



**North Yorkshire**  
Clinical Commissioning Group

# **NHS North Yorkshire Clinical Commissioning Group**

## **Governing Body Committees Annual Report 2021/22**

**Audit Committee  
Remuneration Committee  
Primary Care Commissioning Committee  
Quality and Clinical Governance Committee  
Finance, Performance, Contracting and Commissioning Committee**

Terms of Reference for all Committees are contained within the Constitution (for Statutory Committees) and Corporate Governance Handbook (for Non-Statutory Committees). Both documents can be found on the CCG website:

<https://www.northyorkshireccg.nhs.uk/home/about-us/>

# Audit Committee Annual Report 2021/22

## Introduction

This report covers the work of the Audit Committee meeting of the NHS North Yorkshire Clinical Commissioning Group (NYCCG) for matters relating to the year 2021/22. The Audit Committee is a statutory requirement of the Health and Social Care Act 2012. This report provides the NHS North Yorkshire CCG Governing Body with a summary of the work done and in particular how the Audit Committee has discharged its responsibilities in supporting the CCG's Annual Governance Statement (AGS) and Assurance Framework. Further details are contained in the minutes of each Audit Committee meeting, which are routinely provided to the Governing Body.

<b>Committee Membership</b>	<p><b>Chair: Ken Readshaw, Lay Member for Audit and Governance</b></p> <p>Members as per Terms of Reference are as follows:</p> <p><b>The Committee shall consist of the following voting members:</b></p> <ul style="list-style-type: none"> <li>• Lay Member for Audit and Governance (Chair)</li> <li>• Secondary Care Doctor (Vice-Chair)</li> <li>• Lay Member for Finance</li> <li>• 1 Governing Body GP Member</li> </ul> <p><b>Required attendees (without voting rights):</b></p> <p>The Committee may also extend invitations to other personnel with relevant skills, experience or expertise as necessary to deal with the business on the agenda. Such personnel will be in attendance and will have no voting rights. This will normally include:</p> <ul style="list-style-type: none"> <li>• Chief Finance Officer / Deputy CFO</li> <li>• Chief Nurse</li> <li>• Director of Corporate Services, Governance and Performance</li> <li>• Senior Governance Manager</li> <li>• Information Governance Manager</li> <li>• Internal auditors</li> <li>• External auditors</li> </ul> <p>See Appendix A for dates of meetings held and members in attendance.</p>
<b>Numbers required for quorum and any instances where the Committee was not quorate</b>	<p>No business shall be transacted unless there are at least two members present, one of who will be the Chair of the Committee or Vice-Chair of the Committee if the Chair cannot be present.</p> <p>This was achieved for all meetings in 2021/2022.</p>
<b>Conflicts of Interest</b>	<p>No conflicts of interest were identified during the course of the year.</p>
<b>Date of approval of terms of reference</b>	<p>Terms of Reference were approved by the Audit Committee in June 2021 and ratified by the Governing Body in July 2021.</p>

<b>Key Role of the Committee</b>	<p>The Committee's overall objectives are to ensure that:</p> <ul style="list-style-type: none"> <li>• The activities of the CCG are within the law and regulations governing the NHS</li> <li>• An effective system of internal control is maintained</li> <li>• An effective system of integrated governance exists within the CCG.</li> </ul> <p>The Committee used a timetable to ensure the business of conducts supports the delivery of its responsibilities. The timetable is reviewed as a standing agenda item at each meeting.</p>
<b>Strategic risks delegated to the Committee for scrutiny as per the Assurance Framework</b>	<p>No strategic risks as per the Assurance Framework have been delegated to the Committee for scrutiny.</p> <p>The role of the Committee in relation to the Assurance Framework is to:</p> <ul style="list-style-type: none"> <li>• Review the system in place for identifying and managing key risks facing the organisation, including the Risk Assurance Framework. The Committee provided assurance to the Governing Body that a robust framework is in place in 2021/22.</li> </ul>
<b>Main Responsibilities of the Committee</b>	<p>In discharging it's duties the main items of business considered by the Committee for the year were as follows:</p> <ul style="list-style-type: none"> <li>• Integrated Governance, Risk Management and Internal Control;</li> <li>• Internal Audit Function, including Internal Audit Reports and Recommendations; Internal Audit Opinion;</li> <li>• External Audit Function, including reviewing the work and findings of the external auditors and considering the implications and management's responses to their work;</li> <li>• Counter Fraud and Security;</li> <li>• Financial Reporting, including monitoring the integrity of the financial statements of the CCG and ensuring that the systems for financial reporting to the CCG, including those of budgetary control, are subject to review as to completeness and accuracy of the information provided to the CCG.</li> </ul>
<b>Summary of the key outcomes of the work of the Committee and the assurances provided to the Governing Body of the North Yorkshire CCG</b>	<p>The work of the Audit Committee is a central part of the CCG's governance and assurance arrangements. As a result of the activity undertaken by the Audit Committee improvements have been made to the CCG's control framework and assurances have been obtained and communicated to the Governing Body as follows:</p> <ul style="list-style-type: none"> <li>• The CCGs are operating within the law and regulations covering the NHS.</li> <li>• Effective systems of control are maintained.</li> <li>• Arrangements are in place to protect the CCG's assets.</li> <li>• Effective financial reporting and monitoring mechanisms are in place.</li> <li>• An effective system of governance exists in the CCG.</li> <li>• An effective system of risk management has been established and is kept under review.</li> <li>• The CCG has an effective Internal Audit and External Audit service in place.</li> <li>• The external auditors have operated independently and were able to issue opinions on the accounts and value for money for 2021/22.</li> <li>• The CCG has in place arrangements for managing fraud and security which will be kept under review subject to anticipated regulations and commissioning standards.</li> </ul>

**Audit Committee NHS North Yorkshire CCG: Attendance 2021/22**

Members	27/04/21	08/06/21	20/07/21	21/09/21	23/11/21	22/02/22	Number of meetings attended
Ken Readshaw, Lay Member for Audit (Chair)	✓	✓	✓	✓	✓	✓	6
Dr Ian Woods, Secondary Care Doctor (Vice-Chair)	✓	✓	✓	✓	✓	✓	6
Sheenagh Powell, Lay Member for Finance	✓	✓	A	✓	✓	✓	5
Dr Chris Ives, GP Governing Body Member	✓	✓	✓	✓	✓	✓	6
<b>Total number of members in attendance</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>4</b>	<b>4</b>	<b>4</b>	
<b>Other Attendees</b>							
Amanda Bloor, Accountable Officer	N/A	✓	N/A	N/A	N/A	N/A	1
Charles Parker, Clinical Chair	N/A	N/A	N/A	N/A	N/A	N/A	0
Jane Hawcard, Chief Finance Officer	✓	✓	✓	✓	✓	✓	6
Julie Warren, Director of Corporate Services, Governance & Performance	✓	✓	✓	✓	A	✓	5
Sue Peckitt, Chief Nurse	✓	✓	✓	A	A	✓	4
Alec Cowell, Deputy Director of Financial services and Reporting	✓	✓	✓	✓	✓	✓	6
Sasha Sencier, Senior Governance Manager and Board Secretary	✓	✓	✓	✓	✓	✓	6
Emma Parker, Corporate Services and EPRR Manager	N/A	N/A	✓	N/A	N/A	N/A	1
Mark Kirkham, External Audit	✓	✓	A	✓	A	✓	4
Campbell Dearden, External Audit	✓	✓	✓	✓	✓	✓	6
Kim Betts, Internal Audit	✓	✓	✓	✓	✓	✓	6
Rosie Dickinson, Counter-Fraud	✓	✓	✓	✓	N/A	N/A	4
Helen Sanderson, Information Governance	✓	N/A	N/A	N/A	N/A	N/A	1
Helen Darwin, HR Business Partner	✓	N/A	N/A	N/A	N/A	N/A	1

A Apologies Received (Members only)

N/A Is not a Member / does not normally attend / no longer employed / not employed yet

# Remuneration Committee Annual Report 2021/22

## Introduction

This report covers the work of the Remuneration Committee of the NHS North Yorkshire CCG (NY CCG) for matters relating to the year 2021/22. The Remuneration Committee is a statutory requirement of the Health and Social Care Act 2012. This report provides the Governing Body of the NHS North Yorkshire CCG with a summary of the work done and in particular how the Remuneration Committee has discharged its responsibilities in supporting the CCGs Annual Governance Statements (AGS). Further details are contained in the minutes of each Remuneration Committee meeting, which are routinely provided to the Governing Body.

<b>Committee Membership</b>	<p><b>Chair: Kate Kennady, Lay Member for Patient &amp; Public Engagement</b></p> <p>Members as per Terms of Reference are as follows:</p> <p><b>The Committee shall consist of the following voting members:</b></p> <ul style="list-style-type: none"> <li>• Lay member - Patient and Public Engagement (Chair)</li> <li>• Lay Member - Finance (Vice Chair)</li> <li>• 2 x GP Governing Body Members</li> </ul> <p><b>No member of the Remuneration Committee should claim a significant proportion of their income from the CCG.</b></p> <p><b>The Chair of the Committee will be a Lay Member of the Governing Body who is not the Audit Chair.</b></p> <p><b>Other nominated officers may be invited to attend, such as the Accountable Officer, HR Lead or external advisers, for all or part of any meeting as and when appropriate.</b></p> <p>See Appendix A for dates of meetings held and members in attendance.</p>
<b>Numbers required for quorum and any instances where the Committee was not quorate</b>	<p>No business shall be transacted unless at least three members are present.</p> <p>There was one meeting in 2021/22 and quorum was achieved.</p>
<b>Conflicts of Interest</b>	<p>No conflicts of interest were identified during the course of the year.</p>
<b>Date of approval of terms of reference</b>	<p>Committee Terms of Reference were approved in March 2020 by the Council of Members and NHS England as part of the Constitution and establishment of the NY CCG. The Governing Body agreed that no update was required for 2021/22.</p>

<p><b>Key Role of the Committee</b></p>	<p>The Committee shall make recommendations to the Governing Body on determinations about pay and remuneration for employees of the clinical commissioning group (excluding the Lay Members – see 2.2) and people who provide services to the clinical commissioning group and allowances under any pension scheme it might establish as an alternative to the NHS pension scheme.</p> <p>In addition the committee will be responsible for:</p> <ul style="list-style-type: none"> <li>• Reviewing the performance of the Accountable Officer and other senior team members as appropriate.</li> <li>• If appropriate, considering the severance payments of the Accountable Officer, GB Members (where appropriate) and other senior staff, seeking HM Treasury approval as appropriate in accordance with the guidance ‘Managing Public Money’.</li> <li>• Receiving the output of the Governing Body appraisal process.</li> <li>• Recommend for approval by the Governing Body the terms and conditions, remuneration and travelling or other allowances for all Governing Body Members, clinicians on contracts for services and Very Senior Managers (non-agenda for change grades) including pensions and gratuities (Directors on agenda for change grades do not fall under the remit of the Committee).</li> <li>• To recommend additional payments to the members of the governing body, for leading on particular tasks that are outside of their CCG role</li> </ul>
<p><b>Strategic risks delegated to the Committee for scrutiny as per the Assurance Framework</b></p>	<p>No strategic risks as per the Assurance Framework have been delegated to the Committee for scrutiny.</p>
<p><b>Summary of the key outcomes of the work of the Committee and the assurances provided to the Governing Body of the North Yorkshire CCG</b></p>	<p>In discharging it’s duties the main items of business considered by the Committee for the year were as follows:</p> <ul style="list-style-type: none"> <li>• Remuneration of the Very Senior Managers (VSMs).</li> </ul>

## Remuneration Committee NHS North Yorkshire CCG: Attendance 2021/22

Members	7/10/21	Number of meetings attended
Kate Kennady, Lay Member for Patient and Public Engagement (Chair)	✓	1
Sheenagh Powell, Lay Member for Finance (Vice-Chair)	A	0
Dr Mark Hodgson, GP Governing Body Member	✓	1
Dr Peter Billingley, GP Governing Body Member	✓	1
<b>Total number of members in attendance</b>	<b>3</b>	
<b>Other Attendees</b>		
Amanda Bloor, Accountable Officer	C	0
Julie Warren, Director of Corporate Services, Governance and Performance	C	0
Charles Parker, Clinical Chair	✓	1
Sasha Sencier, Board Secretary	✓	1
Helen Darwin, HR Business Partner	✓	1

A Apologies Received (Members only)

N/A Is not a Member / does not normally attend / no longer employed / not employed yet

C Conflicted and Not Permitted to Attend

# Primary Care Commissioning Committee Annual Report 2021/22

This report covers the work of the NHS North Yorkshire CCG Primary Care Commissioning Committee (PCCC) meeting for matters relating to the year 2021/22. The PCCC is a statutory committee. This report provides the NHS North Yorkshire CCG Governing Body with a summary of the work done and how the PCCC has discharged its responsibilities in supporting the Annual Governance Statement (AGS) and Assurance Framework. Further details are contained in the minutes of each PCCC meeting, which are published on the CCG's website and are routinely provided to the Governing Body.

<b>Committee Membership</b>	<p><b>Chair: Sheenagh Powell, Governing Body Lay Member</b> <b>Executive Lead: Wendy Balmain</b></p> <p>Members as per Terms of Reference are as follows:</p> <p><i>Voting Members:</i></p> <ul style="list-style-type: none"> <li>• Lay Member for Finance (Chair)</li> <li>• Lay Member for Patient and Public Engagement (Vice Chair)</li> <li>• Chief Finance Officer*</li> <li>• Director of Strategy and Integration*</li> <li>• Chief Nurse*</li> <li>• 2 Governing Body GP representatives</li> </ul> <p>* nominated deputies are permitted but only with the prior agreement of the Chair</p> <p><i>In attendance (without voting rights):</i></p> <ul style="list-style-type: none"> <li>• NHS England/Improvement Representative – North East and Yorkshire</li> <li>• Healthwatch representative</li> <li>• Health and Wellbeing Board/Public Health Representative</li> <li>• North Yorkshire Local Medical Committee Representative</li> <li>• Commissioning Support Representatives</li> <li>• Other Officers of the CCG</li> </ul> <p>See Appendix A for dates of meetings held and members in attendance.</p>
<b>Numbers required for quoracy and any instances where the Committee was not quorate</b>	<p>The quorum for meetings shall be five members including a minimum of one lay member present. GP members should not exceed that of Executive Directors and Lay Members combined.</p> <p>Quorum was achieved for all meetings held in 2021/22.</p>
<b>Conflicts of Interest</b>	<p>The following conflicts of interest were identified for 2021/22:</p> <p><b>27 May 2021</b></p> <p>Item 6.5C Practice Changes and Rent Review: Stokesley. Dr Sally Tyrer advised that the GP named in the rent review for Stokesley was a Clinical Director whom she worked closely with. Sally's declaration was noted by the Committee. As a non-voting member, it</p>



	was noted Dr Tyrer would take no part in the decision. Quorum was not affected.
<b>Date of approval of terms of reference</b>	Terms of Reference were approved by the PCCC in June 2021 and ratified by the Governing Body in July 2021.
<b>Key duties of the Committee</b>	<p>The role of the Committee is to carry out the functions relating to the commissioning of primary medical services under section 83 of the NHS Act. This includes the following:</p> <ul style="list-style-type: none"> <li>• GMS, PMS and APMS contracts (including the design of PMS and APMS contracts, monitoring of contracts, taking contractual action such as issuing breach/remedial notices, and removing a contract);</li> <li>• Newly designed enhanced services (“Local Enhanced Services” and “Directed Enhanced Services”);</li> <li>• Design of local incentive schemes as an alternative to the Quality Outcomes Framework (QOF);</li> <li>• Decision making on whether to establish new GP practices in an area;</li> <li>• Approving practice mergers;</li> <li>• Making decisions on ‘discretionary’ payment; these decisions will be in line with The General Medical Services Statement of Financial Entitlements (Amendment) Directions 2019</li> <li>• Currently commissioned extended primary care medical services;</li> <li>• Newly designed services to be commissioned from primary care;</li> <li>• Approving and supporting the development of Primary Care Networks in line with NHS England Guidance;</li> <li>• The Network DES including Network Agreement, DES specifications, Network funding including Network Engagement Funding, Network Administration Payment, Workforce Reimbursement and Clinical Lead funding.</li> </ul>
<b>Strategic risks delegated to the Committee for scrutiny</b>	<p>The Board Secretary is responsible for the management and maintenance of the Governing Body Assurance Framework, Corporate Risk Register and Directorate Risk Register.</p> <p>All CCG risks are discussed at the Corporate Risk Review Group. The group is led at Executive Director level and Chaired by the Director of Corporate Services, Governance and Performance. The Board Secretary acts as Deputy Chair. The group provides a level of scrutiny and challenge to the process of identifying and measuring risk, culminating in a cycle of continuous monitoring and review. Risk leads join the meeting to update the group on risks as and when required.</p> <p>All risks on the Governing Body Assurance Framework, the Corporate Risk Register and the Directorate Risk Register have been aligned to Committees. All significant risks (those scored 15 or above) are reported to the Committee on a quarterly basis. This provides Members of the Committees with an opportunity to scrutinize risks and ensure appropriate mitigations are in place to manage risks appropriately.</p> <p>In 2021/22, the Committee requested to see all risks scored 12 and above to provide additional assurance that potential significant risks are being monitored and managed effectively.</p>

	<p>In 2021/22, the Board Secretary twice conducted a deep dive with Directorates on all risks.</p> <p>The Audit Committee reviews all risks twice per year.</p>
<p><b>Summary of the key assurances provided to the Governing Body.</b></p>	<p>During 2021/22, the PCCC had oversight of:</p> <ul style="list-style-type: none"> <li>• CCG updates on Primary Care</li> <li>• NHS England updates on Primary Care</li> </ul> <p>The Chair or Vice-Chair of the PCCC has provided key messages and verbal updates to the Governing Body during 2021/2022. All updates have been published as part of the Governing Body papers on the CCG website.</p>

### NHS North Yorkshire CCG Primary Care Commissioning Committee: Attendance 2021/22

The terms of reference state that the Committee should not meet less than 4 times per year.

Members	27/5/21	22/07/21	21/10/21	21/12/21 STOOD DOWN	27/1/22	Number of meetings attended
Sheenagh Powell, Lay Member for Finance, NY CCG (Chair)	✓	✓	✓		✓	4
Kate Kennady, Lay Member for Public & Patient Engagement, NY CCG (Vice-Chair)	✓	✓	✓		✓	4
Wendy Balmain, Director of Strategy and Integration, NY CCG	A	✓	✓		✓	3
Sue Peckitt, Chief Nurse, NY CCG	✓	✓	✓		✓	4
Jane Hawkard, Chief Finance Officer, NY CCG	✓	✓	✓		✓	4
Peter Billingsley, GP GB Member – Hospital Based Care and Vulnerable People, NY CCG	✓	✓	✓		✓	4
Mark Hodgson, GP GB Member – Integrated/Community Care, NY CCG	✓	✓	✓		✓	4
Bruce Willoughby, GP GB Member – Integrated/ Community Care, NY CCG	✓	✓	✓		✓	4
<b>Total Number of Members Present</b>	<b>7</b>	<b>8</b>	<b>8</b>	<b>-</b>	<b>8</b>	<b>-</b>
<b>In Attendance (Non-voting)</b>						
Dr Omnia Hefni, GP Clinical Lead – Workforce Development, NY CCG	A	✓	A		✓	2
Andrew Dangerfield, Head of Primary Care Transformation, NY CCG	A	✓	✓		✓	3
Sasha Sencier, Senior Governance Manager and Board Secretary, NY CCG	✓	✓	✓		✓	4
Helen Philips, Primary Care, NHSE/I	A	✓	✓		A	2
Martin Braidwood, Primary Care Manager, NHSE/I	N/A	N/A	N/A		✓	1
Dr Sally Tyrer, GP and North Yorkshire Local Medical Council (LMC)	✓	A	A		A	1
Angela Hall, Health Improvement Manager, NYCC	✓	A	✓		A	2
Chris Clarke, Senior Commissioning Manager, NHSE/I	✓	N/A	N/A		N/A	1
Lisa Pope, Assistant Director of Primary Care, NY CCG	V	N/A	N/A		N/A	1
Ashley Green, Healthwatch	✓	A	✓		✓	3

A Apologies received

N/A Do not normally attend/no longer employed/Not employed yet

V Voting Member when Deputising

# Quality and Clinical Governance Committee

## Annual Report 2021/22

### Introduction

This report covers the work of the Quality and Clinical Governance Committee (QCGC) of the NHS North Yorkshire CCG (NYCCG) for matters relating to the year 2021/22. This report provides the Governing Body with a summary of the work done and in particular how the QCGC has discharged its responsibilities in supporting CCG's Annual Governance Statement (AGS).

The Minutes of the Quality and Clinical Governance Committee inform the key messages of the business, discussions and decisions of the Committee to the Governing Body.

<b>Committee Membership</b>	<p><b>Chair: Kate Kennady, Lay Member for Patient and Public Engagement</b>  <b>Executive Leads: Sue Peckitt, Chief Nurse and Julie Warren, Director of Corporate Services, Governance and Performance.</b></p> <p>The detail of Membership in the terms of reference are as follows:</p> <p>Core Membership:</p> <ul style="list-style-type: none"> <li>• Lay Member for Patient and Public Engagement (Chair)</li> <li>• Clinical Chair (Vice-Chair)</li> <li>• 2 GP Governing Body Members</li> <li>• GP Lead for Quality</li> <li>• Lay Member for Audit</li> <li>• Chief Nurse*</li> <li>• Director of Corporate Services, Governance and Performance*</li> </ul> <p>* nominated deputies may attend where core members are not able to attend subject to prior approval from the Chair. Deputies will not have voting rights.</p> <p>See Appendix A for dates of meetings held and members in attendance.</p>
<b>Numbers required for quoracy and any instances where the Committee was not quorate</b>	<p>The Committee will be quorate when at least 5 members of the Committee are present to include at least:</p> <ul style="list-style-type: none"> <li>• The Chair or Vice-Chair</li> <li>• One Clinician (Clinicians refer to GP Members only)</li> <li>• One Executive Member (A nominated deputy may not be included for this purpose).</li> </ul> <p>There were no instances where the Committee was not quorate.</p>
<b>Conflicts of Interest</b>	<p>No conflicts of interest were identified during the course of the year.</p>
<b>Date of approval of terms of reference</b>	<p>The Terms of Reference were ratified by the Governing Body in April 2020. It was agreed that the terms of reference did not require to be amended in 2021/22.</p>
<b>Key duties of the Committee:</b>	<p>The role of the Quality and Clinical Governance Committee is to advise and support the Governing Body in:</p> <ul style="list-style-type: none"> <li>• Providing assurance on the quality of services commissioned; and</li> <li>• Promoting a culture of continuous improvement and innovation with respect to safety of services, clinical effectiveness and patient experience.</li> </ul>

	<ul style="list-style-type: none"> <li>A significant role of the Committee in both 2020/21 and 2021/22 has been to discuss, monitor and gain assurance around issues relation to Covid-19 quality and performance.</li> </ul>
<b>Significant Risks aligned to the Committee</b>	<p>The Board Secretary is responsible for the management and maintenance of the Governing Body Assurance Framework, Corporate Risk Register and Directorate Risk Register.</p> <p>All CCG risks are discussed at the Corporate Risk Review Group. The group is led at Executive Director level and Chaired by the Director of Corporate Services, Governance and Performance. The Board Secretary acts as Deputy Chair. The group provides a level of scrutiny and challenge to the process of identifying and measuring risk, culminating in a cycle of continuous monitoring and review. Risk leads join the meeting to update the group on risks as and when required.</p> <p>All risks on the Governing Body Assurance Framework, the Corporate Risk Register and the Directorate Risk Register have been aligned to Committees. All significant risks (those scored 15 or above) are reported to the Committee on a quarterly basis. This provides Members of the Committees with an opportunity to scrutinize risks and ensure appropriate mitigations are in place to manage risks appropriately.</p> <p>In 2021/22, the Committee requested to see all risks scored 12 and above to provide additional assurance that potential significant risks are being monitored and managed effectively.</p> <p>In 2021/22, the Board Secretary twice conducted a deep dive with Directorates on all risks.</p> <p>The Audit Committee reviews all risks twice per year.</p>
<b>Summary of the key work of the Committee and the assurances provided to the Governing Body.</b>	<p>The focus of the Committee has been to seek reasonable assurance relating to the quality of commissioned services. The Committee defines reasonable assurance as evidence that quality is in line with agreed targets and trajectories or where it is not, there is reasonable mitigation and an action plan is developed to rectify any issues.</p> <p>The Committee has sought assurance on the performance of all commissioner and providers including primary care, in terms of all regulators. Where the Committee receives insufficient assurance relating to the provision around patient care, quality and safety, it assesses the risk and escalates it to the Governing Body. The Committee has been responsible for:</p> <ul style="list-style-type: none"> <li>Approval of policies of the CCGs, with the exception of those reserved for the Governing Body or delegated through the Scheme of Reservation and Delegation to an individual or committee.</li> <li>Overseeing the development and implementation and monitoring of the CCGs' Quality Strategy and Quality Assurance Framework.</li> <li>Establishing and maintaining procedures and systems of internal control designed to give reasonable assurance that all aspects of quality and clinical governance are in place.</li> <li>Ensuring effective management of risk relating to quality and safety issues is in place to manage and address clinical governance issues.</li> <li>Ensuring quality is driven through the Quality, Innovation, Productivity and Prevention programme (QIPP).</li> <li>Ensuring the principles of quality assurance and governance are integral to performance monitoring arrangements for all CCG commissioned services</li> </ul>

are delivered and embedded within consultation, service development and redesign, evaluation and decommissioning of services.

- Seeking assurance that the CCG is fulfilling its statutory duties for equality and diversity, particularly the Equality Act 2010, through the implementation of the Equality Delivery System.
- Ensuring that all decisions taken, or recommendations made, have been through a planning assurance process that includes the outcome of:
  - Quality impact assessment
  - Equality impact assessment
  - Patient and public involvement
  - Privacy impact assessment
- By receiving integrated impact assessments for all projects, policies or services being commissioned by the CCG and gaining assurance that any potential negative impacts are appropriately mitigated.

## Attendance Records for 2021/22

## Appendix A

### Quality and Clinical Governance Committee

The terms of reference state that the Committee should meet bi-monthly and no less than 5 times per year.

QCGC Membership 2020/21	1/4/21	3/6/21	2/9/21	7/10/21	2/12/21	3/2/22	Number of meetings attended
Kate Kennady, PPE Lay Member (Chair)	✓	✓	✓	✓	✓	✓	6
Dr Charles Parker, Clinical Chair (Vice-Chair)	✓	A	A	✓	✓	✓	4
Dr Chris Ives, GP GB Member	✓	✓	✓	✓	✓	✓	6
Dr Peter Billingsley, GP GB Member	A	✓	✓	✓	✓	✓	5
Ken Readshaw, Lay Member Audit	✓	✓	✓	✓	✓	✓	6
Sue Peckitt, Chief Nurse	✓	✓	✓	✓	✓	✓	6
Julie Warren, Director of Corporate Services, Governance & Performance	A	✓	✓	✓	A	A	3
Dr Sarah Hay, GP Clinical Lead	✓	✓	A	✓	✓	✓	5
<b>Total Members in Attendance</b>	<b>6</b>	<b>7</b>	<b>6</b>	<b>8</b>	<b>7</b>	<b>7</b>	
Ashley Green, HealthWatch North Yorkshire	A	A	A	✓	A	A	1
Simon Cox, Director of Acute Commissioning	N/A	N/A	N/A	✓	N/A	N/A	1
Sam McCann, Senior Nursing, Quality & Clinical Governance Manager	✓	✓	N/A	N/A	N/A	N/A	2
Nikki Henderson, Senior Nursing, Quality & Clinical Governance Manager	N/A	N/A	N/A	✓	N/A	N/A	1
Elaine Wyllie, Designated Nurse Safeguarding Children	N/A	N/A	✓	N/A	N/A	N/A	1
Karen Hedgley, Designated Nurse Safeguarding Children	✓	✓	N/A	✓	✓	✓	5
Christine Pearson, Designated Nurse Safeguarding Adults	N/A	N/A	✓	N/A	N/A	N/A	1
Olwen Fisher, Designated Nurse Safeguarding Adults	N/A	N/A	N/A	✓	N/A	N/A	1
Ken Latta, Head of Medicines Management	✓	N/A	N/A	✓	N/A	N/A	2
Sasha Sencier, Board Secretary	N/A	✓	N/A	N/A	✓	✓	3
Kirsty Kitching, Assistant Director of Mental Health & LD Partnership	✓	N/A	✓	✓	✓	✓	5
Suzanne Bennett, Head of Children and Young People, CHC	✓	N/A	N/A	N/A	✓	✓	3
Emma Parker, Corporate Manager	N/A	✓	✓	✓	N/A	✓	4
Emma Stevens, Designated Professional for Safeguarding Adults	N/A	N/A	N/A	✓	✓	N/A	2
Julie McGregor, Programme Director CHC and Vulnerable People	✓	✓	N/A	N/A	✓	N/A	3
<b>Total Attendance</b>	<b>12</b>	<b>12</b>	<b>10</b>	<b>17</b>	<b>13</b>	<b>12</b>	

A Apologies received

N/A Do not normally attend/no longer employed/Not employed yet

# Finance, Performance, Contracting and Commissioning Committee Annual Report 2021/22

## Introduction

This report covers the work of the Finance, Performance, Contracting and Commissioning Committee of the NHS North Yorkshire Clinical Commissioning Group (NYCCG) for matters relating to the year 2021/22. This report provides the Governing Body with a summary of the work done and in particular how the FPCCC has discharged its responsibilities in supporting the CCG's Annual Governance Statement (AGS).

The Minutes of the Finance, Performance, Contracting and Commissioning Committee inform the key messages of the business, discussions and decisions of the Committee to the Governing Body.

<b>Committee Membership</b>	<p><b>Chair: Dr Ian Woods</b> <b>Executive Lead: Jane Hawkard</b></p> <p>The detail of Membership in the terms of reference are as follows:</p> <p>Core Membership:</p> <ul style="list-style-type: none"> <li>• Secondary Care Doctor (Chair)</li> <li>• Clinical Chair (Vice-Chair)</li> <li>• GP Clinical Lead</li> <li>• Lay Member for Finance</li> <li>• Accountable Officer</li> <li>• Chief Finance Officer*</li> <li>• Director of Strategy and Integration*</li> <li>• Director of Acute Commissioning*</li> <li>• Director of Corporate Service, Governance and Performance*</li> <li>• Chief Nurse*</li> </ul> <p>* nominated deputies may attend where core members are not able to attend, subject to prior approval from the Chair.</p> <p>Quorum MUST be met when virtual decisions are being made.</p> <p>See Appendix A for dates of meetings held and members in attendance.</p>
<b>Numbers required for quoracy and any instances where the Committee was not quorate</b>	<p>The Committee will be quorate when at least 5 members of the Committee are present to include at least:</p> <ul style="list-style-type: none"> <li>• The Chair or Vice-Chair</li> <li>• One Clinician (Clinicians refer to GP Members and Chief Nurse)</li> <li>• Two Executive Members; one of whom must be Accountable Officer or CFO.</li> </ul> <p>There were no instances where the Committee was not quorate, including when decisions were required to be made virtually.</p>
<b>Conflicts of Interest</b>	<p>No conflicts of interest were identified during the course of the year. This included any virtual decisions required to be made.</p>
<b>Date of approval of terms of reference</b>	<p>Committee Terms of Reference were approved in December 2021. Several discussions were held with the Governing Body regarding Committees throughout 2021/22 due to the transition to the ICB. As such, ToR were not ratified until December 21.</p>



<p><b>Key duties of the Committee:</b></p>	<p>The role of the Finance, Performance, Contracting and Commissioning Committee is:</p> <ul style="list-style-type: none"> <li>• To formally review the financial position of the CCGs, incorporating activity levels, provider contract positions and issues, and risks in achieving its forecast out-turn at the end of the year. It will provide committee members with greater clarity on the CCG's financial and contracts position. It will also provide assurance to the Governing Body on the CCG's financial position, flagging concerns and issues for further discussion as and when deemed necessary.</li> <li>• To formally review performance and discuss by exception where performance is not acceptable or has an impact on safety and quality, agreeing service performance actions and timescales to mitigate and recover the position to acceptable levels. It will provide committee members with greater clarity on the underlying performance (in terms of cost, activity, quality and safety) on commissioned services and on delivery of the annual plan as set out in the CCG's operational plan. It will also provide assurance to the Governing Body on the CCG's performance position, flagging concerns and issues for further discussion as and when deemed necessary.</li> </ul>
<p><b>Significant Risks aligned to the Committee</b></p>	<p>The Board Secretary is responsible for the management and maintenance of the Governing Body Assurance Framework, Corporate Risk Register and Directorate Risk Register.</p> <p>All CCG risks are discussed at the Corporate Risk Review Group. The group is led at Executive Director level and Chaired by the Director of Corporate Services, Governance and Performance. The Board Secretary acts as Deputy Chair. The group provides a level of scrutiny and challenge to the process of identifying and measuring risk, culminating in a cycle of continuous monitoring and review. Risk leads join the meeting to update the group on risks as and when required.</p> <p>All risks on the Governing Body Assurance Framework, the Corporate Risk Register and the Directorate Risk Register have been aligned to Committees. All significant risks (those scored 15 or above) are reported to the Committee on a quarterly basis. This provides Members of the Committees with an opportunity to scrutinize risks and ensure appropriate mitigations are in place to manage risks appropriately.</p> <p>Following the move in October 2021 for FPCCC decisions to be made virtually, unless the issue is significant enough to require a meeting of the members, risks have continued to be monitored by Risk Leads, Director Leads, the Corporate Risk Review Group, The Governing Body (when appropriate) and the Audit Committee (when appropriate).</p> <p>In 2021/22, the Board Secretary twice conducted a deep dive with Directorates on all risks.</p> <p>The Audit Committee reviews all risks twice per year.</p>

**Summary of the key work of the Committee and the assurances provided to the Governing Body.**

From April 2021 to October 2021, the work of the FPCCC is a central part of the CCG's governance and assurance arrangements. As a result of the activity undertaken by the FPCCC scrutiny has been maintained and assurances sought on:

- Monitoring that the CCG has operated within its Standing Financial Instructions and statutory requirements in respect of financial and performance management;
- Challenging the financial position of the CCG and ensuring financial management achieved economy, effectiveness, efficiency, probity and accountability in the use of resources;
- Monitoring the performance of the CCG's contracts;
- Approving the Savings and Efficiency Delivery Programme which is developed by the Business Executive Committee;
- Overseeing the delivery of services provided to the CCG through the external contracts;
- Monitoring significant risks aligned to the Committee;
- Monitoring implementation of the relevant corporate objectives relating to the role of the Committee.

The FPCCC has provided assurance reports to the Governing Body on finance, contracting, QIPP, commissioning and performance. The FPCCC has also monitored Covid-19 spend throughout 2021-22.

Due to the transition arrangements moving to the ICB, in October 2021, it was agreed by the Committee and by Governing Body Members to move to the minimum requirement of FPCCC delegation in terms of delegated decision making. The rationale for this was that:

- all of the assurance work of FPCCC passes to the GB (which already receives assurance reports for Finance, Contracting, Commissioning, Performance and Risk)
- items that require a lower level of delegation than Governing Body level remained with the FPCCC members so as not to overextend the GB agenda and ensure that decisions of the FPCCC delegated level can be made swiftly to allow CCG work can continue at a reasonable pace.

In practical terms this meant that, from October 2021, FPCCC formal committee meeting were stood down and replaced by virtual decision-making, unless there was exceptional circumstances agreed by the Executive Lead and Chair that required an item to be discussed.

All virtual decisions were logged and reported to the Governing Body at meetings in public. Monthly informal meetings between the FPCCC chair and the CFO continued to ensure that these new arrangements ran smoothly.

The paper detailing the changes went to the Governing Body in October 2021 and can be found on the website:

<https://northyorkshireccg.nhs.uk/about/governing-body/governing-body-meetings/>

## Attendance Records for 2021/22 Finance, Performance and Commissioning Committee

### April 2021 – September 2021

FPCCC Members	15/4/21	20/5/21	15/6/21	16/9/21	Number of meetings attended
Dr Ian Woods (Chair), Secondary Care Doctor	✓	✓	✓	✓	4
Dr Charles Parker (Vice-Chair) Clinical Chair	✓	✓	A	✓	3
Dr Bruce Willoughby, GP Governing Body Member	✓	✓	✓	✓	4
Sheenagh Powell, Lay Member for Finance	✓	✓	✓	✓	4
Amanda Bloor, Accountable Officer	✓	A	✓	A	2
Jane Hawkard, Chief Finance Officer	✓	✓	✓	A	3
Wendy Balmain, Director of Strategy and Integration	A	✓	A	✓	2
Sue Peckitt, Chief Nurse	✓	A	A	A	1
Simon Cox, Director of Acute Commissioning	A	✓	✓	A	2
Julie Warren, Director of Corporate, Governance & Performance	✓	✓	✓	A	3
<b>Total Members attendance</b>	<b>8</b>	<b>8</b>	<b>7</b>	<b>5</b>	<b>-</b>
<b>Other attendees (non-voting)</b>					
David Booker, Lay Member VoY CCG	✓	N/A	N/A	N/A	1
Dilani Gamble, Deputy Chief Finance Officer (Nominated Deputy)	N/A	N/A	N/A	✓ (ND)	1
Kirsty Kitching, Assistant Director of MH/LDP	N/A	N/A	✓	N/A	1
Ken Latta, Head of Medicines Management	N/A	N/A	✓	N/A	1
Steve Jordan, Assistant Director of Contracting & Procurement	N/A	✓	✓	✓	3
Stephanie Wetherell, NECS Procurement Officer	N/A	✓	✓	N/A	2
Christian Turner, Deputy Director Business Change & Planning	N/A	✓	N/A	N/A	1
Sam Haward, Head of Community Services & Integration	N/A	N/A	N/A	✓	1
<b>Total in attendance</b>	<b>1</b>	<b>3</b>	<b>4</b>	<b>3</b>	

A - Apologies received N/A - Do not normally attend/no longer employed/Not employed yet ND - Nominated Deputy

### October 2021 – March 2022

Month	Recommendation	Quorate Response	Decision Made	COI
October 2021	A NICE Technical appraisal has been received from October's Area Prescribing Committee (APC) which exceeds the financial threshold that it can approve and therefore requires escalation for consideration and potential approval. There is a deadline for the CCG to approve the addition of this drug to formulary by 4th November 2021. The Chair and Executive Lead have therefore agreed that this should be approved virtually, by email, from a quorate FPCCC. The recommendation is on (TA733 Inclisiran for treating primary hypercholesterolaemia or mixed dyslipidaemia).	✓	Approved	None
November 2021	A Single Tender Waiver has been received for consideration and approval in relation to External Audit Services. The current agreements between the HCV CCG's and Mazars LLP are due to expire on 31 March 2022. Also shared and noted at Audit Committee on 23/11/21.	✓	Approved	None
December 2021	A Primary Care Rebate Scheme has been received from Medicines Management which requires to be escalated to FPCCC for approval. The recommendation is pressurised metered dose inhaler.	✓	Approved	None
January 2022	Primary Care Rebate Scheme received from Medicines Management which requires to be escalated to FPCCC for approval. The recommendation is regarding the nationally procured rebate for direct acting oral anticoagulants.	✓	Approved	None
February 2022	Year End Losses. The recommendation is regarding the "write off" of three losses which cannot be reclaimed by the CCG.	✓	Approved	None
February 2022	FPCCC Annual Report 2021/22 and Annual Review of Effectiveness 2021/22. The recommendation is to approve the annual report and accept the review of effectiveness.	✓	Approved	None
March 2022	Three Rebate Scheme contracts Aged debtors	✓	Approved	None