

Meeting: Governing Body			
Meeting Date	28 November 2018	Action	Approve
Item No.	3	Confidential	No
Title	Minutes and Action Log		
Presented By	Dr Jeff Schryer, CCG Chair		
Author	Emma Kennett, Corporate Affairs and Governance Manager		
Clinical Lead	-		

Executive Summary
<p>The minutes are presented as an accurate reflection of the previous meeting of the Governing Body, reflecting the discussion, decisions and actions agreed.</p> <p>Updates against the actions have been provided for information.</p>
Recommendations
<p>It is recommended that the Governing Body:</p> <ul style="list-style-type: none"> • Approve the minutes as an accurate record; and • Note the updates provided against the actions

Links to CCG Strategic Objectives	
To encourage people so that they want to, and do, take responsibility for their own health and well-being.	<input type="checkbox"/>
To drive and support system wide transformation.	<input type="checkbox"/>
To commission joined-up health and social care for people in Bury through a Single Commissioning Framework.	<input type="checkbox"/>
To achieve financial sustainability for the Bury health and social care economy.	<input type="checkbox"/>
To support the Locality Care Alliance to deliver high quality services in line with commissioner intentions.	<input type="checkbox"/>
To be a high-performing, well-run and respected organisation with an empowered workforce	<input checked="" type="checkbox"/>
Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:	
GBAF <i>n/a</i>	

Implications						
Are there any quality, safeguarding or	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

patient experience implications?						
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Have any departments/organisations who will be affected been consulted ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any financial Implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Has a Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Is a Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any associated risks including Conflicts of Interest?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
N/A						

Governance and Reporting		
Meeting	Date	Outcome
N/A		

Title	Minutes of the Governing Body (Public) held on the 26th September 2018		
Author	Emma Kennett, Corporate Affairs and Governance Manager		
Version	0.1		
Target Audience	Public Members/Governing Body Members		
Date Created	5 th October 2018		
Date of Issue	November 2018		
To be Agreed	28 th November 2018		
Document Status (Draft/Final)	Draft		
Description	Minutes of the Governing Body meeting in Public 26 th September 2018		
Document History:			
Date	Version	Author	Notes
5/10/18	0.1	Emma Kennett	Forwarded to the Deputy Chief Officer for review.
Approved:			
Signature:			
		 Mr Peter Bury, CCG Vice Chair

Governing Body

Meeting in Public

MINUTES OF MEETING

Governing Body, 26th September 15:00-17:00

Chair – Mr Peter Bury, CCG Vice Chair

ATTENDANCE

Members

Mr Peter Bury, Lay Member for Quality and Performance (Chair)
Mr Stuart North, Chief Officer
Mr Howard Hughes, Clinical Director
Dr Cathy Fines, Clinical Director
Mr Chris Wild, Lay Member for Finance and Governance
Ms Margaret O'Dwyer, Director of Commissioning and Business Delivery
Mr Mike Woodhead, Chief Finance Officer
Mrs Catherine Jackson, Executive Nurse
Dr Ajay Kotegaonkar, Sector Chair
Dr Fazel Butt, Sector Chair

Others in attendance

Mrs Lesley Jones, Director of Public Health, Bury MBC
Mr Paul Horrocks, Communications Advisor, Bury CCG
Mr Rob Jones, Director, KPMG (for item 6)
Mrs Emma Kennett, Corporate Affairs and Governance Manager, Bury CCG - minutes

Public Members/Officers

Mrs Carrie Dearden, Communications and Engagement Manager. Bury CCG
Ms Wendy Craven, Clinical Lead, Bury CCG
Ms Barbara Barlow, Public Member

MEETING NARRATIVE & OUTCOMES

1 Welcome, Apologies And Quoracy

1.1 Mr Bury welcomed those present to the meeting and noted apologies had been received from: -

- Dr Jeff Schryer, CCG Chair
- Mrs Fiona Boyd, Registered Lay Nurse
- Mr David McCann, Lay Member for Patient and Public Involvement

1.2 Mr Bury advised that the quoracy requirements had not been satisfied, however in accordance with the CCG's constitution, at paragraph 6.10.6, the meeting would proceed and all decisions made would be in good faith and will remain valid. As this was outside the scheme of delegation, the Audit Committee would be notified in accordance with the Standing Orders.

1.3 In terms of quoracy, it was anticipated that the Governing Body would be quorate ahead of the decision making items as Dr Butt was attending today's meeting.

2	Declarations Of Interest		
2.1	The Chair reminded Governing Body members of their obligation to declare any interest they may have on any issues arising from agenda items which might conflict with the business of NHS Bury Clinical Commissioning Group.		
2.2	Declarations made by members of the Governing Body are listed in the CCG's Register of Interests which is presented under this agenda and also available from the CCG's Corporate Office or via the CCG website here .		
	Declarations of interest from today's meeting		
2.3	Mr Horrocks declared an interest in relation to the work he was currently undertaking with the Northern Care Alliance which would need to be updated on the Register for the next Governing Body meeting with a new declaration form being completed. It was noted that there were no specific items on the agenda where this interest would need to be declared.		
	Declarations of Interest from the previous meeting		
2.4	There were no declarations of interest from the previous meeting raised.		
ID	Type	The Governing Body:	Owner
D/09/01	Decision	Noted the published register of interests and new interest for Mr Horrocks that has been declared.	

3	Minutes Of The Last Meeting And Action Log		
	<ul style="list-style-type: none"> • minutes 		
3.1	The minutes of the Governing Body meeting held on 25 th July 2018 were considered and agreed as a correct record subject to the following amendments being made: -		
	<ul style="list-style-type: none"> • Paragraph 3.4 – This paragraph needed to be rephrased to ensure this was an accurate description of the meeting discussion. Ms O'Dwyer would provide a form of words to support this • Paragraph 4.4 – the title needed to be changed to state 'procedures of limited clinical value' instead of least clinical value. • Paragraph 8.3 – the typographical error in the final bullet point to be amended. 		
	<ul style="list-style-type: none"> • action log 		
3.2	The Action Log was discussed and following comments were made: -		
	<ul style="list-style-type: none"> • A/03/01 - Agreed that a further update on Urgent Care would be provided to the Governing Body in July 2018 which would be brought back at an earlier stage should this be deemed necessary from a governance perspective. It was reported that a presentation in relation to Urgent Care would be provided to a future Governing Body meeting at the appropriate time. • A/05/01 - The Chief Officer to have a meeting with the Chair of the Overview and Scrutiny Committee based on the final legal advice received in relation to IVF. It was noted that a report in relation to IVF was included on today's agenda and therefore this action could be removed from the action log. • A/05/03 - Further information to be brought back to the Governing Body around the delivery of Strategic Objectives 1 and 6. It was reported that this would be 		

3.3	<p>covered as part of the GBAF report and could therefore be removed from the Action Log.</p> <ul style="list-style-type: none"> • A/07/01 - A Patient Cabinet representative to be identified to attend the Clinical Cabinet Meeting on the 1st August 2018. It was reported that a representative was identified and attended the Clinical Cabinet meeting on the 1st August 2018 • A/07/02 - A formal presentation in relation to the Urgent Care developments/pilot would be provided to the Governing Body in September 2018. As per Action 03/01 • A/07/03 - A joint letter from Dr Schryer and Cllrs Shori and Simpson (in their capacity as Joint Chairs of the Bury Health and Social Care Transformation) to be sent to the LCA requesting that a regular performance report is produced for future Transformation Board meetings. It was noted that a letter had been sent in this regard and response received back from the LCA. • A/07/04 - A more detailed contracting update to be provided to the Governing Body in September 2018. Mr Woodhead to circulate a copy of the contracting report currently provided to the Finance, Contracting & Procurement Committee and clarify whether any further information is required. • A/07/05 - Further detailed information/action plans on the Delayed transfers of care in relation to Mental Health to be included as part of a future Quality report to the Governing Body. This was included as part of the Quality report and could therefore be removed from the Action Log. <p><i>Dr Butt entered the meeting at this point. The Chair highlighted that the meeting was now quorate in line with the CCG's Constitution with the required number of clinicians in attendance.</i></p>
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ID	Type	The Governing Body:	Owner
D/09/02	Decision	approved the minutes of the meetings held on 22 nd August 2018 as a true and correct record subject to the above amendments being made.	
D/09/03	Decision	closed the completed actions on the action log.	

4	CCG Chair and Chief Officer Update
4.1	<ul style="list-style-type: none"> • Government's preparations for a March 2019 'no deal' scenario <p>Mr North presented a report in relation to the Government's preparations for a March 2019 'no deal' scenario.</p>
4.2	<p>It was reported that the Secretary of State for Health and Social Care (Matt Hancock) had written to all NHS organisations, GPs, community pharmacies and other service providers in a letter dated the 23rd August 2018. The letter set out what the health and care system needed to consider in the period leading up to March 2019 including the continued supply of medical products in the event of 'no deal' and business continuity plans.</p> <ul style="list-style-type: none"> • Other updates
4.3	<p>Mr North referred to the recent commissioning assessment in which Bury had recently been rated as 'good'. One of the indicators for cancer was around early diagnosis. During the last assessment, Bury was 43rd out of 66 localities in the north for this indicator, however, during the most recent assessment Bury was now rated as the 3rd best for this indicator, which is a dramatic improvement. It was noted that this</p>

4.4	was a result of measures that have been put in place, clinical leadership and design, further improvements were expected in this area. It was reported that the CCG was performing well in relation to NHS Health Checks compared to other areas.		
ID	Type	The Governing Body:	Owner
D/09/04	Decision	Noted the update in respect of the Government's ongoing preparations for a March 2019 'no deal' Brexit Scenario and what the health and care system needs to consider over the autumn and in the period leading up to March 2019.	
D/09/05	Decision	Noted the other updates provided.	

5 Appointment of Accountable Officer			
5.1	Ms O'Dwyer provided an update on the appointment of the Accountable Officer within Bury CCG in light of the current post holder retiring at the end of September 2018.		
5.2	It was reported that Mr Little had been appointed to this position following an appointment process being undertaken and subsequent approval being obtained from NHS England. It was noted that this appointment would be considered further by the Council Cabinet on the 16 th October 2018.		
ID	Type	The Governing Body:	Owner
D/09/06	Decision	Noted the update	

6 Statutory Responsibilities			
6.1	Mr R Jones, KPMG, was in attendance to provide a presentation in relation to the Annual Audit Report 2017/18 and the associated statutory obligations in this regard. The presentation covered: - <ul style="list-style-type: none"> • The scope and audit approach including the Annual Audit Report, financial statements audit and use of resources. • The areas for consideration in 2017/18 including financial statements and Use of Resources. • The key findings relating to the financial statements and Use of Resources audits. 		
6.2	Ms O'Dwyer referred to the potential implications for the CCG not meeting its statutory obligations in terms of referral to the Secretary of State and how common this particular course of action was. Mr Jones reported that this course of action used to be somewhat rare within NHS organisations however this had become a lot more common in recent years. It was highlighted that there were different implications for both commissioner and provider organisations in this regard. It was noted that any referral would not usually come as a surprise to the Secretary of State as they are usually in receipt of this information already as part of ongoing data collation exercises. Mr Jones highlighted that in the majority of cases, referral happened after the Quarter 3 returns had been submitted.		

6.3	Mr North provided an example from another CCG where the organisation had a control total of £50m however was still rated as good in light of the new management arrangements that had been put in place and how this linked to the 'Going Concern' element of accountancy. Mr Jones explained the use of this terminology in accountancy including the differences between NHS Trusts and Foundation Trusts in the level of financial freedom given.
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ID	Type	The Governing Body:	Owner
D/09/07	Decision	Noted the presentation	

7	IVF Cycles Consultation Report
7.1	Dr Fines presented a report regarding the number of funded IVF Cycles for Bury patients.
7.2	It was reported that as part of the wider CCG savings review, the number of NHS Bury CCG funded IVF cycles has been the subject of a public consultation. A six week consultation period in relation to IVF provision in Bury ran from 6 th August to 16 th September 2018 inclusive. It was noted that this report provided feedback to Governing Body on the findings of this consultation.
7.3	Dr Fines outlined what was meant by the term 'cycle' as part of the IVF proposal and highlighted that Bury CCG was one of only 4 CCGs in the country to currently offer 3 cycles of IVF.
7.4	It was highlighted that at the Governing Body meeting in March 2018, the CCG policy on IVF was considered as part of a wider review of where saving might be identified. It was agreed that Bury should aim to take part in a Greater Manchester-wide IVF provision review, if a Greater Manchester review was planned. It was also agreed to consider this provision locally, if a Greater Manchester review was not timely. Since the March Governing Body meeting, it has been confirmed that there was no active Greater Manchester work stream to address this issue and no definitive timeline on when this might be commenced and concluded.
7.5	Dr Fines commented that on the 2 nd May 2018, NHS Bury CCG's Clinical Cabinet received an updated position paper and was asked for a clinical view on the recommended number of cycles to be offered for the Bury registered patient population. Clinical Cabinet provided a clinical view to be shared with the Governing Body on the number of IVF cycles the CCG should offer. The Clinical Cabinet considered the option of a move to offering zero cycles. Clinical Cabinet view on this was it would be happy for a discussion to be held at Governing Body around a move to offering zero cycles. When asked to confirm a preferred option the Clinical Cabinet supported a change to 1 funded cycle of IVF subject to an Equality Analysis (EA) and recognising advice was required on the duty to consult on such a proposal. The EA was subsequently completed and was included at Appendix One of the report. Mr Hughes confirmed that this had been the view of the Clinical Cabinet.
7.6	Dr Fines referred to the six week consultation period in relation to IVF provision in Bury that ran from 6 th August to 16 th September 2018 inclusive. The main purpose of the consultation was to check whether in the papers presented to date, the CCG had failed to consider anything relevant to the issue. The consultation comprised of several mechanisms and approaches to try and ensure as broad a response as possible. These mechanisms were outlined in greater detail at Section 4.1 of the report.

7.7	Dr Fines outlined the proposal contained as part of the report which was for Bury CCG to change its policy on the number of CCG funded IVF Cycles offered, from the current, up to 3 funded cycles, to 1 funded cycle, effective from 1 st October 2018, for all new cases. It was noted that the CCG was not proposing to change any other elements of it's IVF service provision as some CCGs were looking to introduce an age criterion as part of their policies.		
7.8	Mr Woodhead referred to the previous discussion at the Governing Body in relation to the financial savings review and reminded members that a multi-disciplinary team had been involved in developing these proposals which had included financial input.		
7.9	Mr North referred to the Consultation report included at Appendix two of the document and in particular the assurances that had been provided back to the local MP and other organisations in relation to the IVF proposals that had been developed.		
7.10	Mr Wild enquired as to when the proposed change would be effective from should they be approved by the Governing Body. Dr Fines reported that the proposed changes would take effect from the 1 st October 2018 for all new cases and that any patients currently in the system (who had attended a consultation with the GP where an IVF referral had been agreed) would not be effected by these changes and the existing number of cycles would be honoured in this regard.		
7.11	Ms O'Dwyer referred to the Equality Impact Assessment that had been included at Appendix 1 of the report and drew members' attention to this key documentation. In terms of the output from the Consultation exercise that had been undertaken, it was noted that there were no issues that had come to light that the CCG had not already taken into account as part of its review within this area.		
ID	Type	The Governing Body:	Owner
D/09/08	Decision	NHS Bury CCG should change its policy on the number of CCG funded IVF Cycles offered, from the current, up to 3 funded cycles, to 1 funded cycle, effective from 1 st October 2018, for all new cases.	

8	Integrated Safe Haven and Home Treatment Team – Bury CCG Business Case
8.1	Ms O'Dwyer submitted a report in relation to the Integrated Safe Haven and Home Treatment Team Bury CCG Business Case.
8.2	It was reported that a Business Case had been developed to pilot a proof of concept for an Integrated Crisis Safe Haven and Home Treatment Team Model in Bury. The model had been developed across the North East Sector (NES), with Clinical Commissioning Groups (CCG) and Pennine Care Foundation Trust (PCFT) working in partnership, to define the key principles and evidence base of a Safe Haven and Home Treatment service.
8.3	It was highlighted that the Clinical Cabinet at its meeting on the 1 st August 2018 had considered the Business Case and agreed the following recommendations: - <ul style="list-style-type: none"> (i) Supported in principle, subject to virtual approval from Governing Body members with formal ratification at the September Governing Body meeting, the 5 day model as a 12 month pilot to test the proof of concept at a cost of £228,584 (PYE) in 18/19 (£403,936 FYE), with a further £40k to facilitate 3rd sector involvement in year 1.

	<p>(ii) Supported a 6 month review to ensure the pilot is meeting the desired objectives and has robust monitoring data to evidence the impact. If at this point the service does not appear to be demonstrating value for money, it is recommended that the CCG re-considers the delivery model.</p> <p>(iii) Supported an evaluation of the 12 month pilot coming to Clinical Cabinet to discuss the future of the Safe Haven Model.</p> <p>(iv) Noted further work will now commence to develop a detailed implementation plan, complete the pathway mapping and engage with the 3rd sector.</p>
8.4	Ms O'Dwyer informed members that a copy of this Business Case was shared with Governing Body Members via Email on the 2 nd August 2018 in light of the Cabinet's terms of reference only allowing support of Business cases up to the value of £250k. This approach via Email had enabled confirmation to be given to providers to commence recruitment in advance of today's Governing Body meeting.
8.5	Mrs Jackson emphasised that a key element of this proposal would be to ensure that that a full evaluation of this service is conducted to assess the effectiveness of the service. Ms O'Dwyer confirmed that this piece of work was being mapped out and would be undertaken in due course.

ID	Type	The Governing Body:	Owner
D/09/09	Decision	Ratified the recommendations agreed by the Clinical Cabinet on the 1 st August 2018 in relation to the Integrated Safe Haven and Home Treatment Team – Bury CCG Business Case.	

9	Establishing the Joint Commissioning Board as a joint Committee
9.1	Mr North presented a report that was considered by the Greater Manchester Joint Commissioning Board (JCB) on the 18 th September 2018 in order to facilitate approval of the process for the JCB to be formally established as a Joint Committee to be capable of making appropriately delegated decisions.
9.2	<p>The paper was therefore seeking approval from the Governing Body to the constitution of the JCB as a formal joint committee. It was noted that this would become the forum for joint decision making by CCGs, Local Authorities and the Greater Manchester Health & Care Partnership. This would be for decisions:</p> <ul style="list-style-type: none"> - Already delegated from NHS England to the Chief Officer of GMH&SCP, such as specialised commissioning. - Delegated from GM commissioning organisations through formal agreement
9.3	Mr North referred to the proposed membership of the JCB which would include up to three representatives from each locality. In terms of voting at JCB Meetings, it was reported that each group of locality members present at a meeting of the JCB shall jointly exercise a single vote and if they do not agree how to cast their vote then they shall not be entitled to vote at all. A general discussion took place as to how these voting arrangements would operate in reality.
9.4	Mr Hughes enquired about the arrangements for agreeing which decisions would be delegated to the JCB from a CCG and Council perspective. Mr North explained how this would operate from both a CCG and Council perspective in line with existing statutory requirements.

9.5	Ms O'Dwyer commented that the resources in relation to Acute Clinical Services currently sat with CCG's and this paper was looking to define the tranche of services that would be considered via this governance mechanism.
9.6	Mr North explained some of the challenges that other localities had encountered in relation to pooled budgets and the associated decision making in this regard.
9.7	Mrs Jones referred to the terminology included at 4.1.2 of the document in relation to the term 'for the time being' in the context of the Chief Executive of the Greater Manchester Combined Authority. Mr North commented that this was likely to be legal wording.
9.8	Mr Hughes highlighted the importance for the CCG being clear on what decisions were being delegated to this Committee and who the locality representatives would be. A general discussion took place regarding this issue and was highlighted that it would be useful to have a discussion at a future OCO Partnership Board meeting to firm up who the representatives would be and how the governance and ways of working in this area would operate. Mr North commented that each locality would have the ability to nominate a clinician, elected member and senior officer.

ID	Type	The Governing Body:	Owner
D/09/10	Decision	Supported the formation of a joint committee of the CCG with the nine other clinical commissioning groups in Greater Manchester in accordance with its powers under section 14Z3 of the National Health Service Act 2006 (the Joint Commissioning Board);	
D/09/11	Decision	Approved the Terms of Reference of the Joint Commissioning Board as set out in the appendix to the paper presented.	
D/09/12	Decision	Formally approved the delegations as described in sections 3.3 and 3.4 of the above named Terms of Reference.	
A/09/01	Action	A further discussion was required a future OCO Partnership Board regarding the membership arrangements at the JCB from a Bury locality perspective and how this process should operate.	Ms O'Dwyer

10	Public Questions		
10.1	There were no questions raised.		
ID	Type	The Governing Body:	Owner
D/09/	Decision	Noted the update.	

11	Transformation Agenda Update
11.1	<p>Mr North and Mr Woodhead provided an update on the latest Transformation agenda developments. It was reported that: -</p> <ul style="list-style-type: none"> an Investment Agreement had been submitted to the Greater Manchester Health and Social Care Partnership for consideration at the Greater Manchester TFOG on the 30th August 2018. It was noted that this had included revised Investment

	<p>Agreement targets for acute deflections.</p> <ul style="list-style-type: none"> • this submission was requested by the Greater Manchester Health and Social Care Partnership as a result of their concern regarding the high levels of ambition in the July Investment Agreement update. Bury were regarded as an outlier compared with the rest of GM (this was not the case 12 months ago, but other localities have recently downgraded their levels of ambition). • Mrs Wynne-Jones had been appointed as the Interim Locality Care Alliance Executive and would be driving forward the transformation implementation plans.
11.2	Mr Wild reported that an increased level of Corporate Risk had been identified in respect of the transformation plans which had been reflected as part of the organisation's Corporate risk register.
11.3	Dr Kotegaonkar emphasised the importance of the Transformation Plan Key Performance Indicators being made understandable at Practice level in terms of what the expectations are. It was highlighted that further Business Intelligence needed to be filtered into the work of the Neighbourhood Teams to outline the number of deflections that may be required in order to realise any transformation benefits. Mr North reported that the requirement for this level of information had been recognised by Mrs Wynne-Jones as part of her new role at the LCA. Dr Kotegaonkar highlighted that it would also be useful to have a risk stratification process to assist with this process going forward. Mr Woodhead commented that he would have expected this level of information being communicated from the SROs of each Transformation Programme with the appropriate information being made available from the PMO at the LCA. Mr Woodhead commented that he had access to the overall target at present however did not have this broken down at neighbourhood level. Mr North concluded that there is a need to define the baseline figures at neighbourhood level and agreed to follow this up from a CCG perspective.

ID	Type	The Governing Body:	Owner
D/09/13	Decision	Noted the information	
A/09/02	Action	Agreed the need to define the baseline transformation figures/deflections at neighbourhood level and agreed to follow this up from a CCG perspective.	Mr North (Ms O'Dwyer to pick up now that Mr North has departed the CCG).

12	Quality and Performance Committee
	a) Quality and Performance Committee Chair's Report
11.1	Mr Bury reported that a written report had not been provided to today's meeting in light of the last meeting having been cancelled.
11.2	It was highlighted that the Committee would be endeavouring to revisit the Terms of Reference for the Committee especially around the identification of a Vice Chair going forward.

b) Quality Dashboard

11.3

Mrs Jackson presented the latest Quality Dashboard to the Governing Body which provided an overview of:

- The CQC Safeguarding Inspection
- The Provider quality updates
- The General Practice update.

11.4

It was reported that the Bury locality underwent a CQC Safeguarding inspection week commencing 3rd September 2018. The following services were visited:

- Emergency department (paediatric and adult), Fairfield Hospital
- Walk in centres
- Contraception and Sexual Health Services
- Health Visiting and Family Nursing
- Multi agency front door arrangements (MASH)
- Looked After Children and Care Leavers (including separated children seeking asylum)
- Adult Substance Misuse Service
- Maternity
- Healthy Young Minds
- Adult Mental Health
- School Nursing

11.5

It was highlighted that initial issues had been raised in the emergency department and walk in centres, immediate action plans had been put in place. It was noted that good practice has been seen across the locality, however recommendations were being made for all areas of safeguarding in the borough.

11.6

Mrs Jackson informed members that the CQC would be publishing a report following this visit and the CCG would have 20 days from that point to respond to any points raised and devise an appropriate action plan.

11.7

Mrs Jackson updated members on the Biliary Stents Review which had been undertaken at Pennine Acute Trust. In summary, it was highlighted that: -

- In May 2018, Northern Care Alliance governance systems identified three patient harm events following biliary stent insertion via Endoscopic Retrograde Cholangio-Pancreatography (ERCP), who had not received appropriate follow up.
- A risk was identified relating to biliary stents inserted by Gastroenterologists, which were not being removed in the recommended time period (six to eight weeks with a maximum period of six months).
- The occurrences were identified across North Manchester and Oldham Care Organisations, where ERCP procedures are carried out for the Trust, with stents in-situ for between seven months and eight years.
- A lookback review has been undertaken by the Trust for all ERCP procedures undertaken since 2010.
- All patients affected are being contacted and will be seen as appropriate by the end of September 2018 with additional clinic and radiology capacity being

	<p>provided during August as well.</p> <ul style="list-style-type: none"> • ERCP capacity has been secured from Salford Royal and BMI Alexandra to supplement the additional internal capacity to address the patients identified within the lookback. • In conjunction with HM Coroner a review of deceased patients where a biliary stent had been inserted is underway to ensure correct cause of death has been recorded.
11.8	<p>Dr Kotegaonkar sought assurance that that the process surrounding the removal of biliary stents going forward was resolved (in moving forward) to ensure that Pennine Acute Trust do not find themselves in this same position again once the stents had been removed from patients identified as part of the review. Mrs Jackson reported that this position was being closely monitored to ensure this situation does not arise again.</p>
11.9	<p>Mrs Jackson referred to the current position surrounding delayed transfers of care and reported that the North and South wards at Fairfield were showing a reduction in delays. Ramsbottom ward (older people's facility) continued to have problems with discharging patients and DTOC, due to limited elderly nursing beds and placements that specialise in challenging behaviours. It was noted that weekly bed management meetings were being established to address any issues.</p>
11.10	<p>An update was provided on the Primary Care Quality Visits process and work undertaken to date.</p> <p>c) Performance Report</p>
11.11	<p>Ms O'Dwyer submitted the latest Performance report to the Governing Body which provided an updated position on the CCG's performance against the national performance indicators set out in the NHS Constitution as monitored by NHS England. It was noted that the report presents the CCG's performance position for June 2018 (current period) and outlined any proposed changes to performance at a national level.</p>
11.12	<p>The cancer measures included at 3.43 of the report were discussed in greater detail with members. It was reported that in June 2018, the CCG had achieved four of the nine cancer measures. It was highlighted that 100 % performance was noted against each of the 31 day wait standards for subsequent cancer treatment and 98.9% for the 31 day wait measure for first treatment</p>
11.13	<p>Ms O'Dwyer commented that following the revision of the National Cancer Re-allocation Policy, Pennine Acute Trust was anticipating increased breaches due to the requirement for inter-provider transfers to be completed earlier. Ultimately, it was anticipated that the change should drive improvements in patient outcomes and the overall Greater Manchester position although Pennine Acute Trust and other providers were likely to see additional breaches attributed.</p>
11.14	<p>Ms O'Dwyer referred to the previous meetings that had taken place in this area between Pennine Acute Trust and the Northeast sector to consider the current issues and develop an action plan in order to combat: -</p> <ul style="list-style-type: none"> • Growth in Demand.

	<ul style="list-style-type: none"> • Workforce issues • Diagnostic capacity issues • Capacity issues in patient trackers/navigators.
11.15	Ms O'Dwyer referred to Section 3.14 of the report in terms of the referral to treatment (RTT) incomplete Patients waiting more than 18 weeks and the number of people currently waiting for each speciality. It was noted that appropriate action plans were being developed in order to improve upon this position.
11.16	Dr Butt referred to the current position in relation to cancer within Bury and provided a GP perspective on this issue from a threshold point of view with GPs having to adhere to these guidelines around referrals. It was noted that gastroenterology was a good example of where changing thresholds could result in more secondary care referrals. A general discussion took place regarding conversion rates within this area.
11.17	Dr Butt referred to the current structure of the Ophthalmology Service and the number of appointments that are required within this field. Ms O'Dwyer commented that she would be picking up separately with Mrs Jackson and Ms Trembath outside of the meeting regarding these numbers in terms of how many patients had been included on the elective list.
	d) Safeguarding update
11.18	Mrs Jackson submitted the latest Safeguarding update which included the quarterly dashboard, the Safeguarding adults and children annual report and the Looked after Children annual report.
11.19	It was highlighted that the reports provided the CCG assurance in respect of their statutory duties to support the Local Authority to ensure that children and young people who are looked after by the LA are having their health needs assessed and services provided as appropriate
11.20	During the last 12 months audit activity had allowed the CCG safeguarding team to have oversight over the quality of both the initial and review health assessments and recommendations have been made to the providers to ensure continuous improvement. Further work had been undertaken to identify the health needs as children and young people become looked after. The health needs of Bury children are in line with the national trends. The performance by the provider is monitored monthly and the improvements seen in Q4 last year continue to be maintained
11.21	In terms of the annual report, the aim was to provide the public and the Governing Body with its assurance that the CCG was maintaining delivery on the its statutory functions to safeguarding children and adults at risk.
11.22	The quarterly dashboard provided an overview of the Q1 assurance position for the CCG, Pennine Acute Trust, the local nursing homes and Pennine care Foundation Trust, Community Services Bury.

ID	Type	The Governing Body:	Owner
D/09/13	Decision	Noted the Quality report.	
D/09/03	Action	Ms O'Dwyer to pick up with Mrs Jackson and Ms Trembath outside of the meeting regarding ophthalmology numbers in terms of how many patients had been included on the elective list.	Ms O'Dwyer
D/09/14	Decision	Noted the latest Performance report	
D/09/15	Decision	Noted the Safeguarding update report	
D/09/16	Decision	Approved the uploading of the Annual Report onto the CCG website for the public	
D/09/17	Decision	Approved the submission of the Safeguarding Annual reports to the Local Safeguarding Children Board, the Corporate parenting Board and local Adult Safeguarding Board for assurance.	
A/09/04	Action	The Safeguarding Annual reports to be uploaded onto the CCG Website.	Mrs Jackson
A/09/05	Action	To submit the Local Safeguarding Children Board, the Corporate parenting Board and local Adult Safeguarding Board for assurance.	Mrs Jackson

13	Audit Committee Chair's Report
	a) Audit Committee Chair's Report
13.1	Mr Wild submitted the Audit Committee Chair's report to the Governing Body.
13.2	It was highlighted that this paper was presented to the Governing Body to provide an update of the Audit Committee meeting held on the 7 th September 2018.
13.3	This paper provided an outline of the matters discussed, assurances sought and decisions ratified at the last Audit Committee meeting. This report aims to provide information and assurance to the Governing Body that a robust, effective governance system is in place and that the Committee is discharging its responsibilities.
13.4	It was reported that Audit Committee Members invited GMSS IG Lead to provide an update on the implementation of GDPR across the CCG. In summary, the Committee was advised that whilst GDPR became effective from May 2018, there is no specific date for completion of all required actions; however the CCG would be required to demonstrate that reasonable steps were being undertaken to achieve compliance.
13.5	It was advised that an implementation plan was in place, which reflected the commissioning requirements as set out on the Information Commissioners Office (ICO) website, the Committee was assured that the CCG's compliance with the IG Toolkit at level 2 and the agreed work programme provide a robust foundation from which the CCG will build
	b) Governing Body Assurance Framework
13.5	Ms O'Dwyer presented the latest Governing Body Assurance Framework.

13.6	It was reported that Governing Body Assurance Framework (GBAF) for 2018-19 was presented to advise on the current levels of risk and continued actions to enable the delivery of the Strategic Objectives for 2018/19.
13.7	It was noted that the Audit Committee was advised that following the last Governing Body meeting a request had been made for the format of the report to be re-considered, particularly in respect to reflecting on whether risks should be reported by changes in their level of assurance or level of risk. It was advised that a benchmarking exercise against other GBAF reports and review of publications in respect to Board Assurance Frameworks would be undertaken.
13.8	<p>In summary, the current risk profile was presented as :</p> <ul style="list-style-type: none"> • 9 presenting a significant level of risk (level 15 or above) to delivery of the CCG's strategic objectives; and • 5 presenting a high level of risk (level 8-12) to delivery of the CCG's strategic objectives.
13.9	<p>Ms O'Dwyer commented that the two highest risks contained within the report related to transformation and these had been given respective scores of 25 for each risk.</p> <p>c) Corporate Risk Register</p>
13.10	Ms O'Dwyer presented the latest Corporate Risk Register to the Governing Body.
13.11	It was reported that in line with the Risk Management Strategy, the Audit Committee was required to retain oversight of any risks with a net risk score of 15 and above.
13.12	<p>It was highlighted that there were currently 4 risks included on the Corporate Risk Register (operational risks) at a level 15 or above, excluding those reported through the Governing Body Assurance Framework (strategic risks):</p> <ul style="list-style-type: none"> • one (1) risk has escalated on to the Corporate Risk Register and is currently a level 16 risk. • two (2) new risks have been identified and are both currently level 20 risks. • one (1) existing corporate risk has increased from a level 20 to a level 25 risk.
13.13	Ms O'Dwyer discussed these risks and mitigating actions in further detail with members of the Governing Body.
13.14	<p>Mr North referred to the Greater Manchester Risk Management matrix and enquired about the matrix currently being used by the CCG. Ms O'Dwyer would liaise with Mrs Featherstone outside of the meeting in relation to the Risk Matrix.</p> <p>d) Conflicts of Interest Policy</p>
13.15	Mr Wild presented the latest Conflicts of Interest Policy to the Governing Body.
13.16	<p>It was reported that the Policy had been updated to reflect: -</p> <ul style="list-style-type: none"> • Administrative requirements to include the new CCG Headquarters • The recommendations from MIAA following the end of year Conflicts of interest assessment including clarity in respect of information governance, data protection and GDPR.

	e) Gifts and Hospitality Policy
13.17	Mr Wild submitted the latest Gifts and Hospitality Policy to the Governing Body.
13.18	It was reported that the Gifts and Hospitality Policy had been updated to reflect: - <ul style="list-style-type: none"> • Administrative requirements to include the new CCG Headquarters. • The recommendations from MIAA following the end of year assessment including clarity in respect of information governance, data protection and GDPR. • Inclusion of explicit reference to the Executive Team approval in the level of sponsorship of an event and where sponsorship is approved that all promotional material clearly reflects that the CCG is not endorsing the products of the sponsor.
	f) Whistleblowing Policy
13.19	Mr Wild submitted the latest Whistleblowing Policy to the Governing Body.
13.20	It was reported that the Whistleblowing Policy aimed to promote a culture in which individuals feel safe and confident to raise issues in the knowledge that the CCG is equipped to respond to these concerns in a consistent, fair and professional manner and that speaking up makes a difference. It reflects the requirements under The Public Interest Disclosure Act 1998.
13.21	The Whistleblowing Policy had been reviewed and updated to reflect the Administrative requirements to include the new CCG Headquarters. There were no other changes identified that needed to be made in respect of this policy.

ID	Type	The Governing Body:	Owner
D/09/18	Decision	noted the Governing Body Assurance Framework presented on recommendation of the Audit Committee and discussed the risks presented through the report.	
D/09/19	Decision	Received the Corporate Risk Register.	
A/09/06	Action	Ms O'Dwyer to liaise with Mrs Featherstone regarding the CCG's Risk Matrix to assess whether this is still viable	Ms O'Dwyer
D/09/20	Decision	Approved the revised Conflicts of Interest Policy	
D/09/21	Decision	Approved the revised Gifts and Hospitality Policy	
D/09/22	Decision	Approved the revised Whistleblowing Policy	

14	Finance, Contracting and Procurement Committee Chair's Report
	a) Finance, Contracting and Procurement Committee Chair's Report
14.1	This update would be provided as part of the overall Finance and Contracting Update at Agenda Item Number 14b.
	b) Finance and Contracting Update
14.2	Mr Woodhead presented the latest Finance Report for Month 5. It was reported that: -

	<ul style="list-style-type: none"> The CCG financial plan for 2018/19 delivered the control total set by NHS England (NHSE), which is a breakeven position prior to the addition of historic surpluses (£6.95m). The CCG is not able to utilise historic surpluses without approval from NHSE. The CCG financial position to month 5 is on plan. The CCG is reporting a net risk position of £4.1m after mitigations of £2.5m. 		
ID	Type	The Governing Body:	Owner
D/09/23	Decision	Noted the CCG Financial Position which is on plan.	
D/09/24	Decision	Noted the forecast outturn position which remained in line with plan subject to the net risk position	

15	Committee Chair Report		
	a) Clinical Cabinet		
15.1	Mr Hughes presented a report that provided a summary of the Clinical Cabinet Meeting on the 1 st August 2018. Mr Hughes also provided a verbal update on the key items considered by the Cabinet at the meeting on the 5 th September 2018.		
15.2	A general discussion took place regarding the key items considered at the recent Clinical Cabinet Meetings.		
	b) Patient Cabinet		
15.3	Members received copies of a report that provided an update on the Patient Cabinet meeting held on the 9 th August 2018.		
	c) Primary Care Commissioning Committee		
15.4	Mr Bury provided an update on the Primary Care Commissioning Committee meeting that had taken place earlier in the day.		
ID	Type	The Governing Body:	Owner
D/09/25	Decision	Noted the Clinical Cabinet Update	
D/09/26	Decision	Noted the Patient Cabinet Update	
D/09/27	Decision	Noted the Primary Care Commissioning Committee verbal update	

16	Closing Matters		
14.1	Mr Bury reported that it was Mr North's last Governing Body meeting prior to his retirement on the 30 th September 2018. Members thanked Mr North for his hard work over the years and wished Mr North well for the future		
ID	Type	The Governing Body:	Owner
D/09/28	Decision	Wished Mr North a long and happy retirement.	

Next Meeting	Wednesday, 28 th November 2018, 15.00-17.00 at Townside Primary Care Centre
Enquiries	Emma Kennett, Corporate Affairs and Governance Manager Emma.kennett@nhs.net

Governing Body Action Log

Status Rating



- In Progress



- Completed







- Not Yet Due



- Overdue

Title	Action	Lead	Status	Due Date	Update
A/03/01	Agreed that a further update on Urgent Care would be provided to the Governing Body in July 2018 which would be brought back at an earlier stage should this be deemed necessary from a governance perspective.	Mr North		TBC	<p>A formal presentation in relation to the Urgent Care developments/pilot would be provided to the Governing Body in September 2018</p> <ul style="list-style-type: none"> It was reported that a presentation in relation to Urgent Care would be provided to a future Governing Body meeting at the appropriate time.
A/07/02	A formal presentation in relation to the Urgent Care developments/pilot would be provided to the Governing Body in September 2018.	Mr North		TBC	As per action A/03/01
A/07/04	A more detailed contracting update to be provided to the Governing Body in September 2018.	Mr Woodhead		28 th November 2018	Mr Woodhead to circulate a copy of the contracting report currently provided to the Finance, Contracting & Procurement Committee and clarify whether any further information is required.
A/09/01	A further discussion was required at a future OCO Partnership Board regarding the membership arrangements at the JCB from a Bury locality perspective and how this process should operate	Ms O'Dwyer		28 th November 2018	Dr J Schryer (clinician), R Shori (Cllr) and G Little (Manager) are the nominated representatives for Bury. This action could be closed.
A/09/02	Agreed the need to define the baseline transformation figures/deflections at neighbourhood level and agreed to follow this up from a CCG perspective.	Ms O'Dwyer		28 th November 2018	Locality Care Alliance have this in hand and details to come to the December 2018 Transformation Board.

Title	Action	Lead	Status	Due Date	Update
A/09/03	Ms O'Dwyer to pick up with Mrs Jackson and Ms Trembath outside of the meeting regarding ophthalmology numbers in terms of how many patients had been included on the elective list.	Ms O'Dwyer		28 th November 2018	Mrs Jackson has confirmed that she is looking to see if these numbers can be estimated as part of the explanation for the increased number of elective waits.
A/09/04	The Safeguarding Annual reports to be uploaded onto the CCG Website	Mrs Jackson		28 th November 2018	
A/09/05	To submit the Safeguarding Annual reports to the Local Safeguarding Children Board, the Corporate parenting Board and local Adult Safeguarding Board for assurance.	Mrs Jackson		28 th November 2018	
A/09/06	Ms O'Dwyer to liaise with Mrs Featherstone regarding the CCG's Risk Matrix.	Ms O'Dwyer		28 th November 2018	