

Title of Meeting:	Governing Body Meeting			Agenda Item: 9.3								
Date of Meeting:	25 June 2020			<table border="1"> <tr> <th colspan="2">Session (Tick)</th> </tr> <tr> <td>Public</td> <td>X</td> </tr> <tr> <td>Private</td> <td></td> </tr> <tr> <td>Workshop</td> <td></td> </tr> </table>	Session (Tick)		Public	X	Private		Workshop	
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Public	X											
Private												
Workshop												
Paper Title:	Quality and Clinical Governance Committee Key Messages											
Responsible Governing Body Member Lead Kate Kennady, Lay Member for PPE and Chair of the Quality & Clinical Governance Committee		Report Author and Job Title Kate Kennady, Lay Member for PPE and Chair of the Quality & Clinical Governance Committee										
Purpose (this paper if for)	<table border="1"> <tr> <th>Decision</th> <th>Discussion</th> <th>Assurance</th> <th>Information</th> </tr> <tr> <td></td> <td></td> <td>X</td> <td></td> </tr> </table>				Decision	Discussion	Assurance	Information			X	
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		X										
Has the report (or variation of it) been presented to another Committee / Meeting? If yes, state the Committee / Meeting: No.												
Executive Summary <p>The Quality and Clinical Governance Committee has been established to provide oversight on any quality or equality impact relating to all commissioned services through its review and monitoring of quality surveillance metrics that may indicate an adverse impact on quality or safety and therefore require further mitigation to be considered.</p> <p>The Committee provides assurance to the Governing Body that any risk to equality and quality has been appropriately mitigated and how continuous improvement will be monitored. The Committee also monitors safeguarding and oversees the development of and approve policies relating to HR and Corporate.</p> <p>The following assurance report details key topics discussed at recent meetings.</p>												
Recommendations <p>The Governing Body is asked to receive the report as assurance.</p>												
Monitoring <p>An assurance report on key topics discussed at the Quality and Clinical Governance Committee will be brought to each Governing Body meeting.</p>												
Any statutory / regulatory / legal / NHS Constitution implications		The Quality and Clinical Governance Committee is accountable to the Governing Body and is required to provide key messages from its meetings.										
Management of Conflicts of Interest		No conflicts of interest have been identified prior to the meeting.										
Communication / Public & Patient Engagement		Key Messages are published with the Governing Body Papers.										
Financial / resource implications		None identified.										
Significant Risks to Consider		No significant risks to consider.										
Outcome of Impact Assessments completed		Not applicable.										

Kate Kennady, Lay Member for Patient and Public Engagement and Chair of the Quality and Clinical Governance Committee

Quality and Clinical Governance Committee

Key Messages

The Quality and Clinical Governance Committee was held regularly over the past months due to Covid-19.

Key messages include:

- QCGC has met every 2 weeks but the remit has been to review and agree the actions on the Covid-19 Risk Register.
- We plan to re-establish the QCGC formal agenda from the beginning July 2020
- There has been significant activity around Care Homes including:
 - the compliance and completion of NHSE directive around provision of Infection Prevention and Control training for 100% of care homes this required a daily sit-rep for a 2 week period and following an intensive delivery programme was achieved.
 - A primary care requirement for 100% of homes to have a designated clinical lead, strengthened clinical pharmacy support and development of personalised care plans. This required a weekly sit-rep return, all actions have been completed and a Care Home DES (Directed Enhanced Service) has been developed.
 - The CCG is supporting NYCC and the CQC with the closure of one care home and the re-provision of suitable placements for its residents and the enhanced monitoring of another care home.
- A process for Covid-19 antibody testing for front line workers is being developed with our Acute providers supporting with the laboratory processing of tests.
- Covid-19 test and trace has been commenced and we are currently working with GP practices and care providers on the potential workforce implications this may have as a result of the new guidance regarding self-isolation of contacts for 14 days. We are advising on risk assessments, PPE and social distancing in the work environment.
- The quality and patient safety assurance process that we were operating regarding 2 of our acute providers with NHSE/I and CQC has had to be conducted differently due to Covid-19. The lead commissioners for each of these providers are attending virtual meetings but the CCG Chief Nurse is ensuring that we have regular input and feedback from the meetings.
- 6 members of staff will TUPE back in to NYCCG from Humber to re-join the CHC team.