

## NORTH YORKSHIRE CLINICAL COMMISSIONING GROUP

### GOVERNING BODY MEETING

Thursday, 25 June 2020 10:00 – 11:30

Virtual Meeting – Microsoft Teams

Present	
Dr Charles Parker	Clinical Chair (Chair)
Amanda Bloor	Accountable Officer
Dr Alistair Ingram	Vice Clinical Chair
Jane Hawcard	Chief Finance Officer
Wendy Balmain	Director of Strategy and Integration
Julie Warren	Director of Corporate Services, Governance & Performance
Sue Peckitt	Chief Nurse
Simon Cox	Director of Acute Commissioning
Ken Readshaw	Lay Member for Audit and Governance
Sheenagh Powell	Lay Member for Financial Performance (Deputy-Chair)
Kate Kennady	Lay Member for Patient and Public Involvement
Dr Ian Woods	Secondary Care Doctor
Dr Peter Billingsley	GP Governing Body Member
Dr Chris Ives	GP Governing Body Member
Dr Mark Hodgson	GP Governing Body Member
Dr Bruce Willoughby	GP Governing Body Member

Apologies	
None	

In Attendance	
Sasha Sencier	Senior Governance Manager and Board Secretary to the Governing Body
Tanja Entwistle	Corporate Project Officer

#### 1.0 Apologies for Absence

No apologies were received and the Governing Body was deemed quorate.

**The North Yorkshire CCG Governing Body:** Noted that no apologies had been received and that the NY CCG Governing Body meeting is quorate.

#### 2.0 Declarations of Interests in relation to the business of the meeting

The Chair reminded committee members of their obligation to declare any interest they may have on any issues arising at committee meetings which might conflict with the business of the Governing Body.

No Governing Body members declared any interest in relation to the business of the meeting.

**The North Yorkshire CCG Governing Body:** Noted no declarations of interest made in relation to the business of the meeting.

### **3.0 Governing Body Minutes and Matters Arising**

#### **3.1 NY CCG Governing Body Minutes – 30 April 2020**

Dr Charles Parker presented the Governing Body minutes from the meeting on 30 April 2020.

Governing Body Members noted no changes and the minutes were approved as a true and accurate record of the meeting.

**The North Yorkshire CCG Governing Body:** Approved the minutes of the meeting on 30 April 2020 as a true and accurate record.

#### **3.2 Matters Arising from the Minutes – 30 April 2020**

Dr Charles Parker noted that the action detailed within the matters arising had been partially completed. For completeness, the action was as follows:

- Contact made with Nigel Ayres of Healthwatch to invite him to attend the 'in public' meeting. Unfortunately, due to him not being in work at the moment the Chair asked if JW would speak to the Vice Chair in his absence. This was agreed but no dates were given to arrange this even after chasing. Julie Warren will pick this up again for the next 'in public' GB meeting.

**The North Yorkshire CCG Governing Body:** Accepted the matters arising as partially complete from the meeting on 30 April 2020 and noted an update regarding this at the next meeting in August 2020.

### **4.0 Reports from North Yorkshire Clinical Commissioning Group**

#### **4.1 Clinical Chair**

Dr Charles Parker presented the Clinical Chair's report and took the paper as read.

No comments or questions were received by the Governing Body.

**The North Yorkshire CCG Governing Body:** Noted the update from the Clinical Chair.

#### **4.2 Accountable Officer**

Amanda Bloor presented the Accountable Officer's report and took the paper as read. A verbal updated was also given.

It was noted that there is an improved position with regard to testing and personal protection equipment (PPE) however there have been some issues with regard to care home testing and facilities in Bradford have been withdrawn.

The North Yorkshire Outbreak Management Advisory Board, who has responsibility for outbreak management has been established. Amanda Bloor attends the meetings, chaired by a leader of North Yorkshire County Council (NYCC). The inaugural meeting was very helpful and focussed on scenario planning for the future and bringing system partners up to speed on delivery and operational issue.

Amanda Bloor thanked Sue Peckitt, Chief Nurse, the team and GP colleagues for their support with regard to care home compliance. This significant piece of work can be built on moving forward.

**The North Yorkshire CCG Governing Body:** Noted the update from the Accountable Officer.

### **4.3 Communications and Engagement Update**

Kate Kennady presented the Communications and Engagement that provides a review of the activities across the function over the last few months, with a focus on the CCG's response to Covid-19 and activities associated with the NYCCG. The report was taken as read and a verbal update was also given.

A Patient Partner Network meeting took place and good feedback was received with regard to the use of technology which is helpful to reduce the need for travel. The CCG asked attendees for their experiences in healthcare settings with GP or hospital virtual appointments and feedback included that virtual appointments were working well.

Julie Warren noted that on 5 June 2020 three members of the Communications team TUPED across to the CCG. The team members were previously working closely with the CCG so this was a seamless transition.

## **5.0 Quality and Performance**

### **5.1 Quality and Performance Report Update**

Julie Warren and Sue Peckitt presented a verbal update with regard to the quality and performance report.

The Governing Body received assurance that a report is being developed with support from Paul Donnelly, Senior System Contract Manager at the CCG. North Yorkshire data will not be received until after Q1 therefore the report will first be presented to the Governing Body at the meeting on 27 August 2020. Directors are reviewing indicators to understand need and routine assurance targets. The aim is to produce a focussed report and then an area providing more detail and challenge with a view to understanding what actions are being taking.

It was noted that some of the national targets were paused by NHSE due to Covid-19 and it is uncertain how these will be reported in the future, as they will be displayed as red. There are also issues with standard quality monitoring and metrics affected by Covid-19 and providers have been unable to provide the usual reporting to the CCG.

**The North Yorkshire CCG Governing Body:** Noted the Quality and Performance Report update.

## **6.0 Finance**

### **6.1 Finance Report**

Dr Charles Parker noted that due to sensitive detail in the report that the paper will be taken to the private session of the Governing Body. Jane Hawcard provided a verbal update.

The accounts for the three previous North Yorkshire CCGs have been audited with an unqualified opinion on all sets of accounts and all accounts and annual reports have been submitted to NHS England today.

The Governing Body noted that all three CCGs met financial targets. It was previously reported that NHS Hambleton, Richmondshire and Whitby (HRW) CCG and NHS Scarborough and Ryedale (SR) CCG received extra allocations as part of system working and allowed to meet financial targets. On that basis, Jane Hawkard thanked all staff involved in completing the final accounts and also closing down and setting up systems as part of the merger which was a significant piece of work.

Month 1 and 2 finance reporting is complex due to ongoing work with NHSE regarding Covid-19 reimbursement. Approximately £5m is required in Q1 and Q2 to break even and it is expected that NHSE will confirm reimbursement shortly. It is expected that Q3 and Q4 will show a similar position.

The Governing Body noted their appreciation regarding year end and the merger work, particularly as this pressured time and this was echoed by the External Auditors who were present at the Audit Committee.

**The North Yorkshire CCG Governing Body:** noted the finance update.

## **7.0 Strategy and Planning**

### **7.1 Communications and Engagement Strategy**

Julie Warren presented the paper and informed the Governing Body that sets out the NYCCG Communications and Engagement Strategy and engagement model.

The strategy has been developed from learning of the previous North Yorkshire CCGs, but taking into account the wider geography. The strategy is an iterative document and any changes that require to be made will be brought back to the Governing Body in line with the appropriate governance processes.

The Governing Body agreed that a good depth of work had gone into the development of the strategy, particularly around the involvement of members of the public. The strategy and model are well presented and it is good to see development around the increased use of social media.

The Governing Body queried the involvement of members of the engagement networks of the previous CCGs. It was noted that all previous engagement groups had been involved in the development of the model.

The Governing Body agreed that those socially disadvantaged are least likely to have access to virtual means of communication so additional support may be required for those that fall into this category.

The Governing Body queried how the strategy would be tested with key stakeholders. It was noted that Council of Members are due to agree the Strategic Objectives of the organisation on 9 July 2020 and the strategy will then be launched on the CCG website. The Governing Body agreed they are assured if Healthwatch have given good feedback.

The Governing Body queried how GP Practices would be engaged with moving forward. It was noted that the CCG is working on Protected Learning Time (PLT) events focussing engagement at a local level.

**The North Yorkshire CCG Governing Body:** Approved the Communications and Engagement Strategy.

## **7.2 Risk Management Strategy**

Julie Warren presented the Risk Management Strategy and informed that the CCG has a statutory and regulatory obligation to ensure that systems of control are in place to minimise the impact of all types of risk, which could affect patients, staff, public resources, and the function of the CCG. This includes both the risk to the organisation and the risk to those individuals to whom the CCG owes a duty of care.

The CCG's risk management strategy is designed to support the delivery of safe and effective health services for service users, staff and wider stakeholders.

The strategy has been developed with the Executive Directors and has been reviewed by the Audit Committee with a recommendation for the Governing Body to approve.

The Governing Body agreed that the strategy is a very comprehensive document which details a very good system of working. The Corporate Risk Review Group helps to embed risk into the culture of the organisation and the Governing body feel assured that this is being replicated from one of the previous CCGs.

**The North Yorkshire CCG Governing Body:** Approved the Risk Management Strategy.

## **7.3 Catterick Outline Business Case**

Wendy Balmain presented the paper that provides a summary of the Outline Business Case for the Catterick Integrated Care Campus proposal and asks for approval by the Governing Body to submit the Outline Business Care to NHS England for approval.

The proposal is for a joint health provision in Catterick particularly based on expansion of Garrison over the next 5 to 10 years.

The detailed outline business case attached details a summary of key information and this proposal has previously been to the Finance, Performance, Contracting and Commissioning Committee and the Governing Body.

The Governing Body noted that this proposal is part of long term plan in terms of the delivery of integrated care. The Strategic Objectives that are to be agreed by the Council of Members align to the ambition to support integrated care and to support the needs of the local population. This proposal will redefine care for those in the communities and will support improved outcomes for the local population.

It was noted that the CCG is in a parallel process with Ministry of Defence who are also taking their case for approval too. The next steps are for the proposal to go forward to the Cabinet Office.

Jane Hawkard presented the financial aspect of the proposal.

There is a requirement to consider affordability and value for money; however, it is clear there will be significant health and care benefits for a vulnerable population. The preferred option is to transfer the NHS capital allocation to the MoD under Section 2 (NHS Act 2006) agreement which reduces rental cost to the NHS and therefore is very good value for money and affordability. Due to Section 2, revenue costs are circa £330k and the CCG would use

potential cash releasing savings and mechanisms to make up the funding. Savings depends on a sustainable Primary Care model. The CCG has taken a prudent review potential savings through a sustainable Primary Care model and is estimating at £145k to support the proposal.

Future transformation funding will have to be bid for, but not for three more years before the CCG incurs revenue costs. There is a financial case for this proposal to be agreed, there is recognised value for money and the proposal is not unaffordable.

It was noted that the CCG does need to make a decision today but that further checks will be made to the Outline Business Case by NHS England.

The Governing Body discussed the proposal and noted that there were previous concerns raised at the Finance, Performance, Contracting and Commissioning Committee regarding the revenue gap, however the Governing Body now feel assured that a full and transparent explanation has been provided within the paper on how the revenue gap will be met through savings. The Governing Body also agreed that the scheme is an innovative investment and is particularly important in terms of supporting more vulnerable communities.

The Governing Body agreed to approve the Catterick Outline Business Case.

The Governing Body recognised the significant piece of work over several years in the development of the proposal and thanked those involved both internally and externally for their hard work and commitment.

**The North Yorkshire CCG Governing Body:** Approved the Catterick Outline Business Case.

## **8.0 Governance**

### **8.1 NY CCG Conflicts of Interest Policy**

Julie Warren presented the policy that sets out how the CCG will effectively manage conflicts of interest to ensure that the CCG maintains the public trust in the commissioning system.

The policy will ensure that the CCG can ensure that its commissioning decisions can withstand scrutiny and challenge. The policy should also provide confidence that the CCG commissioning decisions are robust, fair, and transparent and offers value for money.

**The North Yorkshire CCG Governing Body:** Approved the Conflicts of Interest Policy.

### **8.2 NY CCG Standards of Business Conduct Policy**

Julie Warren presented the policy that aims to protect the CCG and its officers from any suggestion of corruption, partiality or dishonesty by providing a clear framework through which the organisation can provide guidance and assurance that its officers conduct themselves with honesty, integrity and probity.

The Governing Body queried how the policy, alongside the Conflict of Interest Policy, would be embedded across the CCG. It was noted that a staff handbook is being developed and it will clearly be detailed within the handbook any areas requiring compliance.

**The North Yorkshire CCG Governing Body:** Approved the Standards of Business Conduct Policy.

### **8.3 West Yorkshire and Harrogate Memorandum of Understanding for Collaborative Commissioning**

Amanda Bloor presented the report that asks the Governing Body to adopt the objectives and principles of collaboration set out in the revised Memorandum of Understanding for

Collaborative Commissioning between WY&H CCGs ('the MoU') and agree to become an Associate Member of the WY&H Joint Committee of CCG.

It was noted that previously NHS Harrogate and Rural District CCG (HaRD CCG) was a full member of the Joint Committee, however moving to the North Yorkshire CCG the membership will change to an associate member which means that the CCG will be involved in discussions but will not have a vote and will not be bound by decisions made.

The Governing Body queried whether the North Yorkshire CCG would make a financial contribution to the project office as HaRD CCG previously did. Amanda Bloor confirmed that no contribution would be made to the WY&H project office but a contribution may need to be made to the Humber Coast and Vale Health and Care Partnership (HCV HCP), yet to be determined.

The Governing Body queried whether a financial contribution is made to the Northern CCGs Joint Committee. Jane Hawkard confirmed that no contribution is made to this area.

The Governing Body queried whether there would be any changes with regard to support for Harrogate and District NHS Foundation Trust with the change from WY&H to HCV. It was noted that the Harrogate System Alignment MOU was required in order to safeguard the Trust as the finances now go into the HCV HCP and it was important to ensure the CCG and Trust had a foot in both camps.

#### **The North Yorkshire CCG Governing Body:**

- Noted the revised West Yorkshire and Harrogate Memorandum of Understanding for Collaborative Commissioning ('the MoU') and Joint Committee work plan.
- Adopted the principles of collaboration set out in Paragraph 3.1 of the MoU and to seek the objectives set out in Paragraph 4.1 and at Schedule 7.
- Agreed to become an Associate member of the WY&H Joint Committee of CCGs on the terms set out in Paragraph 6 of this report.
- Authorised the Accountable Officer to sign the MoU to signify its commitment to the objectives, principles, values and behaviours set out therein.

#### **8.4 Northern CCG Joint Committee Terms of Reference**

Amanda Bloor presented the Northern CCG Joint Committee Terms of Reference (ToR) which have been amended to reflect changes to CCG structures, effective from 1 April 2020.

Prior to disestablishment, the NHS Hambleton, Richmondshire and Whitby CCG were previously a Member of the Joint Committee. The establishment of the North Yorkshire CCG covering a wider footprint will become an Associate Member of the Joint Committee.

Where there is an issue requiring a decision to be made which will affect NHS North Yorkshire CCG, the Accountable Officer or nominated deputy will be invited to attend meetings as an Associate Member of the Joint Committee with full voting rights in relation to the relevant issue.

#### **The North Yorkshire CCG Governing Body:**

- Approved the revised ToR for final ratification at the next meeting of the Joint Committee.
- Approved for the Accountable Officer to make any minor amendments to the terms of reference, as required subject to feedback from the other CCG Governing Bodies.

### **9.0 Minutes and Key Messages of Governing Body Committees – to be Discussed by Exception**

#### **9.1 Audit Committee**

Ken Readshaw informed that the Committee approved the Annual Report, Annual Governance Statement and Annual Accounts 2019/20 for the three North Yorkshire CCGs.

## **9.2 Primary Care Commissioning Committee**

Sheenagh Powell informed no meeting had taken place since the Governing Body last met and the next meeting is scheduled for 23 July 2020

## **9.3 Quality and Clinical Governance Committee**

Kate Kennady informed that in the previous months the main focus had been on Covid-19. Formal monthly meetings will resume from July 2020.

## **9.4 Finance, Performance, Contracting and Commissioning Committee**

Dr Ian Woods informed that the FPCCC also met on 18 June 2020 and noted that the committee discussed the current financial position, an update on rent increases and capital bills programme and an update on Catterick.

**The North Yorkshire CCG Governing Body:** Noted the Key Messages and Minutes from the statutory and non-statutory committees of the Governing Body.

## **10.0 Any Other Business**

No other business was noted.

**The North Yorkshire CCG Governing Body:** Noted that there was no other business to discuss.

## **11.0 Next Meeting**

The Governing Body is next due to meet on 27 August 2020. It is currently expected that this meeting will take place virtually as social distancing rules are in place. All papers will be published on the CCG website and members of the public will have the opportunity to send any questions in advance of the meeting in line with usual processes. Healthwatch would be invited to join the virtual meeting. Key decisions will be published within 24 hours of the meeting taking place.

**The North Yorkshire CCG Governing Body:** Noted that there was no other business to discuss.

## **12.0 Close of Meeting in Public**

Dr Charles Parker noted that that the press and public be excluded from the remainder of the meeting on the grounds that publicity would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted. The papers in the confidential session hold:

1. Information relating to the financial or business affairs of any particular person (incl. the CCG).

**All Actions are detailed at Appendix A.**



**NHS North Yorkshire Clinical Commissioning Group  
Actions from the Governing Body meeting on 25 June 2020**

Item	Action	Responsibility	Action Completed / Due to be Completed (as applicable)
<b>3.2 Matters Arising from the Minutes – 30 April 2020</b>	Update to be provided regarding Healthwatch attendance at Governing Body meetings.	Julie Warren, Director of Corporate Services, Governance and Performance	27 August 2020