

## NORTH YORKSHIRE CLINICAL COMMISSIONING GROUP

### GOVERNING BODY MEETING

Thursday 25 February 2021 at 9.30 – 10:30

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 Mark Hodgson	GP Governing Body Member
Dr Chris Ives	GP Governing Body Member
Dr Bruce Willoughby	GP Governing Body Member

Apologies	
Dr Peter Billingsley	GP Governing Body Member

In Attendance	
Sasha Sencier	Board Secretary and Senior Governance Manager
Julie Hardiment	Communications Officer
Tanja Entwistle	Corporate and Governance Support Officer

#### 1.0 Apologies for Absence and Quorum

Apologies were received from Dr Peter Billingsley, GP Governing Body Member.

**The NHS North Yorkshire CCG Governing Body:** Noted attendance and apologies 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 – 22 December 2020**

The Chair presented the Governing Body minutes from the meeting on 22 December 2020. 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 22 December 2020 as a true and accurate record.

#### **3.2 Matters Arising from the Meeting – 22 December 2020**

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 22 December 2020.

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

#### **4.1 Clinical Chair**

Dr Charles Parker provided a verbal update and congratulated the Accountable Officer on her appointment to the role of Geographic Partnership Director for North Yorkshire and York for the Humber Coast and Vale Health and Care Partnership. A video due to be released on the regeneration of Whitby Hospital was recommended for members to watch. It was reported that the CCG now have agreement from respiratory nurses at the Friarage Hospital to support the provision of oxygen treatment as an alternative to admission for a small cohort of vulnerable patients suffering from COVID-19 for treatment in the care home or place of residence. This is an addition to the Oximetry at Home project.

**The NHS North Yorkshire CCG Governing Body:** Accepted the verbal report from the Clinical Chair as assurance.

#### **4.2 Accountable Officer**

Amanda Bloor provided a verbal update reporting that the CCG had received the Integrated Care System (ICS) White Paper, which is being reviewed and a briefing session has been held with staff. It was reported that acute providers have seen significant increases in COVID-19 patients during this wave of the pandemic but that the numbers of COVID-19 occupied beds are now reducing. Substantial progress has been made on the vaccination programme with a tremendous effort from CCG teams, GP practices, staff and volunteers resulting in excess of half a million people having received a vaccine in Humber, Coast and Vale Integrated Care System (HCV ICS) and over a quarter of a million people in the North Yorkshire and York system.

**The NHS North Yorkshire CCG Governing Body:** Accepted the verbal 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 has been gathered on exception areas which is colour coded to highlight the differences from the last report. The main areas to note are: elective waiting lists are increasing and prioritisation of patients is ongoing; diagnostic endoscopy lists are being optimised; and, cancer pathways are being redesigned to develop shorter pathways towards diagnosis. The priority remains COVID-19 treatment and recovery to pre-COVID-19 pandemic levels. A meeting was held last week with NHS England and the guidance expected to emerge from that will be shared once received.

The Chief Nurse reported that for the two trusts in enhanced monitoring it had been agreed to reduce the level of concern due to the significant level of improvement seen and quality monitoring now continues as usual. C.Difficile rates have exceeded the targets carried forward from last year (there are no targets this year) but the numbers are lower than last year. Although Infection Prevention and Control Committees have been stood down due to the COVID-19 pandemic, it was noted that the Chief Nurse is the Chair of the HCV ICS Healthcare Associated Infection Group which has representatives from Acute, Mental Health and Community providers as well as Yorkshire Ambulance Service and NHS England/Improvement. Hospital on-site COVID-19 cases are being monitored; in the Harrogate area two wards have active outbreaks and 4 wards have had outbreaks in the last 28 days but no outbreaks have been reported in the last 13 days. With regard to the vaccination programme in care homes, phenomenal work led by primary care has resulted in over 90% of residents receiving their first dose of the vaccine with the second dose starting next week. Over 70% of staff in care homes have been vaccinated and locality sessions have been secured for those remaining. Further funding has been agreed for Improving Access to Psychological Therapies (IAPT) for 2021/22 and we continue to work in partnership with Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) to deliver the long term plan.

The Director of Strategy and Integration reported that a Diagnostic Board has been established across Humber, Coast and Vale to drive work on diagnostics and to develop a specification for Community Diagnostic Hubs based on need and demand. This is a significant piece of work and as part of that a North Yorkshire and York group has been formed to understand diagnostic capacity, delays and waits and to establish the right place for diagnostic capacity in the future. The Diagnostic Board will also enhance communication with the public to encourage earlier reporting of symptoms.

Members expressed their thanks and admiration for the phenomenal responses of GP Practices, Primary Care Networks and Clinical Directors in vaccinating the population, as well as the CCG Team led by the Chief Nurse.

It was noted that elements of this report are also monitored at Quality and Clinical Governance Committee (QCGC).

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

## **6.0 Finance and Planning**

### **6.1 Finance and Planning Report**

The Chief Finance Officer presented the Finance and Planning Report and confirmed that the year-end forecast remains at a break-even position. The £1.3m outlined in the report that related to hospital reimbursement costs has now been received. The underspend in programme areas has been used to fund enhanced hospital discharges during the latest peak of the COVID-19 pandemic and Finance, Performance, Contracting and Commissioning Committee (FPCCC) agreed to contribute £300k per month from December 2020 to March 2021. It was reported that there is uncertainty regarding the financial allocation for 2021/22 but FPCCC has conducted an exercise to review the run-rate of all organisations which will assist us in establishing our position going forward.

The Director of Strategy and Integration will lead discussions on the Hospital Discharge Scheme through the Integrated Care Partnership (ICP) Silver Command and reported that the ICP agreed that they will adopt a two pronged approach to reviewing discharge going forward:

1. Funding flows will be reviewed to determine how the system can continue to build on what has worked well over the last 10/11 months and how getting people out of hospital into their own bed with support around them can be implemented.
2. Home First approach: HCV ICS have asked how a community model that supports Home First could be funded. This is a big programme of work around system change, delivering a new operating model and keeping people at home with the support of therapists.

It was reported that the Emergency Care Improvement Support Team (ECIST) conducted a review with York Teaching Hospital NHS Foundation Trust and Harrogate and District NHS Foundation Trust before Christmas. High level feedback was very positive regarding the way the organisations in our system have worked together.

It was confirmed that the Section 75 contract variation had been agreed in April 2020 and due to COVID-19 priorities the formal governance for the hospital discharge programme is now being submitted for formal approval at the recommendation of the Finance, Performance, Contracting and Commissioning Committee. The NHS pays for all discharge packages, the local authority contribute a budget and the CCG is reimbursed every month by NHS England.

**The NHS North Yorkshire CCG Governing Body:** Noted: financial performance to Month 9; the current QIPP position and work ongoing for next year's plan; the current COVID-19 costs incurred to date; the new allocations received in Months 8 and 9; and, planning for 2021/22 and the indicative draft plan for Quarter 1. Approved the Section 75 variation to the 2020/21 Better Care Fund Section 75 agreement to formalise the hospital discharge programme pooling arrangements.

## **7.0 Strategy and Planning**

No items were submitted due to the focus on COVID-19 priorities.

## **8.0 Governance**

### **8.1 Delegation to approve the Annual Report, Annual Governance Statement and Accounts 2020/21**

The Chief Finance Officer requested that formal approval of the Annual Report, Annual Governance Statement and Annual Accounts be delegated to the Audit Committee. It was confirmed that the timetable for the draft accounts to be submitted is 24 April 2021 and the final Annual Report and Accounts is 15 June 2021.

**The NHS North Yorkshire CCG Governing Body:** Approved the request to delegate authority to the Audit Committee to approve the Annual Report and Accounts 2020/21 for NHS North Yorkshire CCG.

### **8.2 Governing Body Assurance Framework and Strategic Objectives**

The Director of Corporate Services, Governance and Performance presented the Governing Body Assurance Framework and Strategic Objectives and took the paper as read. It was noted that the increase to the maximum level of risk against 6-1 is as a result of the lockdown measures in response to the latest wave of the COVID-19 pandemic and the subsequent increase in domestic violence, which has affected the safeguarding system as a whole. It was confirmed different ways of working are being sought through the Safeguarding Adult Board and the Safeguarding Children Partnership in order to keep the risk as low as possible but until face to face visits can be reinstated this risk level needs to be maintained. It was concluded that the report provides a high level of assurance around the continued monitoring of risks.

The Governing Body agreed to recommend the addition to the Vulnerable People strategic objective to the Council of Members at their meeting on 2 March 2021, as follows in bold below:

#### **Vulnerable People:**

- We will support everyone to thrive [in the community]
- **We will promote the safety and welfare of vulnerable individuals.**

**The NHS North Yorkshire CCG Governing Body:** Noted: the assurance received from the Audit Committee that the GBAF demonstrates that adequately effective systems of internal control are in place to monitor the significant risks that may affect the delivery of the strategic objectives; the next steps to review the Audit Yorkshire benchmarking report and report

findings to Audit Committee after year end reporting has been finalised. Approved the Governing Body Assurance Framework and agreed to make a recommendation to the Council of Members to approve the addition to the 'Vulnerable People' strategic objective.

### **8.3 Equality and Diversity Plan and Objectives**

The Director of Corporate Services, Governance and Performance presented the Equality and Diversity Plan and Objectives and confirmed that it has been reviewed by Quality and Clinical Governance Committee also. This is part of the CCG's duty on the Public Sector Equality Duty and it was noted that a group has been set up to produce an action plan which will be submitted to the Governing Body at a later date. The document was well received and easy to read with thanks to the team who produced it noted. The Chair challenged Executive Directors to continually look toward improvement on equality and diversity as well as sustainability assessments.

**The NHS North Yorkshire CCG Governing Body:** Approved the Equality and Diversity Plan, including the objectives and action plan.

## **9.0 Minutes and Key Messages of Governing Body Committees**

### **9.1 Audit Committee**

The Chair of the Audit Committee provided a verbal update from the meeting held on 23 February 2021. Approval was given for five Information Governance policies as well as the financial policy on Pharmacy Rebate Schemes and the Anti-Fraud, Bribery and Corruption Policy. The Chair informed the meeting that the Audit Chair from the Vale of York CCG attended the North Yorkshire CCG Audit Committee as part of joint working for the North Yorkshire and York system and confirmed that he would be attending the Vale of York CCG Audit Committee in due course.

### **9.2 Primary Care Commissioning Committee**

The Chair of the Primary Care Commissioning Committee confirmed that a meeting was not held in January due to the focus on COVID-19 priorities. The next meeting will be held on 25 March 2021.

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

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 due to the focus on COVID-19 priorities specific actions were agreed virtually in January and that these had been ratified at the meeting held on 18 February 2021.

**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 22 April 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 in Public**

#### **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 25 February 2020

Meeting Date	Item	Action	Responsibility	Action Completed / Due to be Completed (as applicable)
25 February 2021	5.1 Quality and Performance Report	Due to the focus on COVID-19 priorities detailed narrative had not been included in the report but narrative has been gathered on exception areas which is colour coded to highlight the differences from the last report. It was agreed this would be circulated to members for their information.	Julie Warren	Completed