

Meeting: Governing Body (Virtual Meeting)			
Meeting Date	22 December 2021	Action	Approve
Item No.	3	Confidential	No
Title	Minutes of the Last Meeting and Action Log		
Presented By	Dr Cathy Fines, CCG Chair		
Author	Emma Kennett, Head of Corporate Affairs and Governance		
Clinical Lead	-		

Executive Summary
<p>The minutes of the Public meeting held on 22 September 2021 are presented as an accurate reflection of the previous meeting 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 22 September 2021 as an accurate record; • Note the updates provided against the actions

Links to CCG Strategic Objectives	
SO1 - To support the Borough through a robust emergency response to the Covid-19 pandemic.	<input checked="" type="checkbox"/>
SO2 - To deliver our role in the Bury 2030 local industrial strategy priorities and recovery.	<input checked="" type="checkbox"/>
SO3 - To deliver improved outcomes through a programme of transformation to establish the capabilities required to deliver the 2030 vision.	<input checked="" type="checkbox"/>
SO4 - To secure financial sustainability through the delivery of the agreed budget strategy.	<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 N/A	

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

Implications						
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"/>
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		
Author	Emma Kennett, Head of Corporate Affairs & Governance		
Version	v0.1		
Target Audience	Members of the Governing Body		
Date Created	22 September 2021		
Date of Issue	September 2021		
To be Agreed	TBC		
Document Status (Draft/Final)	Draft		
Description	Minutes of the Governing Body – 22nd September 2021		
Document History:			
Date	Version	Author	Notes
22/09/2021	1	Emma Kennett	Issued to the Chair for review.
Approved:			
Signature:			Approved. Dr Cathy Fines, Chair

Governing Body Committee

MINUTES OF MEETING

Governing Body – 22 September 2021, 15:00 – 16:30

Chair – Dr Cathy Fines

ATTENDANCE

Members	
Dr Cathy Fines	Chair
Mr Will Blandamer	Executive Director of Strategic Commissioning
Mrs Fiona Boyd	Registered Lay Nurse of the Governing Body
Mr Peter Bury	Lay Member
Mrs Sam Evans	Executive Director of Finance
Mr Howard Hughes	Clinical Director
Mr David McCann	Lay Member for Patient and Public Involvement
Mr Peter Thompson	Secondary Care Clinician
Mr Chris Wild	Lay Member - Finance

Others in attendance	
Ms Catherine Jackson	Director of Nursing & Quality Improvement
Ms Lesley Jones	Director of Public Health, Bury Council
Mr Sam McVaigh	Director of People & Inclusion, Bury Council (for item 8d)
Mrs Emma Kennett	Head of Corporate Affairs & Governance
Ms Mariam Zbadi	Public Member

MEETING NARRATIVE & OUTCOMES

1	Welcome, Apologies And Quoracy
1.1	The Chair welcomed those present and noted that apologies for absence had been received from: <ul style="list-style-type: none">Mr Little, Chief Officer
1.2	The meeting was declared quorate and commenced.
1.3	The Chair commented that this was her first Governing Body meeting as Chair since commencing the role on the 1 st September 2021. The Chair thanked Dr Schryer for all of his hard work during his time as Chair and wished him well for the future. The Chair also thanked the CCG membership for the opportunity to undertake the Chair role until the 31 st March 2022.

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.

2.3 **Declarations of interest from today's meeting**
Mr Thompson reported that he had commenced working for Walsall Manor NHS Trust as an advisor on Maternity Governance and would be completing a revised Declaration of Interest form to this effect. It was noted that this interest did not relate to any of the agenda items on today's Governing Body agenda.

2.4 There were no declarations of interest from today's meeting raised.

2.5 **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.	
A/09/01	Action	Mr Thompson to complete an revised Declaration of Interest form to include reference to role as advisor on Maternity Governance for Walsall Manor NHS Trust	Mr Thompson

3 Minutes Of The Last Meeting And Action Log

3.1 **Minutes**
The minutes of the last meeting held on 28 July 2021 were considered and agreed as a correct record.

3.2 The Action Log was updated as follows:-

- A/05/03 - Further detail in relation to the ICS proposals/next steps/engagement to be shared with the Governing Body and Strategic Commissioning Board in September 2021. It was noted that a verbal update was included on today's meeting agenda.

ID	Type	The Governing Body:	Owner
D/09/02	Decision	Approved the minutes of the meeting held on 28 July 2021 as a true and correct record and noted the update in regards to the actions as detailed.	

4 Chief Officer and Chair Update

4.1 Mr Blandamer and Dr Fines gave an update on the latest CCG developments as follows: -

- The latest Covid-19 infection rates for the borough were outlined including the number of patients being admitted to local hospitals with the virus.
- Good progress continued to be made in respect of the Covid-19 vaccination programme. It was noted that the youngest cohort (ages 18-29) currently had the lowest uptake figures which was expected in line with the order in which vaccines were rolled out across the cohorts.
- Bury had one of the best vaccination rates in Greater Manchester for its Care Home Staff which was a credit to the homes and the engagement work undertaken within this area.

	<ul style="list-style-type: none"> The next phase of the vaccination programme was commencing in terms of administering the Covid-19 booster jabs to eligible groups. It was reported that there were plans to co-administer these alongside the seasonal flu vaccines with operational plans being finalised. Work was underway with local schools to commence the Covid-19 vaccination programme for 12-15 year olds. It was anticipated that this phase of the programme would be completed by the October half term break. There were potential risks from a staffing perspective as School and District Nurses were being asked to deliver this programme meaning some of the other work within those teams may be impacted upon. This aspect would be kept under review. Pressures continued to be observed in respect of Urgent Care. Positive interventions had been carried out in conjunction with the Northern Care Alliance in respect of hospital flows which had included reviewing existing deflection and discharge arrangements. This work linked into the Winter Planning arrangements which were currently being worked through with the first submission due this week. Mrs Featherstone, Deputy Director of Governance & Assurance had left the CCG/Council to take up a new role at another NHS organisation. Mrs Featherstone was commended for all of her efforts during her time working in Bury and Governing Body members wished her well for the future.
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ID	Type	The Governing Body:	Owner
D/09/03	Decision	Noted the verbal update.	

5 Public Question in relation to the agenda

5.1	<p>There had been no public questions received or submitted for discussion or review ahead of the meeting. There was however one Public Member in attendance and the following question was raised: -</p> <ul style="list-style-type: none"> I am having trouble finding the relevant colleague. I have tested the online user experience and found it fragmented and lacking in terms of Accessibility Standards and Self Service, which leaves patients/users powerless over their healthcare journey. The Bury CCG's Governing Body Meeting papers of July 2021 https://www.buryccg.nhs.uk/download/governing_body_papers/2021-01-27/AI-6-Intregrated-Care-System-Update.pdf highlight priority around this, as it mentions that one of the strategic objectives is "To deliver innovation, digital and data transformation" - who leads on this? I am keen to work more closely with your digital team to present our analysis and get your feedback. What's the best way forward? Could you please advise/connect me to the relevant team/stakeholder?
5.2	<p>It was noted that Ms Kate Waterhouse, Joint Chief Information Officer, Bury Council & Bury CCG would be the most appropriate contact for this area. Mrs Kennett agreed to forward the contact details on following the Governing Body meeting.</p>

ID	Type	The Governing Body:	Owner
D/09/04	Decision	Noted the update provided and	
A/09/02	Action	Contact details for Ms Waterhouse to be provided.	Mrs Kennett

6 Integrated Care System Update

6.1	Mr Blandamer provided an update to the Governing Body on the latest Integrated Care
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6.2	<p>System (ICS) developments. It was reported that: -</p> <ul style="list-style-type: none"> • Work continued at both Greater Manchester and locality level in respect of the transition from CCG to ICS. • A Shadow Locality Board had been established in Bury with the inaugural meeting scheduled to take place on the 4th October 2021. Invitations had been issued in line with the agreed Terms of Reference. • Good work was being undertaken by the Integrated Delivery Board in Bury in relation to the transformation programme. • A series of workshops had been arranged in relation to the system wide performance arrangements with a new meeting looking to be established between January – March 2022. • Mr Hughes and Dr Patel were leading the work of the Clinical and Professional Senate with a timescale of January 2022 in terms of some form of shadow arrangements being in place. • The Strategic Finance Group continued to meet and there would be a significant programme of work on the horizon in respect of the CCG close down arrangements. • Further work/understanding was required in relation to the financial flows and decision levels in terms of what this will look like as part of the future ICS arrangements. A submission on the local progress was required to be made to Greater Manchester this week. <p>Dr Fines commented that there was a significant amount of work being undertaken within this area which was in addition to the other system pressures.</p>
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ID	Type	The Governing Body:	Owner
D/09/05	Decision	Noted the update	

7a	Finance Contracting and Procurement Committee Chair's Update		
7.1	<p>A verbal update was provided by Mr Wild on the last Finance, Contracting and Procurement Committee meeting that took place on the 16th September 2021. It was reported that: -</p> <ul style="list-style-type: none"> • A significant piece of work had been undertaken in relation to CCG contracts in order to ensure that robust arrangements remained in place beyond 31st March 2022. There had been a need to make sure contracts were sufficient to ensure that services continued to be delivered and were not excessive in terms of contract length/financials. • A paper in relation to GP Out of Hours Commissioning Intentions 2022-23 was submitted however but was deferred pending further information/assurances being provided to the Committee. 		
7.2	<p>Dr Fines enquired about the average length of time that contracts were being rolled over for in order to satisfy the conditions of the ICS. Ms Evans reported that these were on average for a 2 year period however in some cases did span across 3 years.</p>		
ID	Type	The Governing Body:	Owner
D/09/06	Decision	Noted the verbal update.	

7b	Monthly Finance Report		
7.3	<p>Ms Evans presented the Month 5 CCG Finance report to the Governing Body.</p>		

7.4	It was reported that the national command and control framework put in place by NHS E / I in response to COVID-19 had continued into the first six months of 2021/22 (H1). The total CCG H1 allocation notified to month 5 was £176.2m. It was noted that this was made up of a baseline allocation of £171m, £1.9m of growth monies from GMHSCP, based on local pressures, £1.7m non-recurrently for the Primary Care and Mental Health elements of the Long Term Plan and COVID and £1.3m in Hospital discharge funding.
7.5	In accepting this allocation, the CCG must return a break-even position for H1 and any deviation from this would bring local and regional scrutiny. Based upon anticipated expenditure the CCG would need to deliver £2.1m of QIPP to achieve break even in H1. There would be formal regional reviews of organisational positions at month 3, month 5 and month 6, to ensure that growth funding was allocated appropriately and to ensure whole system break even.
7.6	It was highlighted that at month 5, the CCG was reporting a year to date and forecast outturn breakeven position post anticipated recoverable cost reimbursements. Pre reimbursement the CCG is reporting a forecast £1.5m deficit position, made up of a £3.3m overspend in CHC and small overspends in community and mental health services offset by a £1.5m underspend in other programmes and £0.6m in primary care.
7.7	It was noted that CHC was still experiencing significant pressures in month five, despite the ongoing reviews of joint funded patients, Mental Health and children's placements and further emphasised the requirement to progress the implementation of the CHC database. Given the importance of the work and absences in the CHC team, resource from across other existing CCG and Council teams, and from another GM CCG continues to be utilised.
7.8	It was reported that the CCG identified QIPP schemes totalling £1.1m (0.6% of allocation) for the first half of the year against an overall QIPP requirement of £2.1m. In month 3 non-recurrent mitigations were identified to address the shortfall supporting the delivery of a break even position and this has been necessary again in month 5 to support the non delivery of CHC QIPP. Remaining programmes, CHC aside, have begun to deliver benefits from month 4 in line with plan. The plan anticipates CHC QIPP in month 6 and in H2 and this is considered high risk for achievement.
7.9	The CCG had delivered on the Better Payment Practice Code with 99.5% of supplier invoices paid within target. The CCG had also delivered its cash balance target to have no more than 1.25% of its maximum monthly cash drawdown remaining at the end of the month.
7.10	It was highlighted that the CCG was still awaiting the Planning Guidance/allocation which would need to be implemented in October 2021. It was anticipated that the Hospital Discharge Programme funding would continue into the next period. Mrs Jackson enquired whether this would be on the same level/basis as now. Mrs Evans envisaged that this would be on the same basis.
7.11	Dr Fines enquired whether it was usual practice for Planning Guidance/allocations to be made this late. Ms Evans explained that this wasn't the 'norm' and provided some background as to why the delays had occurred.

ID	Type	The Governing Body:	Owner
D/09/07	Decision	Noted the Month 5 forecast financial position of breakeven.	
D/09/08	Decision	Noted the risks around the financial position specifically linked to CHC costs and activity, the ongoing lack of QIPP delivery in this area and the remaining risk to the forecast break even position.	
D/09/09	Decision	Noted the delivery of financial performance targets for the year.	

8a	Quality and Performance Chairs Report		
8.1	Mr Bury presented an update report which outlined the key information discussed and recommendations made at the Quality and Performance Committee meeting held on 8 th September 2021		
ID	Type	The Governing Body:	Owner
D/09/10	Decision	Noted the update report provided.	

8b	Quality Report		
8.2	Mrs Jackson submitted the latest Quality Dashboard to the Governing Body which provided an overview of the following areas: - <ul style="list-style-type: none"> • Provider Updates; • CHC/complex care update; • Independent/Small value contracts ; • Covid19; • Key actions/learning/successes. 		
8.3	It was reported that the Registered Manager of Gorseley Clough in Bury (Craig Priestley) had recently been awarded a Chief Nursing Officer Silver Award. The award was presented to Craig by Ruth May, Chief Nursing Officer NHSE. This is only the second time this award has been received within Greater Manchester and highlighted the high level of care, hard work, achievement, and partnership working Craig and his team have undertaken during the challenging months of the COVID pandemic. Dr Fines emphasised that this was an amazing achievement for the individual, home and locality.		
8.4	Mrs Jackson provided an update on the work being undertaken to support the transition of a Nursing Home to a Residential Home in ensuring that all patient needs and governance arrangements are being met.		
ID	Type	The Governing Body:	Owner
D/09/11	Decision	Noted the report	

8c	Performance Report		
8.5	Mr Blandamer presented the latest performance report to the Governing Body.		
8.6	It was highlighted that the purpose of this report is to provide a summary position on the CCG's performance against the national performance indicators set out in the NHS		

	Constitution, as monitored by NHS England.
8.7	The report presented the CCG's performance position for June 2021 and the Quarter 1 outturn and outlined any proposed changes to performance at a national level.
8.8	It was noted that following submission of Bury's operational plan for the first six months of 2021-22, the report also provides a summary of activity levels to June against the planned position.
8.9	The dashboard presented at Appendix A showed the most recently published data along with those measures for which data collection is currently suspended.
8.10	It was reported that outpatient activity had been significantly above the planned level during Quarter 1 though elective activity was a little below plan. Activity in Quarter 2 would determine whether providers can access the Elective Recovery Fund (ERF) following the target having increased from 85% of the 2019-20 level in Quarter 2 to 95%. Overall, diagnostics activity was above plan though the breakdown showed endoscopy activity to be below the planned level whilst imaging is above.
8.11	The CCG and locality partners continued to progress the development and implementation of a transformation plan for elective care and a project plan and update report were recently presented to the Integrated Delivery Collaborative (IDC) Board and the Strategic Commissioning Board (SCB). The report included an overview of the improvement work currently underway in orthopedics as an exemplar to a different way of addressing waiting list pressures and supporting patients.
8.12	The locality developments complemented the Greater Manchester (GM) programme and includes the implementation of the Waiting Well framework for which a delivery group has been established in Bury. The framework would be implemented in orthopedics initially with patients directed to information primarily via the online Bury Directory. Bury's programme lead presented the approach at a recent GM-led learning event at which it was well received as the locality is seen to be a pathfinder across GM through integrating the GM perspective with local systems and services.
8.13	It was reported that in conjunction with the Bury Care Organisation (BCO), opportunities in cardiology, urology and respiratory were also under review. This included a successful bid for funding to implement a cardio prehabilitation service (preparation for surgery) for which planning can now commence.
8.14	Although the overall elective waiting list continues to grow, there was a further reduction in June in the number of patients waiting more than 52 weeks to commence treatment, with the number of breaches having reduced by 23% since March 2021 and with the largest reduction seen in trauma and orthopedics (T&O). However, June also saw an increase in the number of pathways exceeding 104 weeks.
8.15	With regard to diagnostics, there was a slight dip in performance for Bury patients in June. Breaking this down, most pressure currently existed in endoscopy and echocardiography though this is offset by a month on month improvement in imaging performance. For echocardiography, the NCA had confirmed that agency staff and additional slots have now been secured and this should have a positive impact on performance in future months. It was also confirmed that the GM modular endoscopy unit based at the FGH site has been extended until December 2021.
8.16	Planning for the Community Diagnostic Hub (CDH) programme continued and the CCG

	is fully engaged in this work to ensure that Bury patients have equal access to CDH provision. Alongside this, a task and finish group is also meeting to progress the development of a diagnostics strategy for Bury which will include provision for local pathology and phlebotomy services too.
8.17	In terms of Urgent Care, at Pennine Acute Hospitals Trust (PAHT), performance remained below target for the 4-hour wait standard, though reduced performance was reflected across other GM adult sites too. In Quarter 2, (to 30 th August) the FGH site specifically is the third-best performing GM adult site for Type 1 activity with performance at Stockport having improved recently.
8.18	In relation to Mental Health, the dementia diagnosis standard continued to be achieved for Bury patients. The business case to re-establish a GP-led Cognitive Impairment Model was approved by the SCB in August and implementation of this would now commence. This included the identification of a Dementia Clinical Lead in each Primary Care Network (PCN) who would attend and cascade relevant training.
8.19	It was noted that the PCFT had highlighted further significant operational pressures due to increased demand and staff absence. As for the Children and Young People's (CYP) service, most pressure was felt within the inpatient services and particularly the Psychiatric Intensive Care Unit (PICU) and out of area placements. PCFT had advised that the pressures were reflected across the North West with independent sector providers operating at capacity too. Some service business continuity plans have been invoked with staff redeployed temporarily to support inpatient services.
8.20	The SCB in September approved additional Mental Health Investment Standard (MHIS) investment into the Community Mental Health Team (CMHT) services, with a focus on Tier 2 as a jointly agreed priority with PCFT.
8.21	Dr Fines commented that it was clear that the acute sector was under immense pressure however highlighted that the current endoscopy performance was positive.
8.22	Mrs Boyd referred to the 52 Week Waits performance and enquired whether the CCG was confident that trusts knew their own data and that there were no hidden waiting lists. Mr Blandamer stated that there had been a significant amount of scrutiny in this area and he was confident that information was accurate. Mrs Jackson reported that there were other assurance processes in place within this area which provided additional scrutiny.

ID	Type	The Governing Body:	Owner
D/09/12	Decision	Received the performance update, noting the areas of challenge and action being taken.	

8d	Workforce Race Equality (WRES) Report
8.23	<i>Mr McVaigh, Director of People & Inclusion, Bury Council was in attendance for this item.</i>
8.24	Mr McVaigh presented a report that provided an update on the CCG's compliance with the Workforce Race Equality Standard (WRES) 2020-21, the Race Disparity ratio and Inclusive Recruitment 6 high impact actions.
8.25	The data had been summarised and a narrative has been included within the report and is supported by a number of appendices.

8.26	The Governing Body was reminded that as the CCG workforce numbers were small, a minor change can have a bigger impact and therefore, whilst there is more to do, the statistical significance needs to remain in view through all actions.		
8.27	Dr Fines enquired what the arrangements would be within this area next year in light of CCGs no longer being in existence after 1 st April 2022. Mr McVaigh explained that the WRES was an NHS statutory return and anticipated that this would sit with the ICS in future.		
ID	Type	The Governing Body:	Owner
D/09/13	Decision	Received the report;	
D/09/14	Decision	Noted the data as presented;	
D/09/15	Decision	Note the supporting narrative;	
D/09/16	Decision	Note the updated action plans;	
D/09/17	Decision	Approved the publication of the report on the CCG website.	

8e	Patient Services Report
8.28	Mr Blandamer submitted the latest Patient Services Report to the Governing Body.
8.29	The report provided information and statistical data on all Patient Services activity that was received from NHS Bury CCG patients between 1 April 2021 and 30 June 2021 (Quarter 1, 2021 – 2022).
8.30	<p>Within this period, Patient Services received 221 contacts, decreasing from 337 contacts in the previous reporting period. The following list provides the breakdown.</p> <ul style="list-style-type: none"> • 33 Freedom of Information requests; • 9 PALS contacts to the Contact Centre; • 123 PALS contacts direct to Patient Services ; • 19 Complaints; • 35 MP enquiries; • 0 Parliamentary and Health Service Ombudsman reviews; • 2 Compliments; • 0 Claims.
8.31	It was reported that 19 complaints were received between 1 April 2021 and 30 June 2021. Following the investigation of these cases, 4 complaints were upheld in full, 1 complaint was upheld in part, 2 complaints were not upheld, 6 complaints were withdrawn, 1 complaint was classed as other as this was referred for investigation to NHS England and 5 cases are ongoing.
8.32	35 MP enquiries were received between 1 April 2021 and 30 June 2021. Following the investigation of these cases, 26 MP Enquiries were closed following investigation, 2 were withdrawn and 7 cases are ongoing.
8.33	The report highlighted that NHS Bury CCG continues to perform at a consistently high level in responding to Freedom of Information requests within 20 working days. Between 1 April 2021 and 30 June 2021, 100% of requests received were responded

	to within this timeframe.		
8.34	Mr Blandamer commended Ms Farnworth-Collinge, Patient Services Case Officer for the high standard of work undertaken to support the work of CCG Patient Services. Mrs Jackson concurred with this testimony and commented that the Quality Team worked very closely with the Patient Services Team.		
ID	Type	The Governing Body:	Owner
D/09/18	Decision	Noted the report	

9a	Audit Committee Chair's Report		
9.1	Mr Wild presented to the Governing Body an update of the Audit Committee meeting held on the 3 rd September 2021.		
9.2	This paper 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 was discharging its responsibilities.		
ID	Type	The Governing Body:	Owner
D/09/19	Decision	Noted the report	

9b	Governing Body Assurance Framework (GBAF)		
9.3	Mr Wild submitted the latest Governing Body Assurance Framework (GBAF) to the Governing Body.		
9.4	The end of year position was reported to the Audit Committee in June 2021 and reflected in the Annual Report approved by the Governing Body.		
9.5	In preparing the 2021/22 GBAF, the strategic objectives as set out in the corporate plan have been retained, along with the eight remaining risks at the closing of the 2020/21 reporting period identified as needing to be carried forward into 2021/22 by risk owners.		
9.6	<p>All 8 risks have been reviewed in July 2021, to assure the continued validity of the risk, which has resulted in the following changes:</p> <ul style="list-style-type: none"> • 2 new risks being added to the framework. <ul style="list-style-type: none"> • Risk of in-year deficit. • Risk that the locality doesn't receive sufficient resources within new architecture to meet population needs. • 1 risk being removed and superseded by a more relevant risk. <ul style="list-style-type: none"> • Risk that the CCG is unable to meet financial duties over the medium term. • 2 risks being moved and transferred to the CCG's Operational Risk Register. <ul style="list-style-type: none"> • Lack of effective working with key partners which influence the wider determinants of health. • Lack of effective engagement with communities. 		
ID	Type	The Governing Body:	Owner
D/09/20	Decision	Noted the report.	

9c Corporate Risk Register			
9.7	Mr Wild presented the latest Corporate Risk Register to the Governing Body. It was reported that in line with the Risk Management Strategy, the Audit Committee is required to retain oversight of any risks with a net risk score of 15 and above.		
9.8	These risks are classified as significant were they to materialise and therefore the Committee's review of these ensures that they have received independent scrutiny.		
9.9	There are currently 3 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: <ul style="list-style-type: none"> • Autistic Spectrum Conditions Assessment – Neurodevelopmental assessments; • Control of Patient Information (COPI) Regulations – Compliance (New Risk); and • Datix: Resource requirements to maximise optimisation. 		
9.10	The Audit Committee considered the report presented at its meeting on the 3 September 2021, noted the new risk added and agreed that the level of assurance against the risks was sufficient and as such recommended the report to the Governing Body.		
ID	Type	The Governing Body:	Owner
D/09/21	Decision	Received the Corporate Risk Register.	

9d Policies			
9.11	Mr Wild presented the following policies for consideration and approval. <ul style="list-style-type: none"> • Conflicts of Interest Policy • Gifts and Hospitality Policy • Whistleblowing Policy 		
9.12	It was reported that the policies had been reviewed to ensure they were still reflective of current legislation and organisational context, with the main changes reflecting mainly cosmetic amendments to reflect updated role titles and meetings.		
9.13	It was highlighted that the policies were reviewed by the Audit Committee at their meeting on 3 rd September 2021. The Audit Committee reviewed the policies as presented and as such recommended them to be submitted to the Governing Body for approval.		
9.14	For ease of reading the amendments were highlighted using the track changes functionality.		
ID	Type	The Governing Body:	Owner
D/09/22	Decision	Approved the revised Gifts and Hospitality, Conflicts of Interest and Whistleblowing policies	

10 Strategic Commissioning Board Chair's report/minutes	
10.1	The paper included the approved minutes of the Strategic Commissioning Board (SCB) meeting held on the 7 th June 2021 for information.

10.2	The paper also summarised the decisions taken at the SCB meeting on the 6 th September 2021 which need to be ratified by the Governing Body in light of the meeting not being quorate.		
10.3	It was agreed by the Co-Chairs of the SCB that the meeting would still proceed outside of the CCG Standing Orders in line with Section 3.9 of the CCG Constitution given the lateness of quoracy becoming apparent on the day of the meeting. It was noted that rescheduling the meeting/seeking an alternative governance route/s at this late stage would have been problematic and could have further delayed the decision-making process given the tight timescales associated with some of the reports/decisions required.		
10.4	Dr Fines outlined the decisions taken at the SCB meeting on the 6 th September 2021 as described in Section 4.0 of the report. In summary, decisions had been taken in relation to the: -		
	<ul style="list-style-type: none"> • Integrated Care System; • Proposal to manage funding requests to NHS Bury CCG for spot purchases of services; • Review of Armed Forces Covenant; • Care at Home Contract Award; • Designated Beds – Shared Provision; • Mental Health; • Greater Manchester Contracting Principles and Extension of Bury Contracts. 		
ID	Type	The Governing Body:	Owner
D/09/23	Decision	Noted the minutes of the SCB meeting held on the 7 th June 2021	
D/09/24	Decision	Ratified the decisions made by the SCB on the 6 th September 2021.	

11	Primary Care Commissioning Committee Chairs Report		
11.1	Mr Bury gave a summary of the Primary Care Commissioning Committee meeting which took place on the afternoon of 22 September 2021 and highlighted the key points.		
ID	Type	The Governing Body:	Owner
D/09/25	Decision	Noted the verbal Primary Care Commissioning Committee Update.	

12	AOB and Closing Matters		
12.1	There were no other matters of business reported that had not been covered elsewhere in the agenda and the meeting was closed.		

Next Meeting	Governing Body Meeting (in Public): 26 January 2022
Enquiries	Emma Kennett, Head of Corporate Affairs and Governance. Emma.kennett@nhs.net

Governing Body Action Log – September 2021 Update

Status Rating



- In Progress



- Completed



- Not Yet Due



- Overdue

Title	Action	Lead	Status	Due Date	Update
A/09/01	Mr Thompson to complete a revised Declaration of Interest form to include reference to role as advisor on Maternity Governance for Walsall Manor NHS Trust	Mr Thompson		October 2021	
A/09/02	Contact details for Ms Waterhouse to be provided	Mrs Kennett		October 2021	Contact details for Kate Waterhouse were passed on to Public Member in attendance at meeting.