

Meeting: Governing Body (Virtual Meeting)			
Meeting Date	25 November 2020	Action	Approve
Item No.	3	Confidential	No
Title	Minutes of the Last Meeting 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 of the Public meeting held on 23 September 2020 are presented as an accurate reflection of the previous meetings of the Governing Body reflecting the discussion, decision 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 of the Public meeting held on the 23 September 2020 as an accurate record; and • Note the updates provided against the actions

Links to CCG Strategic Objectives	
<p>SO1 People and Place To enable the people of Bury to live in a place where they can co-create their own good health and well-being and to provide good quality care when it is needed to help people return to the best possible quality of life</p>	<input checked="" type="checkbox"/>
<p>SO2 Inclusive Growth To increase the productivity of Bury's economy by enabling all Bury people to contribute to and benefit from growth by accessing good jobs with good career prospects and through commissioning for social value</p>	<input checked="" type="checkbox"/>
<p>SO3 Budget To deliver a balanced budget</p>	<input checked="" type="checkbox"/>
<p>SO4 Staff Wellbeing To increase the involvement and wellbeing of all staff in scope of the OCO.</p>	<input checked="" type="checkbox"/>
<p>Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:</p>	
<p>GBAF N/A</p>	

Implications						
Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
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"/>
Is an Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
If yes, has an Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
If yes, please give details below:						
If no, please detail below the reason for not completing an Equality, Privacy or Quality Impact Assessment:						
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"/>

Governance and Reporting		
Meeting	Date	Outcome
N/A		

Title	Minutes of the Governing Body Virtual Meeting in Public held on the 23 September 2020		
Author	Emma Kennett, Head of Corporate Affairs and Governance		
Version	0.1		
Target Audience	Public Members/Governing Body Members		
Date Created	September 2020		
Date of Issue	September 2020		
To be Agreed	TBC		
Document Status (Draft/Final)	Draft		
Description	Minutes of the Governing Body Virtual Meeting in Public held on 23 September 2020		
Document History:			
Date	Version	Author	Notes
	0.1	Emma Kennett	Forwarded to the CCG Chair for review
Approved:			
Signature:			
		 Dr Jeff Schryer, CCG Chair

Governing Body

Virtual Meeting

MINUTES OF VIRTUAL MEETING VIA MICROSOFT TEAMS

Governing Body, 23 September 2020, 3.00pm

Chair – Dr Jeff Schryer, CCG Chair

ATTENDANCE

Members	
Dr Jeff Schryer	CCG Chair (Chair)
Will Blandamer	Executive Director of Strategic Commissioning
Mrs Fiona Boyd	Registered Lay Nurse of the Governing Body
Mr Peter Bury	Lay Member
Dr Daniel Cooke	Clinical Director
Dr Cathy Fines	Clinical Director
Mr Howard Hughes	Clinical Director
Mr Geoff Little	Chief Officer
Mr David McCann	Lay Member for Patient and Public Involvement
Mr Peter Thompson	Secondary Care Clinician
Mr Chris Wild	Lay Member – Finance
Mr Mike Woodhead	Joint Chief Finance Officer
Others in attendance	
Ms Catherine Jackson	Director of Nursing & Quality Improvement
Mrs Lynne Ridsdale	Deputy Chief Executive, Bury Council
Ms Lesley Jones	Director of Public Health, Bury Council
Mrs Emma Kennett	Head of Corporate Affairs and Governance
Mrs Lisa Featherstone	Deputy Director of Governance and Assurance
Mrs Catherine Tickle	Commissioning Programme Manager
Mr Damian Aston	Senior Commissioning Manager
Public Members/Observers	
Ms Barbara Barlow	Healthwatch Chair
Mr Steve Meadows	Public Member

MEETING NARRATIVE & OUTCOMES

1	Welcome, Apologies And Quoracy
1.1	Dr Schryer welcomed those present and noted that no apologies for absence had been received.
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	Dr Schryer 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 .		
2.3	<ul style="list-style-type: none"> Declarations of interest from today's meeting Mrs Boyd reported that she had left her role at Tameside General Hospital and started a new role at NHSI and England. A new form would be submitted in line with the CCG's Conflicts of Interest Policy.		
2.4	Mr Thompson reported that he had been seconded for 2 days a week as a Consultant Obstetrician to Shrewsbury and Telford Hospitals giving advice on their Maternity Services. A new form would be submitted in line with the CCG's Conflicts of Interest Policy.		
2.5	<ul style="list-style-type: none"> Declarations of Interest from the previous meeting 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.	

3	Minutes of the last Meetings and Action Log		
3.1	a) Minutes The minutes of the Governing Body meeting held on 22 July 2020 were considered and agreed as a correct record.		
3.2	b) Action Log The Action log was discussed and there were no updates to provide.		
ID	Type	The Governing Body:	Owner
D/09/02	Decision	Approved the minutes of the meeting held on the 23 September 2020.	

4.	CCG Chair and Chief Officer Update		
4.1	Mr Little provided an update on the latest CCG and Council developments. It was reported that: - <ul style="list-style-type: none"> In terms of Covid-19, the current infection rate was 151 per 100,000 which was the second worst in Greater Manchester. The future projected Covid-19 transmission rates were outlined. Hospital admissions rate were currently under control and further work was being undertaken locally in relation to contact tracing to supplement the national work. Work would continue to ensure that vulnerable people are supported locally in line with National Shielding protocols. A plan had been submitted to NHS England in relation to resuming non Covid-19 related services in a safe manner. The plan included details in relation to activity. Discussions had taken place with the Northern Care Alliance in this regard. Winter planning arrangements were currently underway in preparation for any pressures being experienced in relation to Health and Care services. There was a need to increase local capacity in relation to Covid-19 testing. 		

4.2	There were plans nationally to move to a mass testing model in future months.		
	Dr Schryer commended Mrs Jackson for all her hard work in supporting the local Covid-19 testing arrangements. The thank you was also extended to other CCG and Council staff who had supported the Covid-19 response.		
	Type	The Governing Body:	Owner
D/09/03	Decision	Noted the update.	

5	Questions from Public Members in relation to the agenda		
5.1	It was noted that no questions had been received from members of the Public.		
ID	Type	The Governing Body:	Owner
D/09/04	Decision	Noted that there were no questions.	

6.	Finance		
6.1	<p>a) Finance, Contracting & Procurement Committee Chair's Report</p> <p>Mr Wild provided an update on the recent discussions that had taken place at the Finance, Contracting & Procurement Committee in relation to the current financial challenges and outlook. It was noted that the pressures surrounding Covid-19 and the delays with the issuing of national guidance had created some uncertainty in the NHS System.</p>		
6.2	<p>b) Phase 3 Submission / Financial Planning</p> <p>Mr Woodhead provided a brief presentation in relation to the Phase 3 submission and the financial planning arrangements. The presentation covered: -</p> <ul style="list-style-type: none"> • Greater Manchester ICS level funding and income assumptions announced by NHSE/I including exclusions. • Greater Manchester level control total. • The impact, future pressures and outlook. It was noted that Pre-Covid: the CCG already had £20m gap this year and c£44m gap over next 5 years; with only £5.6m schemes identified. • In terms of next steps, the full Greater Manchester financial plan was due on 5th October 2020 (sign off end next week). • Individual organisation plans were due on 22nd October 2020 which would require sign off by all Boards and GBs. • Organisational bridge analysis underway of drivers of the gap. • The need to continue at pace with local recovery & transformation plans; focus on what can be influenced and the run rate for 20/21. 		
6.3	Dr Schryer commented on the significant financial pressures being experienced in Bury and across Greater Manchester		
6.4	<p>c) Finance Report</p> <p>Mr Woodhead presented the latest Month 5 Finance Report to the Governing Body.</p> <p>It was reported that as stated in the month 4 report, in response to the Covid-19 pandemic a national top down command and control framework had been put in place by NHS England. As part of this, there was a financial regime for the first six</p>		

	months of 2020/21 covering the period from 1 st April to 31 st September in which the CCG had received a baseline allocation based on the month 11 2019/20 position uplifted for inflation.		
6.5	It was noted that in addition to this, based upon expenditure to month 4, the CCG had received a retrospective allocation of £5.8m to contribute to Covid-19 related and business as usual expenditure. This was to support the CCG in the national intention to achieve a balanced position for the first 6 months of 2020/21. Alongside this the £8.2m planned non recurrent surplus draw down has also been received. All of this led to a break-even position at month 4.		
6.6	At month 5 the CCG was reporting a month 5 overspend of £0.3m against an allocation of £148.3m. Within this position, in addition to business as usual expenditure, the CCG had incurred £6.7m of expenditure related to the Covid-19 pandemic. The reason for this reduction in the monthly overspend from previous months was a significant reduction in COVID-19 expenditure claims from the Local Authority. As in previous months, it was expected that a retrospective allocation would be received by the CCG to ensure a breakeven position.		
6.7	It was highlighted that following delays to the publications of funding details or guidance about the financial and contracting framework for months 5-12 and beyond by NHSE/I the financial arrangements for months 1-4 have been extended to months 5 and 6. Phase 3 planning guidance had been published with service expectations but no funding details for months 7 to 12. The CCG was currently working on a draft planning activity and financial submissions for the 21 st September 2020.		
ID	Type	The Governing Body:	Owner
D/09/05	Decision	Received the Finance, Contracting & Procurement Committee Chair's Report for information.	
D/09/06	Decision	Considered the presentation on Phase 3 Submission / Financial Planning.	
D/09/07	Decision	Received the Finance Report for information.	
D/09/08	Decision	Noted the continuation of the current financial arrangements into August and September with a new regime to be in place from October 2020.	
D/09/09	Decision	Noted the month 5 overspend of £0.3m against notified allocation.	
D/09/10	Decision	Noted the Covid-19 related expenditure of £6.7m at month 5.	
D/09/11	Decision	Noted the expectation of retrospective allocations totaling £0.3m to enable the CCG to report a breakeven position at month 5.	

7.	Recovery and Transformation
	a) Recovery and Transformation

7.1	Mr Blandamer submitted a highlight report in relation to the Health and Care System Recovery and Transformation programme.		
7.2	Dr Schryer highlighted that a tremendous amount of work had gone into developing this programme and emphasised the importance in adopting a Bury System approach.		
7.3	<p style="text-align: center;">b) Governance</p> Mr Blandamer presented a report that outlined the current structure of the Health and Care Recovery and Transformation Programme Structure for information purposes.		
ID	Type	The Governing Body:	Owner
D/09/12	Decision	Considered the Recovery and Transformation.	
D/09/13	Decision	Noted the Governance Update.	

8.			
	a) Audit Committee Chair's Report		
8.1	Mr Wild presented the latest Audit Committee Chair's report which provided an update of the last Audit Committee meeting held on the 4 September 2020.		
8.2	This report provided an outline of the matters discussed, assurances sought and decisions ratified at the last Audit Committee meeting. The report aimed 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.		
8.3	It was reported that a number of the Agenda Items discussed at the meeting were included on today's Governing Body agenda under separate cover.		
	b) Governing Body Assurance Framework		
8.4	Members received copies of the latest Governing Body Assurance Framework report.		
8.5	It was noted that the Audit Committee had reviewed the GBAF, as presented at its meeting on the 4th September 2020 and were advised that in preparing the 2020/21 GBAF, the strategic objectives have been rolled forward and all GBAF risks have been reviewed with the assigned risk owners to ensure continued validity of the risk. This had resulted in three risks being removed, reviewed by the Audit Committee and supported for closure and removal from the GBAF due to effective management in-year (2019/20) or being superseded by more relevant risks for 2020/21. One new risk had been added onto the framework.		
8.6	Overall, this had resulted in a revised position for the 2020/21 GBAF of eight (8) principal risks presented across four (4) Strategic Objectives, reflected in following risk profile:		
	<ul style="list-style-type: none"> • 7 remain at a significant level of current risk (level 15 or above) to delivery of the CCG's Strategic Objectives; • 1 remains at a high level of current risk (level 8-12) to delivery of the CCG's Strategic Objectives. 		

8.7	The Audit Committee was also advised that as consequence of Covid-19, usual governance arrangements were paused whilst the CCG and wider system responded to the pandemic, which resulted in delays to routine processes, including agreement of the Strategic Objectives for 2020/21 and progression of the underpinning business processes.
8.8	Work was now progressing to establish these frameworks; however, it should be noted that whilst it was usual practice for sub-committees of the Governing Body to provide a level of oversight and assurance on their risks prior to the GBAF being presented to the Audit Committee (and subsequent Governing Body), this process had not been followed for all risks within this report. Reviews have however been undertaken with the assigned risk owner.
8.9	Since reporting to the Audit Committee in September 2020, the Covid-19 increased demand on services risk has been considered by the Quality and Performance Committee at its meeting on 9 th September 2020, which considered that the risk assessment is accurate and actions to manage and mitigate are proportionate.
	c) Corporate Risk Register
8.10	Members received copies of the latest Corporate Risk Register Report.
8.11	<p>It was noted that the Audit Committee reviewed the Corporate Risk Register, as presented at its meeting on the 4th September 2020. At the time of presentation, the CRR included 6 risks at a level 15 or above, however the Audit Committee was asked to consider the closure of the following two risks, which was supported, subject to any further reflections of the Quality and Performance Committee at its meeting on 9th September 2020: -</p> <ul style="list-style-type: none"> • Growth in Elective Waits; and • Failure to achieve 2019/20 IAPT targets.
8.12	It was highlighted that the Quality and Performance Committee raised no concerns with the closure of these risks.
8.13	<p>The Governing Body was advised that following the amendments as outlined above, 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) as listed:</p> <ul style="list-style-type: none"> • Autistic Spectrum Conditions Assessment – Work force capacity to maintain waiting times; • Delivering the NHSEI CHC recovery plan (New); • PCFT - Mixed Sex Accommodation (SSA breaches); • Datix: Resource requirements to maximise optimisation; and
8.14	Mr Thompson referred to the closure of the risk relating to the Growth in Elective Waits and queried the process for the closure or risks given that this particular risk had not been resolved as there was likely to still be issues with the Growth in Elective waits. It was reported that these were targets that relate to a particular financial year and that new targets were set for each financial year. A general discussion took place regarding this matter. It was agreed that any actions relating to this comment would be picked up outside of the meeting.

8.15	<p>d) Conflicts of Interest Policy</p> <p>Members received copies of the revised Conflicts of Interest Policy which had been submitted to the Audit Committee on the 4th September 2020 for review.</p>
8.16	<p>It was reported that the policy had been updated to reflect: -</p> <ul style="list-style-type: none"> • Changes in Job titles/contact details/responsibilities. • More specific reference to fraud, bribery and corruption.
8.17	<p>e) Whistleblowing Policy</p> <p>Members received copies of the revised Whistleblowing Policy which had been submitted to the Audit Committee on the 4th September 2020 for review.</p>
8.18	<p>It was reported that the policy had been updated to reflect: -</p> <ul style="list-style-type: none"> • Changes in Meeting titles. • Signposting to CCG website to link with fraud policy. • Changes to organisation names.
8.19	<p>f) Gifts and Hospitality Policy</p> <p>Members received copies of the revised Gifts and Hospitality Policy which had been submitted to the Audit Committee on the 4th September 2020 for review. It was reported that the policy had been updated to reflect: -</p> <ul style="list-style-type: none"> • Changes in Job titles/contact details/responsibilities. • Change to the Register of Gifts and Hospitality Register to clarify number of offers received during course of financial year and whether there have been previous offers from same supplier.
8.20	<p>g) Risk Management Strategy</p> <p>Members received copies of the revised Risk Management Strategy which had been submitted to the Audit Committee on the 4th September 2020 for review.</p>
8.21	<p>It was noted that the Risk Management Strategy had been cosmetically updated to reflect minor changes in role titles and responsibilities. The policy was reviewed by the Audit Committee on the 4th September 2020.</p>
8.22	<p>It was the intention to revisit Risk Management across the Bury CCG and Council partnership arrangements in the next 6 months and was proposed that the Strategy be reviewed again in March 2021.</p>

ID	Type	The Governing Body:	Owner
D/09/14	Decision	Received the Audit Committee Chair's Report.	
D/09/15	Decision	Received the Governing Body Assurance Framework.	
D/09/16	Decision	Noted the delays in progressing this work to date.	
D/09/17	Decision	Discussed concerns arising from the information provided.	
D/09/18	Decision	Received the Corporate Risk Register.	

D/09/19	Decision	Noted the two corporate risks approved for closure by the Audit Committee with no subsequent concerns raised by the Quality & Performance Committee.	
D/09/20	Decision	Reviewed the information presented.	
D/09/21	Decision	Noted the assurance provided by the Audit Committee on the arrangements in place to assess, mitigate and manage the risks identified.	
D/09/22	Decision	Approved the Revised Gifts and Hospitality, Conflicts of Interest and Whistleblowing Policies.	
D/09/23	Decision	Approved the Risk Management Strategy.	
A/09/01	Action	The process for the closure of risks on the Corporate Risk Register to be reviewed in light of the comments made by Mr Thompson.	Mrs Featherstone

9.	Quality & Performance
9.1	<ul style="list-style-type: none"> Quality and Performance Committee Chair's Report <p>Mr Bury provided an update on the key items considered at the Quality and Performance Committee on the 9th September 2020. It was highlighted that there had been a number of safeguarding reports considered at the meeting namely the Children's Home Assurance Report 2020, Looked After Children Annual Report 2019/20 and the Safeguarding Children and Adults at Risk Annual Report 2019/20 which had illustrated the good work of the Safeguarding team.</p>
9.2	<ul style="list-style-type: none"> Quality Report <p>Mrs Jackson submitted the latest Quality Report to the Governing Body.</p>
9.3	<p>It was reported that the Quality Dashboard provided an overview of: -</p> <ul style="list-style-type: none"> Corona virus including Phase 3 recovery processes; Provider updates; Public Health update; General Practice update; Continuing Healthcare update; Residential Care/Nursing Home update; Performance Report.
9.4	<p>Mr Blandamer presented the latest Performance report to the Governing Body. <i>Mrs Tickle and Mr Aston from the Commissioning Team were in attendance for this item.</i></p>
9.5	<p>It was reported that for the Clinical Commissioning Group (CCG) to commission an effective and sustainable health care service it needed robust systems which enable performance monitoring of both the CCG and the services it commissions.</p>
9.6	<p>The purpose of this report is to provide an updated position on the CCG's performance against the national performance indicators set out in the NHS Constitution, as monitored by NHS England. The report presented the CCG's</p>

	performance position for June 2020 and outlines any proposed changes to performance at a national level. In light of the current Coronavirus pandemic (COVID-19), the report also included reference to the impact of this on activity and performance levels, where this was known.
9.7	It was highlighted that, of the indicators presented in the dashboard at Appendix A, the most recently published data showed achievement against sixteen out of a total of thirty eight performance indicators. It was noted that data collection and publication was currently suspended for ten of these measures. The main body of this report focused on those indicators where under-performance in the most recently published data was noted. Appendix B outlined the Covid-19 Data Collection Changes.
9.8	Mrs Tickle and Mr Aston discussed the Endoscopy Briefing Paper which was included at Appendix C of the report.
9.9	It was reported that during two months of lockdown as a result of Covid-19, non-emergency NHS care was postponed, therefore some patients were now waiting longer than normal for elective care and diagnostic services, including endoscopy. In addition, some people were reluctant to attend hospital appointments due to concerns about catching the virus.
9.10	It was highlighted that Endoscopy capacity had now become the single most pressing diagnostic issue both locally in Greater Manchester (GM) and nationally with capacity further hindered by the need to make clinical and waiting areas 'Covid-19 safe'. Endoscopy services across Greater Manchester were reported to be operating at approximately 30% of normal capacity.
9.11	Table 1 of the report demonstrated the latest position for the CCG as at the end of June 2020 where the total waiting list size for endoscopy was 974 Bury patients of which 60% had waited over six weeks.
9.12	It was reported that a Greater Manchester Elective Care Board undertook a stocktake of the key issues raised by Greater Manchester providers that have the potential to improve productivity. The issues identified were space limitations, staffing and funding, filter systems and air exchange units, equipment and laboratory capacity.
9.13	It was highlighted that Greater Manchester organisations agreed to work together as part of the recovery process on a collective approach to the endoscopy waiting list. Providers across Greater Manchester have developed individual recovery plans with an aim to maximise available capacity and productivity. This has been further supported by the Greater Manchester Endoscopy Clinical Reference Group, with gastroenterology representation from all Greater Manchester providers sharing clinical practice in relation to recovery and developing standardised approaches where possible, for example clinical prioritisation criteria, referral guidelines and IPC approaches.
9.14	The ongoing discussions/actions with the Independent Sector/Northern Care Alliance were outlined, including the support being provided by the CCG.
9.15	In terms of risks associated with this work, these included: - <ul style="list-style-type: none"> • Greater Manchester leading and driving the system-wide initiatives such as IS capacity and demand through the Single System Management and the

	<p>associated risk around timelines for implementation and the level of impact across localities.</p> <ul style="list-style-type: none"> • Confidence of patients to attend appointments. • Risk of second peak of Covid-19 and local outbreaks. • Support for business cases e.g. Community Diagnostic Hub. • Workforce – Covid-19 impact. • Timelines for the implementation of new initiatives e.g. Patient Initiated Follow up (PIFU) and pathway redesigns. • Estates and workforce requirements to increase capacity. • Sustainability of IS (smaller community providers) and financial viability of locality contracts.
9.16	A general discussion took place regarding the Endoscopy elements of the paper and ensuring that patients are getting the appropriate levels of care.
9.17	Mr Blandamer commented that he would be happy to provide a further Deep Dive as part of future Performance Reports to the Governing Body.
	<ul style="list-style-type: none"> • Workforce Race Equality Standard (WRES) Report
9.18	Mr Little submitted a report to provide an update on the CCG's compliance with the Workforce Race Equality Standard (WRES) for 2019-20.
9.19	It was reported that NHS England and Improvement had previously advised they had suspended the WRES data collection process for 2020 due to Covid-19. However, as Covid-19 has highlighted the critical importance of workforce equality, the WRES implementation, including data collections, had been re-instated.
9.20	It was highlighted that the CCG was required to upload its data to NHS England and Improvement by 31 st August 2020, which was completed, and has a duty to publish the data and accompanying report.
9.21	It was reported that the data has been summarised and a narrative has been included within the report and was presented to the Quality and Performance Committee at its meeting in September. The Committee reviewed the report and acknowledged that as the CCG workforce numbers are small, a minor change can have a bigger impact and therefore it is important to reflect on the actual numbers as well as the percentages. The EDHR advisor reassured the Committee that the changes are not a cause for concern at this time, but a watching brief should be maintained as the action plan is implemented.
9.22	The Governing Body was also advised that in addition to this national requirement, the CCG had also committed to participate in the Greater Manchester WRES reporting, and work was underway to collect data to support the metrics included within this additional return, which differed from the national requirements.
9.23	It was reported that furthermore, the CCG in partnership with Bury Council have commissioned an independent equalities review. Initial feedback was expected in early October 2020 with a full report scheduled for presentation to the Strategic Commissioning Board (SCB) later in the year. Dr Schryer enquired about the timescales for this report being submitted to the SCB. Mr Little commented that this was likely to be before the end of the year or January 2021 at the latest.

9.24	Additionally, the Governing Body was reminded that WRES also featured as one of the indicators within the NHS Outcomes Framework. This metric was concerned with provider compliance with the WRES standard and the CCGs ability to influence and improve this as a system leader. Subsequently there have been occasions where, as a CCG, Bury had been in the lowest quartile nationally for the WRES rating.		
9.25	It was noted that the WRES action plan, which formed a small part of the overall Equalities Agenda, would be reviewed in the context of the recommendations from the Equalities Review. Additionally, the risk in relation to capacity to deliver a comprehensive EDHR programme would be monitored through the Quality and Performance Committee.		
ID	Type	The Governing Body:	Owner
D/09/24	Decision	Noted the Quality and Performance Committee Chair's Report.	
D/09/25	Decision	Considered and provided feedback on the Quality Dashboard.	
D/09/26	Decision	Noted the focus areas raised on the Quality Dashboard.	
D/09/27	Decision	Noted the recommendations made and took action where required on the Quality Dashboard.	
D/09/28	Decision	Noted the Performance Report.	
D/09/29	Decision	Received the Workforce Race Equality Standard (WRES) Report as recommended by the Quality and Performance Committee.	
D/09/30	Decision	Noted the data as presented in the WRES Report.	
D/09/31	Decision	Noted the supporting narrative in the WRES Report.	
D/09/32	Decision	Noted the draft action plan and supported the refresh once learning points from the Equalities Review were known.	
D/09/33	Decision	Approved the publication of the WRES report on the CCG website.	
D/09/34	Decision	Noted that the Equalities Review would be progressed through the Strategic Commissioning Board once it is available.	

10.	Committee Chair Reports		
10.1	<p>a) Primary Care Commissioning Committee</p> <p>Mr Bury provided an update from the Primary Care Commissioning Committee that had taken place earlier that day (23rd September 2020). The key discussion items were outlined.</p>		
ID	Type	The Governing Body:	Owner

D/09/35	Decision	Noted the Primary Care Commissioning Committee update.	
---------	----------	--	--

11.	Closing Matters		
11.1	Dr Schryer thanked members for their contributions and summarised the main discussion points.		
ID	Type	The Governing Body:	Owner
D/09/36	Decision	Noted the information.	

Next Meeting	25 November 2020, 3 p.m. via Microsoft Teams
Enquiries	Emma Kennett, Head of Corporate Affairs and Governance. 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/09/01	The process for the closure of risks on the Corporate Risk Register to be reviewed in light of the comments made by Mr Thompson.	Mrs Featherstone		October 2020	Closure of risks has been reviewed operationally and feels an appropriate process. In regard to the specific risk this action refers to, closure was appropriate as the risk related specifically to failure to achieve a performance measure which was subsequently removed. Greater emphasis will be made to ensure it is the actual risk that is being captured and managed and not the delivery of a target which is monitored through other arrangements.