy and Transformation
Sarah Foster	Deputy Director Finance and Commercial Services
Andrew Sant	Managing Director (North and East ICA)
Jess James	Head of Corporate Governance
Trudy Corsellis	Deputy Director of Corporate Governance
John Gorvett	Chair
Tarn Lamb	Chair of the Workforce and Remuneration Committees
Sanj Srikanthan	Vice Chair; Finance & Performance Chair
Carole Theobald	Chair of Quality & Citizen Engagement Committees
Martin Sykes	SID & Audit Committee Chair
Neil Walden	Chair of ICA and Primary Care Commissioning Committees

Key documents reviewed

We reviewed a number of key documents as part of our review, including the following:

- ICB Governance structure (dated 09/08);
- ICB functions and decision map (dated 01/07) and (31/03);
- ICS, ICP & ICB 2022/23 to 2026/27 presentation;
- Report KPI's & commentary for F&P committee;
- Constitution;
- Scheme of Reservation and Delegation;
- Standing Financial Instructions;
- Corporate Risk Register report 11 August;
- Risk Management Policy;
- NHS Kernow people and organisational development management guidance;
- Terms of reference for and the papers of key committee meetings held to the end of August 2022, including the ICB Board, Audit Committee, Finance, Performance and Commissioning Committee, Quality and Pathway of Care Committee, Citizen Engagement and Equalities Committee, Workforce Committee, Primary Care Commissioning Committee and the ICA committee.
- Internal Audit report 2021/22 - Transition to Integrated Care System;
- Key policy documents, for example conflicts of interest; and
- NHS staff survey 2021 results for NHS Kernow.

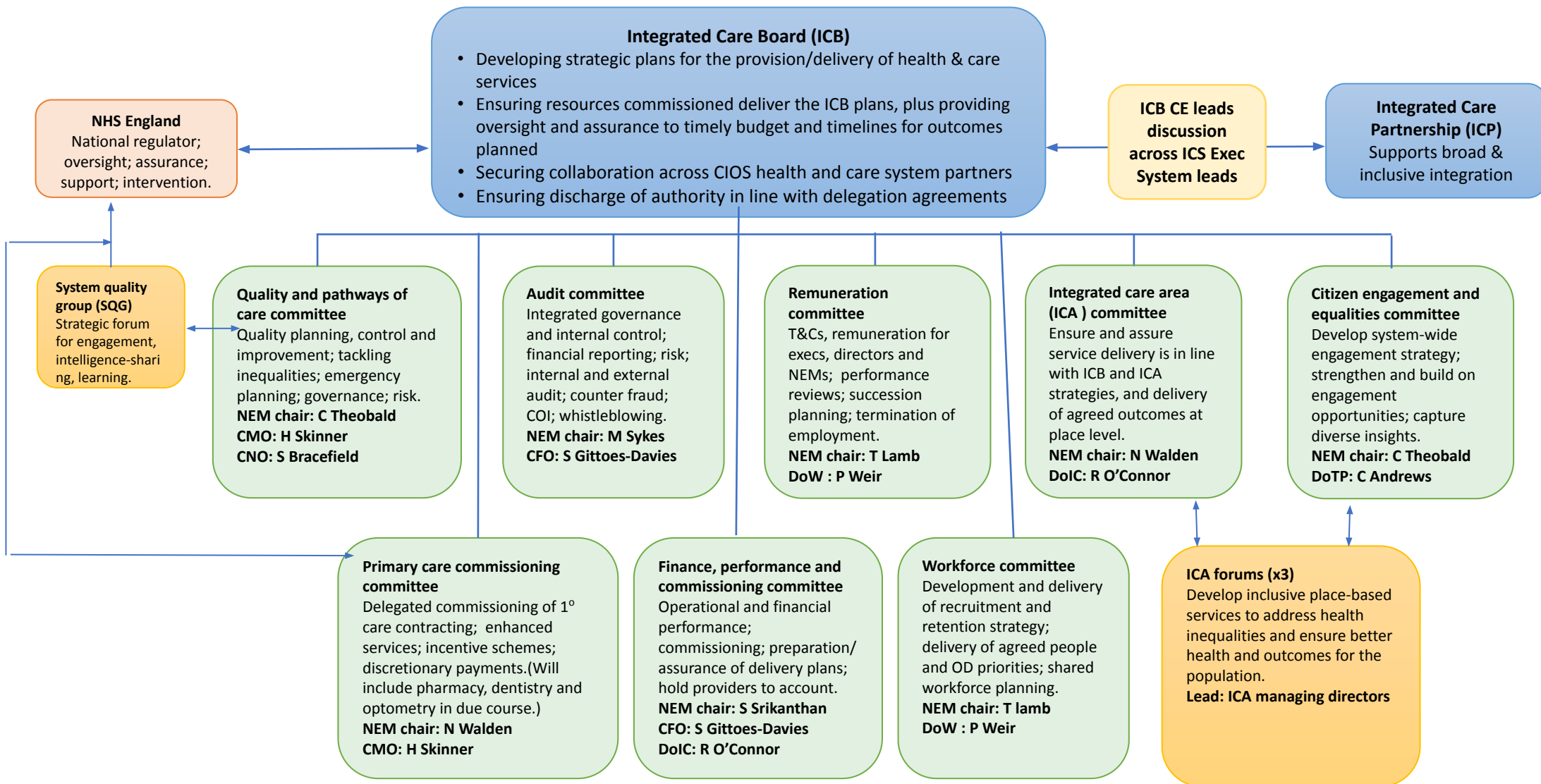
Appendix 3 - Deliverables

Requested deliverables

The Statement of Requirements referred to the following deliverables. How we have addressed them is summarised in the table to the below:

Requirement	Response
Provide immediate specialist governance oversight for the organisation for a period of 3 months, to provide specialist governance expertise to the board and support implementation of recommendation for the ICB.	Provided through the senior team - David Morris, Karen Finlayson and Stephen Hay.
Governance improvement programme - test the wider governance processes in relation to the allocation and approval expenditure by the former NHS Kernow CCG and how these may inform the governance arrangements for the ICB.	Taken into account as part of the diagnostic review above.
To review and inform the ICB governance operating model including: <ul style="list-style-type: none"> • Clear lines of decision making within the ICB to ensure the board and its committees have clear and unified strategies, that are measurable and can be scrutinised re progress and outcomes at committee stages, and the structure of the formal inter-relations with ICB committees with the executive working groups and programme boards. 	See section 4 - structure and effectiveness.
<ul style="list-style-type: none"> • Committee structures and arrangements for recording and ensuring appropriate approval and decision making in relation to the use of ICB resources, with a particular focus on staff remuneration (considering associated policies and committee arrangements, terms of reference). 	See section 4 - structure and effectiveness.
<ul style="list-style-type: none"> • Improved recruitment processes that include a standard and consistent induction programme encompassing mandatory training requirements. 	See section 4 - leadership, behaviour & culture.
<ul style="list-style-type: none"> • Report of lessons learnt and improvement steps that can be shared with NHS England and the wider NHS. 	Covered as part of this report.
In the context of these requirements also to provide a short-term education programme for board members and directors to fully understand 'good governance' and 'lessons learnt exercise' for the new ICB board.	See section 4 for the proposed improvement and education programme.

Appendix 4 - Governance structure



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