

Meeting: Governing Body (Meeting in Public)			
Meeting Date	22 May 2019	Action	Approve
Item No.	3	Confidential	No
Title	Minutes and Action Log		
Presented By	Dr Jeff Schryer, CCG Chair		
Author	Emma Kennett, Head of Corporate Affairs and Governance		
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 27th March 2019		
Author	Emma Kennett, Corporate Affairs and Governance Manager		
Version	0.1		
Target Audience	Public Members/Governing Body Members		
Date Created	April 2019		
Date of Issue	May 2019		
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Description	Minutes of the Governing Body meeting in Public 27 th March 2019		
Document History:			
Date	Version	Author	Notes
11/04/19	0.1	Emma Kennett	Forwarded to the CCG Chair for review.
Approved:			
Signature:			
		 Dr Jeff Schryer, CCG Chair

Governing Body

Meeting in Public

MINUTES OF MEETING

Governing Body, 27th March 2019 15:00-17:00

Chair – Dr Jeff Schryer, CCG Chair

ATTENDANCE

Members

Dr Jeff Schryer, CCG Chair (Chair)
Mr Peter Bury, Lay Member
Dr Daniel Cooke, Clinical Director
Dr Cathy Fines, Clinical Director
Mrs Catherine Jackson, Executive Nurse
Mr Howard Hughes, Clinical Director
Mr Geoff Little, Chief Officer
Mr David McCann, Lay Member for Patient and Public Involvement
Ms Margaret O'Dwyer, Director of Commissioning and Business Delivery
Mr Chris Wild, Lay Member for Finance and Governance
Mr Mike Woodhead, Chief Finance Officer

Others in attendance

Ms Lesley Jones, Director of Public Health, Bury MBC
Mrs Emma Kennett, Corporate Affairs and Governance Manager – minutes

Public Members/Officers

Ms Mary Naylor, Bury Times
Ms Barbara Barlow, Healthwatch, Bury
Mr Mark Donaghy, Communications Team, Bury MBC

MEETING NARRATIVE & OUTCOMES

1	Welcome, Apologies And Quoracy
1.1	Dr Schryer welcomed those present to the meeting and noted apologies had been received from: - <ul style="list-style-type: none">Ms Fiona Boyd. Registered Lay Nurse of the Governing BodyMr Paul Horrocks, Communications Advisor
1.2	Dr Schryer advised that the quoracy requirements had been satisfied in accordance with the CCG's Constitution. The meeting was therefore declared quorate.
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	Dr Schryer, Dr Cooke and Dr Fines declared an interest in relation to Agenda Item Number 5 – Financial Plan 2019/20 in light of the potential implications any decisions could have on GP practices in terms of the Quality in Primary Care components.
2.4	It was agreed that Dr Schryer, Dr Cooke and Dr Fines should be excluded from any decision making in relation to Quality in Primary Care however could remain present when this item is discussed. Mr Bury would Chair the meeting as part of the decision making process for Quality in Primary Care. Declarations of Interest from the previous meeting
2.5	There were no declarations of interest from the previous meeting raised.

ID	Type	The Governing Body:	Owner
D/03/01	Decision	Noted the published register of interests.	

3	Minutes Of The Last Meeting And Action Log
3.1	<ul style="list-style-type: none"> minutes <p>The minutes of the Governing Body meeting held on 23rd January 2019 were considered and agreed as a correct record.</p>
3.2	<ul style="list-style-type: none"> action log <p>The Action Log was discussed and following comments were made: -</p> <ul style="list-style-type: none"> A/03/01 – It had been 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 agreed that a further discussion around this issue would take place at the May Governing Body meeting. A/11/01 - A joint Race Equality Action Plan to be developed between the CCG and Council and brought back to a future Governing Body Meeting. It was agreed that a further discussion around this issue would take place at the May Governing Body meeting. <p>Following the meeting it was confirmed that a further discussion on this matter would take place via the JET meeting and an update would be brought back to a future Governing Body.</p> <ul style="list-style-type: none"> A/11/02 - A further update in respect of CCG and Council Support Services to be provided at a future Governing Body meeting. A/11/03 - A further discussion in relation to the Mutually Binding Agreement to be provided to the Governing Body in January 2019 as part of the Transformation update. An update in relation to the Mutually Binding Agreement would be provided as part of today's meeting agenda. A/01/02 - Governance Models for Tameside and Glossop and Manchester CCG's to be obtained. The models would need to be reviewed to assess whether any of the components could be adapted to form the basis of the

governance arrangements in Bury. It was noted that this would not form part of the work of Mr Brice, Interim Transformation Director for the OCO and this action could therefore be removed from the Action Log.

- A/01/09 - A communication to be drafted for Public Members in relation to the Cancer waits. Dr Schryer reported that there had been a dialogue with GPs in this regard and this could be removed from the Action Log.
- A/01/10 - A focused workshop in relation to Cancer Performance to be arranged. Providers would be invited to this workshop session. It was noted that this workshop had been arranged for the 9th April 2019, 4.00pm at Townside Primary Care Centre and this action could therefore be removed from the Action Log.
- A/01/11 - To ensure that sufficient time is allocated to significant reports on Governing Body agendas. It was noted that this was an ongoing issue that needed to be kept under review and this could therefore be removed from the Action Log.

ID	Type	The Governing Body:	Owner
D/03/02	Decision	approved the minutes of the meeting held 23 rd January 2010 as a true and correct record.	
D/03/03	Decision	closed the completed actions on the action log.	

4	CCG Chair and Chief Officer Update
4.1	<p>Dr Schryer and Mr Little provided an update on the latest CCG developments. It was reported that: -</p> <ul style="list-style-type: none"> • In terms of the Integrated Neighbourhood Teams, work was ongoing in this regard. It was envisaged that as these teams evolved, there would be a reduction in demand for acute services and more synergy from a Health and Social care perspective. • Work was underway to establish a single Commissioning Board from October 2019 which would comprise of all existing Governing Body members and Members of the Council. • The CCG and Council Joint Executive Team were now meeting on a weekly basis with clinical input. • A detailed OCO update report would be brought back to the Governing Body meeting in May 2019. • Significant progress had been made by the LCA in recent months in driving forward the Transformation agenda. • The Locality Assurance Visit had taken place on the 15 February 2019 which had been very well received by the Greater Manchester Team. It was noted that from a performance perspective, Ms O'Dwyer had articulated the current performance position in a positive and meaningful way. • In terms of a Single Savings Plan and the associated challenges, there was a need to jointly identify a plan to address the total gap of £24m across both organisations (CCG and Council) and take a more strategic approach in this regard. • Work was ongoing in relation to the New Model of Public Services across Greater Manchester with localities developing their own strategies. The importance for Governing Body members being linked into the development of this strategy was outlined.
4.2	Mrs Jackson informed members that a MIAA Master Class in relation to Population

	Health was taking place on the 1 st May 2019. It was agreed that details of this Master Class would be circulated to Governing Body Members.		
ID	Type	The Governing Body:	Owner
D/03/04	Decision	Noted the Chair and Chief Officer update.	
A/03/01	Action	Details of the MIAA Master Class regarding Population Health taking place on the 1 st May 2019 to be circulated to members.	Mrs Jackson

5	2019/20 Financial Plan		
5.1	<i>Dr Schryer, Dr Cooke and Dr Fines declared an interest for this item in light of the potential implications any decisions could have on GP practices in terms of the Quality in Primary Care components.</i>		
5.2	<i>It was agreed that Dr Schryer, Dr Cooke and Dr Fines should be excluded from any decision making in relation to Quality in Primary Care however could remain present when this item is discussed. Mr Bury would Chair the meeting as part of the decision making process for Quality in Primary Care.</i>		
5.3	<p>Mr Woodhead submitted a report and provided a presentation in relation to the Financial Plan for 2019/20. It was reported that the presentation had also been circulated to Governing Body members ahead of the meeting. The presentation covered:</p> <ul style="list-style-type: none"> • An overview of the plan which included a Core allocation increase of 5.26% (national average 5.65%). Primary care allocation increase of 5.86% (national average 6.59%, 2019/20 recurrent budget = £309.3m, inclusive of £4.3m for running costs. Therefore the recurrent increase = £15.6m (5.3%), Mental Health Investment Standard = 6% increased spend, Community and Primary Care spending to increase by minimum 5.3%, the revised acute national tariff impact equated to 4.03% for Bury, 2018/19 underlying deficit c/f = £5.7m, + pressures leads to 2019/20 savings target of £12.5m (4%) of which, c£7.1m identified schemes + £5.4m unidentified. • The financial gap, QIPP and net risk. • The key elements of the plan that would need approval by the Governing Body. 		
5.4	<p>Members were also in receipt of the month 11 Finance report for the CCG with the key points being as follows:</p> <ul style="list-style-type: none"> • Acute services forecast have increased by £0.45m in month 10 (£2.95m in m10). This is primarily as a result of increased expenditure in elective areas. While non-elective activity has increased in month 11 contract caps in place have mitigated these pressures in 2018/19. • Mental health services were forecast to be overspent by £1.0m, which largely relates to cost of additional beds required for Bury service users. • Primary care services were forecast to be overspent by £0.7m in total primarily due to prescribing costs within GP surgeries and GPIT costs. • The forecast position assumed delivery of the £8.5m QIPP (£3.5m identified schemes, £4.7m crystallised non-recurrent mitigations and £0.3m anticipated non-recurrent mitigations). 		

5.5	It was reported that contract negotiations with the main service providers were at an advanced stage but at the time of writing, contracts were yet to be signed and financial values finalised.
5.6	Mr Woodhead highlighted that if the Governing Body approved the Financial Plan for 2019/20 in it's current guise, this would include a £12.5m savings target with a £6.7m risk attached.
5.7	It was reported that discussions were currently underway between the CCG and Council to develop a Joint QIPP Plan across organisations which would link with the OCO and Corporate Core developments. Mr Little emphasised that as part of the governance within this area, there needed to be appropriate input from Providers, Clinicians and Primary Care.
5.8	Dr Cooke commented that he was aware of some discussions that were being undertaken at Executive level in relation to Mental Health/Early Psychosis and there was a need to ensure that clinicians were appropriately linked into any discussions within this area should there be any changes made to investment in services. It was highlighted that from a governance perspective, there was a need to ensure that the Mental Health Working Group and the Clinical Cabinet were fully sighted on these discussions going forward. Mr Woodhead reported that he was aware of the conversations that were currently taking place with Pennine Care in relation to the existing funding streams in terms of what had and hadn't been committed. Ms O'Dwyer commented that there hadn't been any changes in terms of the totality of the investment however there was a need to ensure that the resource was used optimally. Mr Woodhead stated that the overall financial envelope for Mental Health and how these funds were prioritised should be treated as two separate items. Dr Schryer emphasised that there was a need to ensure that Clinicians were involved as part of any decision making in relation to the Financial Plan.
5.9	Mr Wild sought clarification in relation to the Financial Plan and enquired whether the run rate was suggesting a £6.7M gap at the end of the financial year unless non recurrent measures could be implemented. Mr Woodhead reported that QIPP Plans were recurrent in nature and there was a need to ensure that transformational changes are made in order for the Financial Plan to be successfully achieved.
5.10	Mr Little commented that underlying structural change was required in order for long term financial benefits to be realised which would need to be linked to a clear set of organisational priorities across the CCG and Council. It was noted that as part of the Financial Plan, there was a need to ensure that Community Services and Public Health were reducing demand in the Acute Sector and that the wider determinants of health were being taken into account. It was highlighted that as part of this process, clinicians needed to be involved with robust governance processes in place to support the decision making process.
5.11	Mr Hughes reported that the QIPP starting point had a significant amount of risk attached which was similar to the position in other CCG areas in Greater Manchester. Mr Woodhead stated that the financial position was likely to become much clearer in September/October 2019 when further information was available in relation to prescribing figures. Mr Hughes highlighted that there needed to be a point within the financial year when the CCG needs to take a decision as to whether the QIPP Plan needs to be revised/ramped up in order to ensure that the required level of savings are reached by year end. Dr Schryer reported that progress would be monitored during the

	<p>course of the year via the Finance, Contracting and Procurement Committee with regular updates being submitted to the Governing Body meeting. It was agreed that a 'stock take' of progress made against the Financial Plan should be undertaken and a report submitted to the July Governing Body meeting for consideration in this regard.</p>
5.12	<p>Ms Jones concurred that there needed to be a more strategic approach to QIPP adopted which was aligned to the Strategic Intent of both organisations. Ms Jones enquired about the balance of Acute/Non Acute included within the plan and whether this had been articulated correctly. Mr Woodhead explained what this meant in the context of the Locality Plan and associated strategic intent.</p>
5.13	<p>Mrs Jackson reported that engagement with the public on the Financial Plan would be a key element of this process to ensure that the messages were understood and the public were on board with any changes being made. Dr Schryer reported that the CCG and Council were currently recruiting to a Head of Communications and Engagement role and this work would fit with that new role. Mrs Jackson enquired whether the CCG and Council would be able to formulate plans in relation to this engagement work ahead of the new post being filled. It was agreed that this matter should be discussed at a future JET meeting in terms of where this work should sit i.e. QIPP/PMO/Communications and how this links to existing capacity in the system.</p>
5.14	<p><i>Mr Bury Chaired the meeting from this point in light of the above noted declarations.</i></p>
5.15	<p>Mr Woodhead outlined the proposals in relation to Quality in Primary Care and discussed the work that was being undertaken within this area. It was reported that a detailed discussion had taken place at the Primary Care Commissioning Committee earlier in the day (27th March 2019) in relation to these proposals and it had been recommended that there be a £300k reduction in funds being committed to support Quality in Primary Care which would be used to support the identified QIPP funds for the organisation.</p>
5.16	<p>Mr Hughes highlighted that the CCG needed to make clear in any communication this area that there were different investments being made in Primary Care which would support some of the areas previously included as part of the quality funds. Therefore this should not be viewed as an overall reduction in funding. A general discussion took place regarding this matter in terms of how this may be perceived by GPs and the need for clear communication. Ms O'Dwyer suggested that a press release be formulated in relation to the CCG's finances given the current mismatch between the national communications, which suggest that there are more funds available at a local level within the NHS, and reality of the CCG's challenging financial plan for 2019/20. This communication would need to be adapted for the needs of both the Public and GP Membership of the CCG. Mr Little highlighted that there needed to be a caveat included as part of any message in light of some of the actions that need to be taken as part of the Financial Plan not yet being known.</p>

ID	Type	The Governing Body:	Owner
D/03/05	Decision	Approved the Financial Plan for 2019/20 as outlined with the report and supplementary presentation for submission to NHS England.	
D/03/06	Decision	Noted the level of financial risk.	
D/03/07	Decision	Noted the plans and proposals to close the financial	

		gap, including the QIPP target for Primary Care.	
D/03/08	Decision	Noted the CCG financial position at month 11, which is on plan.	
D/03/09	Decision	Note that the forecast outturn position is to deliver in line with plan.	
A/03/02	Action	It was agreed that a 'stock take' of progress made against the Financial Plan should be undertaken and a report submitted to the July Governing Body meeting for consideration	Mr Woodhead
A/03/03	Action	It was agreed that this matter should be discussed at a future JET meeting in terms of where this work should sit i.e. QIPP/PMO/Communications and how this links to existing capacity in the system.	Mr Little
A/03/04	Action	Agreed that a press release be formulated in relation to the CCG's finances given the current mismatch between the national communications which suggest that there are more funds available within the NHS at a local level and reality of the CCG's challenging financial plan for 2019/20.	Mr Woodhead

6	CCG 2019/20 Operating Plan and Performance Standards		
6.1	Ms O'Dwyer provided a presentation in relation to the 2019/20 Operating Plan and Performance Standards. It was noted that the presentation had already been circulated to Governing Body Members ahead of the meeting.		
6.2	The presentation covered the deliverables for 2019/20 and the 2018/19 YTD / Forecast Outturn Position across the following areas: -		
	<ul style="list-style-type: none"> • Urgent Care • Elective Care • Cancer • Mental Health • Learning Disabilities and Autism • Primary Care and Community Services • Personal Health Budgets 		
6.3	Dr Fines referred to the new requirement as part of the Learning Disabilities and Autism standard for a robust plan to ensure LeDeR reviews are undertaken within 6 months of notification of death and an annual report submitted and enquired as to whether this would be a provider or commissioner responsibility. Ms O'Dwyer commented that this still needed to be determined and there was potentially an opportunity to look at this on a Greater Manchester level basis.		
ID	Type	The Governing Body:	Owner
D/03/10	Decision	Noted the presentation.	

7	Mutually Binding Agreement		
7.1	Mr Little provided an update on the development of the Mutually Binding Agreement.		

7.2	It was reported that the Mutually Binding Agreement was due to be signed by all partners on the 1 st April 2019 in line with the delegation arrangements agreed at the January Governing Body meeting. It was agreed that a final copy of the Mutually Binding Agreement would be circulated to Governing Body members on email once available.		
ID	Type	The Governing Body:	Owner
D/03/11	Decision	Noted the update.	
A/03/05	Action	A final copy of the Mutually Binding Agreement would be circulated to Governing Body members on email once available.	Mrs Kennett

8	EU Exit operational readiness for the health and care system		
8.1	Ms O'Dwyer provided an update on the EU Exit operational readiness for the Health and Social Care system.		
8.2	It was reported that the CCG had an Action Plan in place and would be monitoring the position within this area over the coming weeks.		
ID	Type	The Governing Body:	Owner
D/03/12	Decision	Noted the update.	

9	Annual Equality and Diversity Report for 2017/18		
9.1	<p>Ms O'Dwyer submitted a copy of the Annual Equality Publication for the CCG. It was reported that the CCG has a legal obligation under the Public Sector Equality Duty to publish information on an annual basis that shows how it is meeting the legal obligations to:</p> <ul style="list-style-type: none"> • Eliminate unlawful discrimination, harassment and victimisation; • Advance equality of opportunity between different groups; and • Foster good relations between different groups. 		
9.2	It was highlighted that the Annual Equality Publication included information on the CCG's workforce demographics and evidence of the processes and outcomes which had been implemented that year, from 1st September 2016 to 31 August 2017, to improve quality, patient safety, experience and outcomes.		
9.3	<p>It was noted that this publication included two appendices:</p> <ul style="list-style-type: none"> • Appendix A – Workforce Report • Appendix B – Patient Services Demographic Profile Report 		
9.4	It was reported that the detailed scrutiny of this report had taken place via the CCG's Quality and Performance Committee.		
9.5	Mr Bury commented that the workforce numbers contained within the report were relatively small which could skew the data.		
9.6	Dr Schryer referred to 2.7.6 of the report and the reference made to an Action Plan being developed to address the findings of the report and enquired as to who would have oversight of this. Ms O'Dwyer commented that the Quality and Performance		

9.7	Committee would have oversight of these Action Plans.		
	It was highlighted that once approved, the report would be uploaded to the CCG's website, as required by the Public Sector Equality Duty.		
ID	Type	The Governing Body:	Owner
D/03/13	Decision	Approved the Annual Equality Publication and appendices.	
D/03/14	Decision	Approved the Annual Equality Publication for publishing on the website by 31st March 2019 as required by the Public Sector Equality Duty.	
A/03/06	Action	The Annual Equality report to be uploaded to the CCG's website, as required by the Public Sector Equality Duty.	Mrs Kennett

10	Gluten Free Prescribing
10.1	Mr Hughes presented a report in relation to Gluten Free Prescribing. It was reported that this paper provided the Governing Body with an update on a previous decision to withdraw NHS prescriptions for gluten free (GF) products from adults (aged 19 years and over) with Coeliac Disease / Dermatitis Herpetiformis (which commenced on 1st January 2017).
10.2	It requested a decision on future local policy in the light of a new national decision by the Department of Health and Social Care (DHSC) to restrict the prescribing of some gluten-free foods on the NHS from 4th December 2018.
10.3	It was highlighted that in February 2019 the Clinical Cabinet received a paper which:- <ul style="list-style-type: none"> • Updated members on the original decision to withdraw NHS prescriptions for Gluten Free products from adults (aged 19 and over) with Coeliac Disease/Dermatitis Herpetiformis, and; • Requested a consideration of future local policy in light of the new national decision by the Department of Health and Social Care (DHSC) to restrict the prescribing of some gluten-free foods on the NHS from 4th December 2018.
10.4	It was noted that there were 3 options for consideration: - <ul style="list-style-type: none"> • Option 1: No change. Children and adults under 19 years would continue to receive prescriptions for GF bread and flour mix products, up to the defined monthly limits. This may result in financial savings of around £3,000 per annum, although patients previously receiving items that are now disallowed (e.g. pasta, cereals) may switch to bread and/or mixes. The recommendation in the paper was that Clinical Cabinet support this option. • Option 2: Reintroduce GF items on prescription for adults, subject to defined monthly limits. This would result in an increased spend. • Option 3: Withdraw prescriptions for GF items for all Bury patients. This would result in a recurrent annual saving of around £14,400. (In it's guidance to CCGs on Prescribing Gluten-Free Foods in Primary Care¹ ,

	NHS England states that whilst the Amendment Regulations aimed to reduce variation as they allow only for GF bread and mixes to be prescribed at NHS expense, 'CCGs may further restrict the prescribing of GF foods by selecting bread only, mixes only or CCGs may choose to end prescribing of GF foods altogether'.)		
10.5	It was noted that following a comprehensive clinical discussion, the Clinical Cabinet supported Option 1 which allowed continuation of gluten-free items on prescription (albeit within the new DHSC restricted list) for children and adults under 19 years only.		
10.6	It was highlighted that it had been deemed appropriate to submit this item to the Governing Body given the political nature of the topic area and the level of scrutiny this agenda had previously received.		
ID	Type	The Governing Body:	Owner
D/03/15	Decision	Approved the Clinical Cabinet's recommendation to align Bury's existing Gluten Free prescribing policy to reflect the new national guidance relating to the restriction in GF products available on prescription.	

11	Public Questions in relation to the agenda		
11.1	Dr Schryer reported that there had been a number of questions raised in advance of the Governing Body meeting from a member of the public in relation to Equality and Diversity in relation to of the CCG's recruitment processes. It was noted that a formal letter would be sent back to the member of the public on behalf of the Governing Body responding to the questions raised.		
11.2	Ms Barlow, Public Member reported that the Chief Officer of Healthwatch was taking early retirement and there was a new Independent Consultant taking over this role. Ms Barlow enquired as to how Healthwatch would fit into the future integration arrangements between the CCG and Council.		
11.3	Dr Schryer reported that this was a question that needed to be explored further which would link with the current review of the Patient Cabinet and work ongoing with the Voluntary Sector within the borough. Ms Barlow highlighted that it would be useful to have a protocol for working together with the CCG and Council. It was agreed that a meeting should be arranged between Ms Barlow, Dr Schryer, Mr Little and Mr McCann to discuss this joint work.		
ID	Type	The Governing Body:	Owner
D/01/16	Decision	Noted the questions raised.	
A/03/07	Action	A formal letter to be sent back to the member of the public in relation to the questions raised in relation to Equality and Diversity and the CCG's Recruitment processes	
A/03/08	Action	It was agreed that a meeting should be arranged between Ms Barlow, Dr Schryer, Mr Little and Mr McCann to discuss this joint work.	Dr Schryer

12	Audit Committee Update
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	a) <u>Audit Committee Chair's Report</u>
12.1	Mr Wild presented the latest Audit Committee Chair's report which summarised the main discussions held at the meeting on the 1 st March 2019.
12.2	It was reported that a robust discussion had taken place in relation to the risk matrix and the revised scoring in this regard.
	b) <u>Governing Body Assurance Framework</u>
12.3	Ms O'Dwyer submitted the latest Governing Body Assurance Framework report to the Governing Body.
12.4	It was reported that since the last presentation of the GBAF a review of all risks had been undertaken and the current risk profile was presented as:- <ul style="list-style-type: none"> • 8 presenting a significant level of (current) risk (level 15 or above) to delivery of the CCG's strategic objectives; • 6 presenting a high level of (current) risk (level 8-12) to delivery of the CCG's strategic objectives; and • 1 presenting a moderate level of (current) risk (level 4-6) to delivery of the CCG's strategic objectives
12.5	Ms O'Dwyer commented that a full review of the CCG's Strategic Objectives would take place at the Governing Body Development Session in April 2019 and there may be an opportunity to look at some of these objective in conjunction with the Council.
	c) <u>Corporate Risk Register</u>
12.6	Ms O'Dwyer presented the latest Corporate Risk Register report to the Governing Body.
12.7	The Governing Body was advised that there were currently 3 risks included on the Corporate Risk Register (operational risks) at a level 15 or above namely: <ul style="list-style-type: none"> • Failure to effectively invest in the medium term transformation of the wider health and care economy (level 20); • PCFT - Mixed Sex Accommodation (SSA breaches) (level 16); and • Autistic Spectrum Conditions Assessment – Work force capacity to maintain waiting times (New risk) (level 20).

ID	Type	The Governing Body:	Owner
D/03/17	Decision	Noted the Chair's update report from the Audit Committee.	
D/03/18	Decision	Reviewed the Governing Body Assurance Framework report.	
D/03/19	Decision	Discussed any concerns arising from the information presented as part of the Governing Body Assurance Framework.	
D/03/20	Decision	Received the Corporate Risk Register and	

Reviewed the information presented.

13 Finance, Contracting and Procurement Committee Chair's Report			
13.1	a) <u>Finance, Contracting and Procurement Committee Chair's Report.</u>	Mr Wild provided an update on the Finance, Contracting and Procurement Committee held on the 22 nd March 2019. It was noted that a number of Procurement Waivers were presented to the Committee and these would be reported via the Audit Committee once approved.	
ID	Type	The Governing Body:	Owner
D/03/21	Decision	Noted the update.	

14 Quality and Performance Committee Chair's Report	
14.1	a) <u>Quality and Performance Committee Chair's Report</u>
14.1	Mr Bury reported that there hadn't been a recent meeting on the Quality and Performance meeting therefore there wasn't an update for the Governing Body at this time.
14.2	b) <u>Quality Dashboard</u>
14.2	Mrs Jackson submitted the latest Quality Dashboard to the Governing Body.
14.3	It was highlighted that the Quality Dashboard provided an overview of: <ul style="list-style-type: none">• Clostridium Difficile objectives 2019/20• LeDeR multi-agency review• Provider Updates• General Practice Update• Nursing Home Update
14.4	It was reported that the CCG had successfully recruited to the Complex Care Team following this service being brought back in house.
14.5	Mrs Jackson informed members that the CCG had achieved the highest score as part of the recent Infection Control Audit undertaken by MIAA and commended the Infection Control Group in this regard. It was agreed that a formal letter should be sent to the Chair of the Infection Control Group thanking them for all their good work within this area.
14.6	d) <u>Performance Report</u>
14.6	Ms O'Dwyer presented the latest Performance report to the Governing Body.
14.7	It was reported that the key items had already been brought to the Governing Body's attention as part of the Operating Planning Item on the agenda.
14.8	e) <u>Quarter 3 Safeguarding Dashboard</u>
14.8	Ms Jackson submitted the Quarter 3 Safeguarding Dashboard to the Governing Body.
14.9	It was highlighted that the key elements of the report were: - <ul style="list-style-type: none">• The CCG was meeting all the safeguarding standards and that current level of

	<p>training at Level 1 is above the minimum benchmark of 80%</p> <ul style="list-style-type: none"> • The Bury Safeguarding Children Board (BSCB) have published a Serious Case Review where a key learning was that the needs of children in the extended family, but not in the index household, must be considered • A link was provided to the annual report of the BSCB • An update on the CQC action plan following the Children Looked After and Safeguarding Inspection in September 2018 • The current position of Pennine Acute Trust against the contractual safeguarding standards. The Trust was working in an open and transparent manner and has identified, along with the CCG safeguarding team, areas for improvement. The action plan is progressing.
14.10	An update on the newly emerging arrangements for safeguarding in Bury was received. It was reported that the Governing Body would be presented with the new arrangements for approval prior to publication at the end of May 2019.

ID	Type	The Governing Body:	Owner
D/03/22	Decision	Noted the Quality and Performance Committee Chair's Report.	
D/03/23	Decision	Noted the Quality report.	
D/03/24	Decision	Noted the Performance Report and updates provided.	
D/03/25	Decision	Noted the Safeguarding Dashboard.	
A/03/09	Action	A letter to be sent to the Chair of the Infection Control Group thanking them for all their hard work.	Dr Schryer
A/03/10	Action	Newly emerging arrangements for safeguarding to be presented to Governing Body in May 2019.	Mrs Jackson

15	Committee Chair Reports
	a) <u>Patient Cabinet</u>
15.1	Mr McCann presented the Patient Cabinet Chair's report to the Governing Body which also included a copy of the Patient and Public Participation Annual Report for 2018/19.
15.2	It was highlighted that there was further clarification required in relation to the Urgent Care agenda and the associated neighbourhood working in this regard. Dr Schryer commented that this was a good challenge and that there was a need for a more detailed discussion in relation to Urgent Care at the Governing Body meeting in May 2019.
	b) <u>Primary Care Commissioning Committee</u>
15.3	Mr Bury provided a verbal update on the key discussions at the Primary Care Commissioning Committee earlier in the day (27 th March 2019).
15.4	It was reported that the key items that had been discussed related to Quality in Primary Care which had been covered in detail as part of the Financial Plan item and a discussion in relation to the Tower Healthcare merger with a report on the key lessons learnt due to be submitted to the Committee in September 2019. A report in relation to non medical prescribing had been endorsed and it was agreed that a copy of this would be circulated across the CCG as appropriate.

15.5	c) <u>Clinical Cabinet</u> Mr Hughes submitted update reports from the Clinical Cabinet meetings held on the 6 th February and 6th March 2019.		
ID	Type	The Governing Body:	Owner
D/03/26	Decision	Noted the Patient Cabinet Update.	
D/03/27	Decision	Noted the Primary Care Commissioning Committee update.	
D/03/28	Decision	Noted the Clinical Cabinet Update.	
A/03/10	Action	A report in relation to the latest Urgent Care developments to be brought back to the Governing Body in May 2019	Dr Schryer

16	Closing Matters		
16.1	Dr Schryer summarised the main discussion points of today's meeting and thanked members for their contributions.		
ID	Type	The Governing Body:	Owner
D/03/29	Decision	Noted the information.	

Next Meeting	Wednesday, 22 nd May 2019, 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.	Ms O'Dwyer/Dr Schryer		25 th May 2019	<p>A formal presentation in relation to the Urgent Care developments/pilot would be provided to the Governing Body in September 2018</p> <p>It was reported that a presentation in relation to Urgent Care would be provided to a future Governing Body meeting at the appropriate time.</p> <p>It was noted that this action had been previously been attributed to Mr North who had now left the organisation and related to the decision taken in relation to Urgent Care and reviewing the current position in this regard. Ms O'Dwyer agreed to bring a report back to the Public Governing Body in March 2019 in relation to this action.</p>
A/11/02	A further update in respect of CCG and Council Support Services to be provided at a future Governing Body meeting.	Mr Little		25 th May 2019	
A/01/01	A further discussion around Childhood Obesity to take place at a future Governing Body meeting.	Ms Jones		May 2019	Included on agenda.
A/03/01	Details of the MIAA Master Class regarding Population Health taking place on the 1 st May 2019 to be circulated to members.	Mrs Jackson		April 2019	Circulated on email to Governing Body members

Title	Action	Lead	Status	Due Date	Update
A/03/02	It was agreed that a 'stock take' of progress made against the Financial Plan should be undertaken and a report submitted to the July Governing Body meeting for consideration	Mr Woodhead		July 2019	
A/03/03	It was agreed that this matter should be discussed at a future JET meeting in terms of where the 2019/20 financial plan work should sit i.e. QIPP/PMO/Communications and how this links to existing capacity in the system.	Mr Little		April 2019	Ongoing discussions at JET.
A/03/04	Agreed that Press Release be formulated in relation to the CCG's Finances given the current mismatch between the National communications which suggest that there are more funds available within the NHS at a local level and reality of the CCG's challenging financial plan for 2019/20.	Mr Woodhead		April 2019	This was covered in the Bury Times as they were in attendance at the meeting. Separate to this, a public information campaign now is now being arranged.
A/03/05	A final copy of the Mutually Binding Agreement would be circulated to Governing Body members on Email once available.	Mrs Kennett		April 2019	Circulated on Email to members.
A/03/06	The Annual Equality report to be uploaded to the CCG's website, as required by the Public Sector Equality Duty.	Mrs Kennett		March 2019	Uploaded to the CCG website.
A/03/07	A formal letter to be sent back to the member of the public in relation to the	Dr Schryer		May 2019	

Title	Action	Lead	Status	Due Date	Update
	questions raised in relation to equality and diversity and the CCG's recruitment processes				
A/03/08	It was agreed that a meeting should be arranged between Ms Barlow, Dr Schryer, Mr Little and Mr McCann to discuss this joint work.	Dr Schryer		April 2019	A meeting has been arranged for the 16 th May 2019.
A/03/09	A letter to be sent to the Chair of the Infection Control Group thanking them for all their hard work.	Dr Schryer		April 2019	It was noted that following the meeting, it was confirmed that there was no such Group in place therefore this specific action could be removed from the log.
A/03/10	A report in relation to the latest Urgent Care developments to be brought back to the Governing Body in May 2019	Dr Schryer		May 2019	See action A/03/01