

**OXFORDSHIRE CLINICAL COMMISSIONING GROUP (CCG) BOARD**  
**Action Tracker July 2019 for September 2019 meeting**

Meeting Date	Item	Action	Owner	Update	Status
23/05/2019	Integrated Performance Report	The status of a bid for a new service model through schools to be checked and reported back outside of the meeting.	DH	28/03: Items for the Chief Operating Officer to be held over until the May meeting. 23/05: Model had gone live in 34 trailblazer schools. Oxfordshire had been invited to bid for a second wave of national funding. Bid to be submitted to NHSE on 23/05/2019. <b>XXX</b> to be brought to the Board. 25/07: Successful targetting into Banbury.	<b>Closed</b>
		Data in the IPR to be checked against the Trust Board Briefings as there were discrepancies.	DH	25/07: To be followed up. 10/09/2019: JC unable to find any data discrepancies. Advise close action.	<b>Open</b>
		Information to be obtained on community delayed transfers of care having an impact on beds and patient experience; reports from the CAMHS; falling indicators; the Royal Berkshire RTT performance and the OHFT contract and waiting times.	DH		<b>Open</b>
		The HART reablement service issues to be picked up with the lead commissioner.	DH		<b>Open</b>
27/09/2018	System Governance	A piece on system governance would be brought to the Board. Discussions to take place outside of the meeting on when and to which fora pieces of work should be taken.	CM LP/CM	28/03: The work was continuing. 23/05: Discussions had taken place following publication of the NHS Plan and the timescales around when to bring pieces of work to the Board and in which fora would be picked up outside of the meeting. System Governance would be discussed at a Board Workshop. The STP Independent Chair was expected to be appointed after interviews on 24/05/2019. There would be a need for layers of governance from the STP through to the ICP. 25/07: Board workshop is in development and a paper will be brought to Board when ready.	<b>Closed</b>
28/03/2019	Locality Clinical Director Reports: Primary Care Networks (PCNs)	A paper on PCN development to be brought to the next Board meeting.	JCo	23/05: Updates on PCN development were in each of the LCD Reports. A culmination report would be brought to the next Board meeting. There was confidence of 100% population coverage. A stronger narrative on how PCNs were being delivered and worked with partners towards integrated care was expected for the next meeting. 25/07: On agenda	<b>Closed</b>
		A report on the improvements being achieved in the gynaecology service at the OUHFT and in particular waiting times to be brought to the Board	SH	25/07: Action now for SH. To be followed up for next meeting.	<b>Open</b>
28/03/2019	Older People's Strategy for Oxfordshire	The model to be brought back to the Board at a later date.	KT (LB)	23/05: Held over to the next meeting. 25/07: Paper to be ready in August. To be taken at workshop?	<b>Open</b>
25/07/2019	Long Term Implementation Framework	The Chief Executive would discuss public involvement, trajectories and growth with the BOB ICS Lead.	LP		<b>Open</b>
25/07/2019	Locality Clinical Director Reports	Look at whether the problems encountered in the West Locality over 2ww bureaucratic barriers exists for the whole county.	MC		<b>Open</b>
25/07/2019	Locality Clinical Director Reports	Discuss PCNs' funding weighting with the Head of Primary Care with reference to underfunding for additional staff.	KC		<b>Open</b>

25/07/2019	Horton Hospital Maternity Services update	Send financial analysis to Finance Committee for scrutiny before September Board meeting	CM		Open
25/07/2019	Integrated Performance Report	Add figures for 41-51 week waiters to the IPR	DH	10/09/2019: 42-52 week graph to be included in September 2019 IPR	Closed
25/07/2019	Integrated Performance Report	Bring more assurance around CAMHS to Board	DH		Open
25/07/2019	Integrated Performance Report	Look into the issues of consultants drawing back from providing extra NHS hours because of tax and pension concerns	SW		Open
25/07/2019	Proposed new Strategic Risk Register	Review the overlap between Risk 3 and Risk 6	DH		Open