

NORTH YORKSHIRE CLINICAL COMMISSIONING GROUP

GOVERNING BODY MEETING

Thursday 22 April 2021 at 10.00 – 11:00

Virtual Meeting – Microsoft Teams

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

Apologies	
None	

In Attendance	
Sasha Sencier	Board Secretary and Senior Governance Manager
Tanja Entwistle	Corporate and Governance Support Officer (Minutes)

1.0 Apologies for Absence and Quorum

No apologies were received.

The NHS North Yorkshire CCG Governing Body: Noted attendance and that the NY CCG Governing Body meeting is quorate.

2.0 Declarations of Interest 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 NHS 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 Governing Body Minutes – 25 February 2021

The Chair presented the Governing Body minutes from the meeting on 25 February 2021. Governing Body members noted no changes, and the minutes were approved as a true and accurate record of the meeting.

The NHS North Yorkshire CCG Governing Body: Approved the minutes of the meeting on 25 February 2021 as a true and accurate record.

3.2 Matters Arising from the Meeting – 25 February 2021

All matters arising had been completed since the last meeting with no further additional matters noted.

The NHS North Yorkshire CCG Governing Body: Accepted the matters arising as complete from the meeting on 25 February 2021.

4.0 Reports from North Yorkshire Clinical Commissioning Group

4.1 Clinical Chair

Dr Charles Parker provided a verbal update reporting positive feedback from practices and practitioners on the deployment of the Emergency Register of Practitioners. It was confirmed that the Governing Body had received an update on Children and Adults Safeguarding at the Governing Body development session on 25 February 2021. Dr Parker took the opportunity to recognise the contribution of George Campbell to the CCG and all previous NHS organisations and wished to thank him for all his efforts on behalf of the CCG and the population of North Yorkshire. It was reported that the Lay Member for Patient and Public Engagement had accepted the role of Health and Wellbeing Guardian for the CCG and thanks were extended to her with a request to keep the Governing Body updated on progress. It was agreed to approve the minutes of the 25 February 2021 Governing Body session in private by email.

The NHS North Yorkshire CCG Governing Body: Accepted the verbal report from the Clinical Chair as assurance and agreed to approve the minutes of the 25 February 2021 Governing Body session in private, by email.

4.2 Accountable Officer

Amanda Bloor presented the Accountable Officer Report and took the paper as read. It was confirmed that the purpose of the Governing Body development session later that day would be to review the impact of the white paper 'Integration and Innovation: working together to improve health and social care for all'. Integrated Care Systems (ICS) will operate in shadow form from September 2021 and be fully established on 1 April 2022.

Current focus is on recovery from the COVID-19 pandemic, to reduce waiting lists and health inequalities and it was reported that the COVID-19 vaccination programme is going very well. There will be a slightly reduced supply of the Astra Zeneca vaccine over the next two to three weeks, but the system is still on track to meet the end of July target to vaccinate all adults. It is anticipated that the flu vaccination programme will include 50 to 64 year olds again this year however confirmation is awaited.

The significant work undertaken by CCG staff throughout the year, as demonstrated in the draft Annual Report, was applauded with all contributions involved acknowledged.

The NHS North Yorkshire CCG Governing Body: Accepted the report from the Accountable Officer as assurance.

5.0 Quality and Performance

5.1 Quality and Performance Report

The Director of Corporate Services, Governance and Performance and the Chief Nurse presented the Quality and Performance Report, which provides an integrated overview and assurance of quality and performance issues. The Director of Corporate Services, Governance and Performance reported that due to the focus on COVID-19 priorities detailed narrative had not been included in the report, but narrative had been gathered separately and distributed to members prior to the meeting. The main areas to note are:

- **Waiting lists/Referral to Treatment (RTT):** the data between February 2020 and February 2021 shows increases in RTT waits, there is significant inpatient/day case activity across the Humber, Coast and Vale Health and Care Partnership (Integrated Care System) and planning to recover the position. The majority of people waiting are category P4 'surgery that can be delayed for more than 3 months', all higher priorities are receiving treatment. The Chief Finance officer confirmed that the elective recovery fund is £1b across the NHS, with referrals now rising to pre-COVID levels activity is being commissioned from the independent sector with acute trusts preparing to do as much as possible. It was agreed that the waiting list trajectories would be presented to the next Governing Body on 24 June 2021.
- **Cancer:** Cancer Alliances have reported improvements in referrals and waiting lists however Humber, Coast and Vale is recording a relatively high level of patients waiting over 62 days compared to the size of the waiting list and is working with providers to implement initiatives to reduce the list.
- **A&E:** 4 hour performance has started to recover during February and March. With regard to the 12 hour trolley wait, it was noted that February was a particularly challenging month for the Scarborough Hospital site with 45 breaches. This is due to managing a small bed base due to the requirement for COVID-19 and non-COVID-19 beds.

- **111First:** The Accountable Officer conducts a press briefing every Wednesday to inform the public to call 111 if emergency care is required but it was agreed that communications would be reviewed with the Communications and Engagement Team both at NY&Y and HCV Partnership (ICS) level to ensure public awareness.
- **Healthcare Associated Infection (HCAI):** due to the COVID-19 pandemic no targets have been set, therefore the CCG has carried over the previous year's targets in order to assess performance. While the target would have been missed, the data shows an improvement on last year with 13 fewer C.Difficile cases and 61 fewer E-Coli cases to the end of February 2021. All acute providers are now reinstating their Infection Prevention and Control meetings, which are attend by the CCG.
- **Dementia:** work continues to improve the pathway and patient experience and a consistent Memory Assessment Service (MAS) is being developed across North Yorkshire.
- **Improving Access to Psychological Therapies (IAPT):** while waiting times are within expected levels there are pressures and longer waiting times for people needing individual treatment options. Work is underway to develop a three year plan across the North Yorkshire and York system with a review of delivery models being led at an ICS level. North Yorkshire is one of the lower investors in this service.
- **Mental Health Transforming Care Partnership (MH TCP):** sustained improvement continues.

The Chief Nurse reported that since the last meeting one of the mental health providers has entered the quality risk summit process. NHS England/Improvement (NHSE/I) are leading the process with our involvement and that of several other CCGs. Site visits are being schedule for assurance and the Governing Body will be kept updated.

The sleep service for children pilot has been very successful with additional funding secured until March 2022 to enable the service to be delivered to rest of North Yorkshire. A significant improvement in the mental health and wellbeing of children and families has been reported as well as a reduction in Melatonin prescribing as a result. NHSE/I have also expressed an interest in the service with potential for the initiative to be rolled out nationally. The Children and Young People's team were commended for this achievement.

The NHS North Yorkshire CCG Governing Body: Accepted the Quality and Performance Report as assurance.

6.0 Finance

6.1 Financial Update and NY CCG Financial Planning for 2021/22 Months 1-6

The Chief Finance Officer presented the Finance Update and reported a year to date position at Month 11 of a £57k surplus with the year-end position of a £117k surplus to be reported in the annual accounts. It was reported that for 2021/22 the North Yorkshire & York (NY&Y) system have received an allocation of £676m for the first half of the year with allocations for the second half of the year not yet known. The increase of £18m above last year is shown in section 4 and includes provision for growth and for the system to commission services from the independent sector. In 2020/21, due to the COVID-19 pandemic, independent sector activity had been procured nationally but that funding has now been allocated back with the expectation that independent sector activity will be commissioned by systems to assist with the reduction in waiting times. It was agreed that the independent sector could be asked to allocate a percentage of their spend to prevention initiatives, but a specification would need to be drawn up quickly. The system, comprising of two main providers and two commissioners, now needs to agree how the allocation is split and a number of principles have been agreed as outlined in section 4.

The Chief Finance Officer presented the NY CCG Financial Planning for 2021/22 Months 1-6 and requested Governing Body approve the draft budget. The North Yorkshire proportion of the £676m allocation is £363m and includes block contract amounts for York and Scarborough Teaching Hospitals NHS FT (YFT) and Harrogate and District NHS FT (HDFT). System Development Funding (SDF) is outside that envelope. The national growth assumptions on prescribing and continuing healthcare are lower than has hitherto been experienced and, along with the provision for a 0.5% contingency, indicate a potential spend requirement of £3.7m more than our allocation, which would have to be recovered through Quality, Innovation, Productivity and Prevention (QIPP) efficiency initiatives.

Nationally there is a £1b elective recovery fund available to assist with increasing activity to reduce waiting lists, a formula is used to calculate the additional funding which is based on using April 2019/20 activity as a baseline. In April 2021, providers must carry out at least 70% of their baseline activity to qualify for additional funding, in May this rises to 75%, to 80% in June and 85% from July 2021 onwards. Any activity carried out over the baseline receives additional funding, however all providers within each system need to achieve their baseline trajectories as the funding will be distributed to integrated care systems rather than direct to CCGs or providers

The NHS North Yorkshire CCG Governing Body: Noted financial performance to month 11 including COVID-19 costs incurred to date and approved the draft CCG budget for Months 1 to 6.

7.0 Strategy and Planning

7.1 Operational Planning 2021/22

The Director of Strategy and Integration presented the 2021/22 Priorities: Operational Planning Guidance and Financial Arrangements, which outlines the priorities for the year ahead. A significant amount of collaborative work has been undertaken to determine how organisations will link together across the system with involvement from providers responsible for delivering the plan. The NY&Y plans will be submitted to the System Leadership Executive on 29 April 2021 for approval. Workshops will be conducted across acute and primary care providers on 6 May 2021.

Tackling health inequalities is one of the main priorities for the year ahead, a Humber, Coast and Vale Task and Finish Group has been established with a Senior Responsible Officer and a lead for each of the five key areas. While close working with public health colleagues has been standard practice for a number of years the COVID-19 pandemic has brought a shift in our understanding of health inequalities and has enabled organisations to come together as a network to target risks and improve data. Digital inclusion is one of the issues that has arisen and more information on this will be shared at or before the next meeting.

The NHS North Yorkshire CCG Governing Body: Noted the priorities and operational planning for 2021/22 and noted the key dates detailed within the report.

8.0 Governance

8.1 Governing Body Committees Annual Report 2020-21

The Director of Corporate Services, Governance and Performance presented the Governing Body Committees Annual Report and confirmed that all committees had seen and approved the reports. The effectiveness reviews give assurance that our committees have operated effectively.

The NHS North Yorkshire CCG Governing Body: Noted the Governing Body Committees Annual Report 2020/21 and received assurance that, combined with the effectiveness reviews, the report provides a level of assurance that the committees have operated effectively during 2020/21.

9.0 Minutes and Key Messages of Governing Body Committees

9.1 Audit Committee

The Chair of the Audit Committee confirmed that there was nothing further to add and no questions were raised on the minutes and key messages of the Audit Committee.

9.2 Primary Care Commissioning Committee

The Chair of the Primary Care Commissioning Committee confirmed that there was nothing further to add and no questions were raised on the minutes and key messages of the Primary Care Commissioning Committee.

9.3 Quality and Clinical Governance Committee

The Chair of the Quality and Clinical Governance Committee confirmed that there was nothing further to add and no questions were raised on the minutes and key messages of the Quality and Clinical Governance Committee.

9.4 Finance, Performance, Contracting and Commissioning Committee

The Chair of the Finance, Performance, Contracting and Commissioning Committee confirmed that there was nothing further to add and no questions were raised on the minutes and key messages of the Finance, Performance, Contracting and Commissioning Committee.

The NHS 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 discussed.

The NHS 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 Thursday 24 June 2021. 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. Key decisions will be published within 24 hours of the meeting taking place.

The NHS North Yorkshire CCG Governing Body: Noted the date of the next meeting.

12.0 Close of the Meeting

Follow up actions

The actions required as detailed in these minutes are attached at Appendix A.

Appendix A

NHS North Yorkshire Clinical Commissioning Group Actions from the Governing Body Meeting in Public on 22 April 2021

Meeting Date	Item	Action	Responsibility	Action Completed / Due to be Completed (as applicable)
22 April 2021	5.1 Quality and Performance Report	Chief Finance Officer agreed to present the waiting list trajectories to the next Governing Body on 24 June 2021.	Jane Hawkard	Included in the Plan item on the June agenda
22 April 2021	5.1 Quality and Performance Report	111First communications to be reviewed with the Communications and Engagement Team both at NY&Y and HCV Partnership (ICS) level to ensure public awareness.	Julie Warren	COMPLETED