

Title of Meeting:	NY CCG Governing Body	Agenda Item: 8.1																
Date of Meeting:	22 April 2021	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr style="background-color: #4F81BD; color: white;"> <th colspan="2">Session (Tick)</th> </tr> <tr> <td style="width: 80%;">Public</td> <td style="text-align: center;">X</td> </tr> <tr> <td>Private</td> <td></td> </tr> <tr> <td>Development Session</td> <td></td> </tr> </table>		Session (Tick)		Public	X	Private		Development Session								
Session (Tick)																		
Public	X																	
Private																		
Development Session																		
Paper Title:	Governing Body Committees Annual Report 2020-21																	
Responsible Governing Body Member Lead Julie Warren, Director of Corporate Services, Governance and Performance		Report Author and Job Title Sasha Sencier, Board Secretary and Senior Governance Manager																
Purpose – this paper is for:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr style="background-color: #4F81BD; color: white;"> <th style="width: 25%;">Decision</th> <th style="width: 25%;">Discussion</th> <th style="width: 25%;">Assurance</th> <th style="width: 25%;">Information</th> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">X</td> <td></td> </tr> </table>			Decision	Discussion	Assurance	Information			X								
	Decision	Discussion	Assurance	Information														
		X																
<p>Has the report (or variation of it) been presented to another Committee / Meeting? If yes, state the Committee / Meeting: Yes. Each individual Committee has approved their own annual report.</p>																		
<p>Executive Summary This report covers the work of the following Committees of NHS North Yorkshire Clinical Commissioning Group for matters relating to the year 2020/21:</p> <ul style="list-style-type: none"> Audit Committee Remuneration Committee Primary Care Commissioning Committee Quality and Clinical Governance Committee Finance, Performance, Contracting and Commissioning Committee <p>The report will form part of the CCG's Annual Governance Statement.</p>																		
<p>Recommendations The Governing Body is being asking to:</p> <ul style="list-style-type: none"> Governing Body is asked to review the Committees Annual Report 2020/21. Receive assurance that combined with the effectiveness reviews the report provides a level of assurance that the Committees have operated effectively during 2020/21. 																		
<p>Monitoring This report is used as evidence for the Internal Audit on Governance for 2020/21. The report will form part of the Annual Governance Statement, which is part of the Annual Reports and Accounts 2020/21.</p>																		
<p>CCG Strategic Objectives Supported by this Paper</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #4F81BD; color: white;"> <th style="width: 5%;"></th> <th style="width: 85%;">CCG Strategic Objectives</th> <th style="width: 10%;"></th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1</td> <td> Strategic Commissioning: <ul style="list-style-type: none"> To take the lead in planning and commissioning care for the population of North Yorkshire by providing a whole system approach and to support the development of general practice. To make the best use of resources by bringing together other NHS organisations, local authorities and the third sector to work in partnership on improving health and care. To develop alliances of NHS providers that work together to deliver care through collaboration rather than competition. </td> <td style="text-align: center;">X</td> </tr> <tr> <td style="text-align: center;">2</td> <td> Acute Commissioning: We will ensure access to high quality hospital-based care when needed. </td> <td></td> </tr> <tr> <td style="text-align: center;">3</td> <td> Engagement with Patients and Stakeholders: We will build strong and effective relationships with all our communities and partners. </td> <td></td> </tr> <tr> <td style="text-align: center;">4</td> <td> Financial Sustainability: We will work with partners to transform models of care to deliver affordable, quality and sustainable services. </td> <td></td> </tr> </tbody> </table>					CCG Strategic Objectives		1	Strategic Commissioning: <ul style="list-style-type: none"> To take the lead in planning and commissioning care for the population of North Yorkshire by providing a whole system approach and to support the development of general practice. To make the best use of resources by bringing together other NHS organisations, local authorities and the third sector to work in partnership on improving health and care. To develop alliances of NHS providers that work together to deliver care through collaboration rather than competition. 	X	2	Acute Commissioning: We will ensure access to high quality hospital-based care when needed.		3	Engagement with Patients and Stakeholders: We will build strong and effective relationships with all our communities and partners.		4	Financial Sustainability: We will work with partners to transform models of care to deliver affordable, quality and sustainable services.	
	CCG Strategic Objectives																	
1	Strategic Commissioning: <ul style="list-style-type: none"> To take the lead in planning and commissioning care for the population of North Yorkshire by providing a whole system approach and to support the development of general practice. To make the best use of resources by bringing together other NHS organisations, local authorities and the third sector to work in partnership on improving health and care. To develop alliances of NHS providers that work together to deliver care through collaboration rather than competition. 	X																
2	Acute Commissioning: We will ensure access to high quality hospital-based care when needed.																	
3	Engagement with Patients and Stakeholders: We will build strong and effective relationships with all our communities and partners.																	
4	Financial Sustainability: We will work with partners to transform models of care to deliver affordable, quality and sustainable services.																	

5	Integrated / Community Care: With our partners and people living in North Yorkshire we will enable healthy communities through integrated models of care.	
6	Vulnerable People: <ul style="list-style-type: none"> We will support everyone to thrive [in the community]. We will promote the safety and welfare of vulnerable individuals. 	
7	Well-Governed and Adaptable Organisation: In supporting our objectives we will be a well-governed and transparent organisation that promotes a supportive learning environment.	X

CCG Values underpinned in this paper

CCG Values		X
1	Collaboration	X
2	Compassion	X
3	Empowerment	X
4	Inclusivity	X
5	Quality	X
6	Respect	X

Does this paper provide evidence of assurance against the Governing Body Assurance Framework?

YES		NO	X
-----	--	----	---

Any statutory / regulatory / legal / NHS Constitution implications	There is a requirement for each Committee to prepare an annual report for matters relating to the financial year. The full report is a requirement to be contained within the Annual Report and Annual Governance Statement.
Management of Conflicts of Interest	No conflicts of interest have been identified prior to the meeting.
Communication / Public & Patient Engagement	The final report will be published on the CCG website and a link will be provided in the CCG's Annual Report 2020/21.
Financial / resource implications	Not applicable.
Outcome of Impact Assessments completed	Not applicable.

Sasha Sencier
Board Secretary and Senior Governance Manager
NHS North Yorkshire CCG

NHS North Yorkshire Clinical Commissioning Group

Governing Body Committees Annual Report 2020/21

**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 2020/21

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 2020/21. The Audit Committee is a statutory requirement of the Health and Social Care Act 2012. This report provides the Governing Body of the North Yorkshire CCG 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.

Committee Membership	<p>Chair: Ken Readshaw, Lay Member for Audit and Governance</p> <p>Members as per Terms of Reference are as follows:</p> <p>The Committee shall consist of the following voting members:</p> <ul style="list-style-type: none"> • Lay Member for Audit and Governance (Chair) • Secondary Care Doctor (Vice-Chair) • Lay Member for Finance • 1 Governing Body GP Member <p>Required attendees (without voting rights):</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"> • Chief Finance Officer / Deputy CFO • Chief Nurse • Director of Corporate Services, Governance and Performance • Senior Governance Manager • Information Governance Manager • Internal auditors • External auditors <p>See Appendix A for dates of meetings held and members in attendance.</p>
Numbers required for quorum and any instances where the Committee was not quorate	<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 2020/2021.</p>
Conflicts of Interest	<p>No conflicts of interest were identified during the course of the year.</p>

Date of approval of terms of reference	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 terms of reference were reviewed by Internal Audit as part of the Governance audit which received an opinion of 'high assurance'.
Key Role of the Committee	<p>The Committee's overall objectives are to ensure that:</p> <ul style="list-style-type: none"> • The activities of the CCG are within the law and regulations governing the NHS • An effective system of internal control is maintained • An effective system of integrated governance exists within the CCG. <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>
Strategic risks delegated to the Committee for scrutiny as per the Assurance Framework	<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"> • 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 2020/21.
Main Responsibilities of the Committee	<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"> • Integrated Governance, Risk Management and Internal Control; • Internal Audit Function, including Internal Audit Reports and Recommendations; Internal Audit Opinion; • External Audit Function, including reviewing the work and findings of the external auditors and considering the implications and management's responses to their work; • Counter Fraud and Security; • 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.

Summary of the key outcomes of the work of the Committee and the assurances provided to the Governing Body of the North Yorkshire CCG

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:

- The CCGs are operating within the law and regulations covering the NHS.
- Effective systems of control are maintained.
- Arrangements are in place to protect the CCG's assets.
- Effective financial reporting and monitoring mechanisms are in place.
- An effective system of governance exists in the CCG.
- An effective system of risk management has been established and is kept under review.
- The CCG has an effective Internal Audit and External Audit service in place.
- The external auditors have operated independently and were able to issue opinions on the accounts and value for money for 2020/2021. (To be undertaken at the April and May 2021 meetings).
- The CCG has in place arrangements for managing fraud and security which will be kept under review subject to anticipated regulations and commissioning standards.

Audit Committee NHS North Yorkshire CCG: Attendance 2020/21

Members	29/04/20	23/06/20	16/07/20	17/09/20	24/11/20	18/02/21	Number of meetings attended
Ken Readshaw, Lay Member for Audit (Chair)	✓	✓	✓	✓	✓	✓	6
Dr Ian Woods, Secondary Care Doctor (Vice-Chair)	✓	✓	✓	A	✓	✓	5
Sheenagh Powell, Lay Member for Finance	✓	✓	✓	✓	✓	✓	6
Dr Chris Ives, GP Governing Body Member	A	✓	✓	✓	✓	✓	5
Total number of members in attendance	3	4	4	3	4	4	
Other Attendees							
Amanda Bloor, Accountable Officer	N/A	✓	N/A	N/A	N/A	N/A	1
Charles Parker, Clinical Chair	N/A	✓	✓	✓	✓	N/A	4
Jane Hawkard, Chief Finance Officer	✓	✓	✓	A	✓	✓	5
Julie Warren, Director of Corporate Services, Governance & Performance	✓	✓	✓	✓	✓	A	5
Sue Peckitt, Chief Nurse	✓	✓	✓	✓	A	A	4
Dilani Gamble, Deputy Chief Finance Officer	N/A	N/A	✓	N/A	N/A	N/A	1
Alec Cowell, Deputy Director of Financial services and Reporting	✓	✓	N/A	✓	N/A	✓	4
Alison Levin, Deputy Director of Management Accounting and Contracting	✓	N/A	N/A	N/A	N/A	✓	2
Sasha Sencier, Senior Governance Manager and Board Secretary	✓	✓	✓	✓	✓	✓	6
Claire Harrison, Senior Financial Services Manager	✓	N/A	N/A	N/A	N/A	N/A	1
Emma Parker, Corporate Services and EPRR Manager	N/A	N/A	N/A	N/A	✓	N/A	1
Mark Kirkham, External Audit	✓	✓	✓	✓	✓	✓	6
Ross Woodley, External Audit	✓	✓	N/A	N/A	N/A	N/A	2
James Collins, External Audit	N/A	✓	✓	✓	N/A	N/A	3
Campbell Dearden, External Audit	N/A	✓	✓	✓	N/A	✓	4
Helen Kemp-Taylor, Internal Audit	A	✓	✓	N/A	N/A	N/A	2
Kim Betts, Internal Audit	✓	✓	✓	✓	✓	✓	6
Steve Moss, Counter-Fraud	✓	N/A	N/A	N/A	N/A	N/A	1
Rosie Dickinson, Counter-Fraud	✓	N/A	✓	✓	✓	✓	5
Helen Sanderson, Information Governance	✓	N/A	N/A	✓	N/A	N/A	2
Phil Goatle, Vale of York CCG Audit Chair	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 2020/21

Introduction

This report covers the work of the Remuneration Committee of the NHS North Yorkshire CCG (NY CCG) for matters relating to the year 2020/21. 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.

<p>Committee Membership</p>	<p>Chair: Kate Kennady, Lay Member for Patient & Public Engagement</p> <p>Members as per Terms of Reference are as follows:</p> <p>The Committee shall consist of the following voting members:</p> <ul style="list-style-type: none"> • Lay member - Patient and Public Engagement (Chair) • Lay Member - Finance (Vice Chair) • 2 x GP Governing Body Members <p>No member of the Remuneration Committee should claim a significant proportion of their income from the CCG.</p> <p>The Chair of the Committee will be a Lay Member of the Governing Body who is not the Audit Chair.</p> <p>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.</p> <p>See Appendix A for dates of meetings held and members in attendance.</p>
<p>Numbers required for quorum and any instances where the Committee was not quorate</p>	<p>No business shall be transacted unless at least three members are present.</p> <p>This was achieved for all meetings in 2020/2021.</p>
<p>Conflicts of Interest</p>	<p>No conflicts of interest were identified during the course of the year.</p>
<p>Date of approval of terms of reference</p>	<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 terms of reference were reviewed by Internal Audit as part of the Governance audit which received an opinion of 'high assurance'.</p>

<p>Key Role of the Committee</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"> • Reviewing the performance of the Accountable Officer and other senior team members as appropriate. • 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’. • Receiving the output of the Governing Body appraisal process. • 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). • To recommend additional payments to the members of the governing body, for leading on particular tasks that are outside of their CCG role
<p>Strategic risks delegated to the Committee for scrutiny as per the Assurance Framework</p>	<p>No strategic risks as per the Assurance Framework have been delegated to the Committee for scrutiny.</p>
<p>Summary of the key outcomes of the work of the Committee and the assurances provided to the Governing Body of the North Yorkshire CCG</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"> • Remuneration of the Very Senior Managers (VSMs).

Remuneration Committee NHS North Yorkshire CCG: Attendance 2020/21

Members	11/02/21	Number of meetings attended
Kate Kennady, Lay Member for Patient and Public Engagement (Chair)	✓	1
Sheenagh Powell, Lay Member for Finance (Vice-Chair)	✓	1
Dr Mark Hodgson, GP Governing Body Member	✓	1
Dr Peter Billingley, GP Governing Body Member	A	0
Total number of members in attendance	3	
Other Attendees		
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 2020/21

This report covers the work of the NHS North Yorkshire CCG Primary Care Commissioning Committee (PCCC) meeting for matters relating to the year 2020/21. The PCCC is a statutory committee. This report provides the North Yorkshire 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.

Committee Membership	<p>Chair: Sheenagh Powell, Governing Body Lay Member Executive Lead: Wendy Balmain</p> <p>Members as per Terms of Reference are as follows:</p> <p><i>Voting Members:</i></p> <ul style="list-style-type: none"> • Lay Member for Finance (Chair) • Lay Member for Patient and Public Engagement (Vice Chair) • Chief Finance Officer* • Director of Strategy and Integration* • Chief Nurse* • 2 Governing Body GP representatives <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"> • NHS England/Improvement Representative – North East and Yorkshire • Healthwatch representative • Health and Wellbeing Board/Public Health Representative • North Yorkshire Local Medical Committee Representative • Commissioning Support Representatives • Other Officers of the CCG <p>See Appendix A for dates of meetings held and members in attendance.</p>
Numbers required for quoracy and any instances where the Committee was not quorate	<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 2020/21.</p>
Conflicts of Interest	<p>The following conflicts of interest were identified for 2020/21:</p> <p>23 July 2020</p> <p>Item 8.2 Central Healthcare Estates: Dr Omnia Hefni declared her conflict of interest due to being a GP Partner at the practice. The Chair declared that Dr Hefni would not be included in any discussions on agenda item at 8.2. Quorum was not affected.</p>

	<p>24 September 2020</p> <p>Item 6.3a, Practice Changes, Central Healthcare Scarborough: Dr Peter Billingsley declared a financial conflict of interest due to being a GP locum and Dr Omnia Hefni declared a conflict of interest due to being a GP Partner of Central Healthcare.</p> <p>Item 6.3b Practice Changes, Church Avenue Medical Group, Harrogate: Sheenagh Powell declared a conflict of interest due to being a patient at the neighbouring Nidderdale Practice as well as being Chair of the PCCC Committee.</p> <p>The Committee agreed that Dr Billingsley and Dr Hefni would not be included in any discussions or decisions in relation to agenda item 6.3a and that Sheenagh Powell would not be included in any discussions or decisions in relation to agenda item 6.3b and that the Vice-Chair would Chair the meeting for this agenda item. Quorum was not affected.</p> <p>No other declarations of interest in relation to the business of the meeting were received or noted.</p>
<p>Date of approval of terms of reference</p>	<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 terms of reference were reviewed by Internal Audit as part of the Governance audit which received an opinion of 'high assurance'.</p>
<p>Key duties of the Committee</p>	<p>The role of the Committee shall be 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"> • 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); • Newly designed enhanced services ("Local Enhanced Services" and "Directed Enhanced Services"); • Design of local incentive schemes as an alternative to the Quality Outcomes Framework (QOF); • Decision making on whether to establish new GP practices in an area; • Approving practice mergers; • Making decisions on 'discretionary' payment; these decisions will be in line with The General Medical Services Statement of Financial Entitlements (Amendment) Directions 2019 • Currently commissioned extended primary care medical services; • Newly designed services to be commissioned from primary care; • Approving and supporting the development of Primary Care Networks in line with NHS England Guidance; • The Network DES including Network Agreement, DES specifications, Network funding including Network Engagement Funding, Network Administration Payment, Workforce Reimbursement and Clinical Lead funding.

<p>Strategic risks delegated to the Committee for scrutiny as per the Assurance Framework.</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 monthly 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 Corporate Risk Register and Directorate Risk Register, regardless of their score, have been aligned to Committees. 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 2020/21, the NY CCG Governing Body developed its Governing Body Assurance Framework to map any significant risks that may affect the delivery of the strategic objectives. All risks were aligned to Committees to be reviewed quarterly at Committee meetings.</p> <p>During the first wave of the COVID-19 pandemic the Quality and Clinical Governance Committee took on the role of monitoring COVID-19 risks and met to do so every two weeks. All Covid-19 risks then became part of business as usual in terms of monitoring within the DRR and CRR.</p> <p>The Audit Committee reviews all risks twice per year.</p>
<p>Summary of the key assurances provided to the Governing Body.</p>	<p>During 2020/21 the PCCCs have provided oversight of:</p> <ul style="list-style-type: none"> • The Primary Care Strategy and updates from the CCGs • NHS England updates on Primary Care <p>The Chair or Vice-Chair of the PCCC has provided key messages and verbal updates to the Governing Body during 2020-2021. All of these updates have been published as part of the Governing Body papers on the CCG website.</p>

Primary Care Commissioning Committee NHS North Yorkshire CCG: Attendance 2020/21

Members	28/5/20	23/07/20	24/09/20	26/11/20	25/3/21	Number of meetings attended
Sheenagh Powell, Lay Member for Finance (Chair)	✓	✓	✓	✓	✓	5
Kate Kennady, Lay Member for Public and Patient Engagement (Vice-Chair)	✓	✓	✓	✓	✓	5
Wendy Balmain, Director of Strategy and Integration	✓	✓	✓	✓	✓	5
Sue Peckitt, Chief Nurse	A	✓	✓	✓	A	3
Jane Hawkard, Chief Finance Officer	✓	✓	A	A	A	2
Peter Billingsley, GP Governing Body Member – Hospital Based Care and Vulnerable People	✓	✓	✓	✓	A	4
Mark Hodgson, GP Governing Body Member – Integrated/Community Care	✓	A	A	✓	A	2
Bruce Willoughby, GP Governing Body Member – Integrated/ Community Care	✓	✓	✓	✓	✓	5
Total Number of Members Present	7	7	6	7	5	
In Attendance (Non-voting)						
Julie Warren, Director of Corporate Services, Governance & Performance	✓	N/A	N/A	N/A	N/A	1
Alec Cowell, Deputy Director of Financial Services and Reporting	N/A	N/A	✓	✓	✓ (V)	3
Dr Omnia Hefni, GP Clinical Lead – Workforce Development	✓	✓	✓	✓	✓	5
Andrew Dangerfield, Head of Primary Care Transformation	✓	✓	✓	✓	✓	5
Sasha Sencier, Senior Governance Manager and Board Secretary	✓	N/A	N/A	✓	✓	3
Tim Readman, Senior Communications Officer	N/A	N/A	N/A	✓	✓	2
Dr Sally Tyrer, GP and North Yorkshire Local Medical Council (LMC)	✓	✓	✓	✓	✓	5
Angela Hall, Health Improvement Manager, North Yorkshire County Council	✓	N/A	✓	✓	N/A	3
Chris Clarke, Senior Commissioning Manager, NHS England/Improvement	✓	N/A	✓	✓	✓	4
Clare Beard, Public Health Consultant North Yorkshire County Council	A	✓	A	A	N/A	1
Victoria Ononeze, Public Health Consultant, NYCC deputised for CB	N/A	N/A	✓	✓	N/A	2
David Iley, Primary Care Assistant Contracts Manager, NHSE/I	A	✓	N/A	N/A	N/A	1
Ashley Green, Healthwatch	N/A	N/A	✓	A	✓	2

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 2020/21

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 2020/21. 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.

Committee Membership	<p>Chair: Kate Kennady, Lay Member for Patient and Public Engagement Executive Leads: Sue Peckitt, Chief Nurse and Julie Warren, Director of Corporate Services, Governance and Performance.</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"> • Lay Member for Patient and Public Engagement (Chair) • Clinical Chair (Vice-Chair) • 2 GP Governing Body Members • GP Lead for Quality • Lay Member for Audit • Chief Nurse* • Director of Corporate Services, Governance and Performance* <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>
Numbers required for quoracy and any instances where the Committee was not quorate	<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"> • The Chair or Vice-Chair • One Clinician (Clinicians refer to GP Members only) • One Executive Member (A nominated deputy may not be included for this purpose). <p>There were no instances where the Committee was not quorate.</p>
Conflicts of Interest	<p>No conflicts of interest were identified during the course of the year.</p>
Date of approval of terms of reference	<p>The Terms of Reference were approved in April 2020 by the NHS North Yorkshire Governing Body.</p>
Key duties of the Committee:	<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"> • Providing assurance on the quality of services commissioned; and • Promoting a culture of continuous improvement and innovation with respect to safety of services, clinical effectiveness and patient experience.

<p>Significant Risks aligned to the Committee</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 monthly 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 Corporate Risk Register and Directorate Risk Register, regardless of their score, have been aligned to Committees. 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 2020/21, the NY CCG Governing Body developed its Governing Body Assurance Framework to map any significant risks that may affect the delivery of the strategic objectives. All risks were aligned to Committees to be reviewed quarterly at Committee meetings.</p> <p>During the first wave of the COVID-19 pandemic the Quality and Clinical Governance Committee took on the role of monitoring COVID-19 risks and met to do so every two weeks.</p> <p>The Audit Committee review all risks twice per year.</p>
<p>Summary of the key work of the Committee and the assurances provided to the Governing Body.</p>	<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"> • 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. • Overseeing the development and implementation and monitoring of the CCGs' Quality Strategy and Quality Assurance Framework. • 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. • Ensuring effective management of risk relating to quality and safety issues is in place to manage and address clinical governance issues. • Ensuring quality is driven through the Quality, Innovation, Productivity and Prevention programme (QIPP). • Ensuring the principles of quality assurance and governance are integral to performance monitoring arrangements for all CCG commissioned services

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 2020/21

Appendix A

*The Committee did not meet formally until July 2020 due to COVID-19 priorities, however the Committee did meet to review COVID-19 risks from April to July every two weeks.

Quality and Clinical Governance Committee

QCGC Membership 2020/21	2/7/20	6/8/20	1/10/20	5/11/20	3/12/20	4/2/21	Number of meetings attended
Kate Kennady, PPE Lay Member (Chair)	✓	✓	✓	✓	✓	✓	6
Dr Charles Parker, Clinical Chair (Vice-Chair)	A	A	✓	A	✓	✓	3
Dr Chris Ives, GP GB Member	✓	✓	A	✓	✓	✓	5
Dr Peter Billingsley, GP GB Member	✓	✓	✓	✓	✓	A	5
Ken Readshaw, Lay Member Audit	✓	✓	✓	✓	✓	✓	6
Sue Peckitt, Chief Nurse	✓	A	✓	✓	✓	✓	5
Julie Warren, Director of Corporate Services, Governance & Performance	✓	✓	A	A	✓	✓	4
Dr Sarah Hay, GP Clinical Lead	✓	✓	A	✓	✓	✓	5
Total Members in Attendance	7	6	5	6	8	7	
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	✓	✓	✓	✓	✓	✓	6
Mark Lagowski, Senior Nursing, Quality & Clinical Governance Manager	A	✓	✓	✓	✓	N/A	4
Nikki Henderson, Senior Nursing, Quality & Clinical Governance Manager	N/A	✓	✓	N/A	N/A	N/A	2
Elaine Wyllie, Designated Nurse Safeguarding Children	✓	N/A	N/A	N/A	N/A	N/A	1
Karen Hedgley, Designated Nurse Safeguarding Children	✓	✓	✓	✓	✓	✓	6
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	✓	✓	✓	4
Ken Latta, Head of Medicines Management	✓	N/A	✓	✓	✓	✓	5
Sasha Sencier, Board Secretary	✓	✓	✓	✓	✓	N/A	5
Suzanne Savage, Service Improvement Manager	N/A	N/A	✓	✓	N/A	N/A	2
Kirsty Kitching, Assistant Director of Mental Health & LD Partnership	N/A	N/A	N/A	✓	N/A	N/A	1
Suzanne Bennett, Head of Children and Young People, CHC	N/A	N/A	N/A	N/A	N/A	✓	1
Ashley Green, HealthWatch North Yorkshire	N/A	N/A	N/A	N/A	✓	N/A	1
Julie McGregor, Programme Director CHC and Vulnerable People	N/A	N/A	N/A	✓	✓	✓	3
Total Attendance	13	11	13	15	17	13	

A Apologies received

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

Finance, Performance, Contracting and Commissioning Committee Annual Report 2020/21

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 2020/21. 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.

Committee Membership	<p>Chair: Dr Ian Woods Executive Lead: Jane Hawkard</p> <p>The Membership throughout 2020/21 was open to all members to compose a minimum quorum however detail of Membership in the terms of reference are as follows:</p> <p>Core Membership:</p> <ul style="list-style-type: none"> • Secondary Care Doctor (Chair) • Clinical Chair (Vice-Chair) • GP Clinical Lead • Lay Member for Finance • Accountable Officer • Chief Finance Officer* • Director of Strategy and Integration* • Director of Acute Commissioning* • Director of Corporate Service, Governance and Performance* • Chief Nurse* <p>* nominated deputies may attend where core members are not able to attend, subject to prior approval from the Chair.</p> <p>See Appendix A for dates of meetings held and members in attendance.</p>
Numbers required for quoracy and any instances where the Committee was not quorate	<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"> • The Chair or Vice-Chair • One Clinician (Clinicians refer to GP Members and Chief Nurse) • Two Executive Members; one of whom must be Accountable Officer or CFO. <p>There were no instances where the Committee was not quorate.</p>

<p>Conflicts of Interest</p>	<p>The following conflicts of interest were identified during the course of the year and were managed as follows:</p> <p>18 June 2020</p> <p>Item 9.0 Local Enhanced Services (LES) Payment Up Lift. The Chair presumed that every GP who was a practice member would have a conflict of interest for this item. It was agreed that Dr Ingram and Dr Parker would remain for part of the discussion.</p> <p>Item 9.3 Stokesley GP Practice Capital funding bid. Dr Ingram reported that his in-laws are both patients at this GP Practice. The Chair determined that it was not necessary to exclude Dr Ingram from the discussion.</p> <p>20 August 2020</p> <p>Item 7.0 Minor Eye Care Service (MECS). It was noted that all GPs referred into the service but no specific conflicts were noted.</p> <p>Item 9.0 Capital Pipeline. Dr Alistair Ingram declared a conflict with regard to Ripon Community Hospital. It was confirmed that the update was presented to the committee for information and it was therefore agreed that Dr Ingram would remain for the discussion.</p> <p>17 September 2020</p> <p>Dr Parker declared that he worked in a practice that was in the same PCN as Glebe House, and he and Dr Ingram declared that the services they offered to patients would be improved by the development at Glebe House. The committee felt it appropriate to note the interest but felt that it should not bar either doctor from participating in the discussion. They would however be excluded from any committee vote on this decision.</p> <p>No other declarations of interest in relation to the business of the meeting were received or noted.</p>
<p>Date of approval of terms of reference</p>	<p>The Terms of Reference of the Finance, Performance, Contracting and Commissioning Committee were ratified in April 2020 by the Governing Body.</p>
<p>Key duties of the Committee:</p>	<p>The role of the Finance, Performance, Contracting and Commissioning Committee is:</p> <ul style="list-style-type: none"> • 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. • 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.

<p>Significant Risks aligned to the Committee</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 monthly 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 Corporate Risk Register (CRR) and Directorate Risk Register (DRR), regardless of their score, have been aligned to Committees. 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 2020/21, the NY CCG Governing Body developed its Governing Body Assurance Framework to map any significant risks that may affect the delivery of the strategic objectives. All risks were aligned to Committees to be reviewed quarterly at Committee meetings.</p> <p>During the first wave of the COVID-19 pandemic the Quality and Clinical Governance Committee took on the role of monitoring all COVID-19 risks and met to do so every two weeks. All Covid-19 risks then became part of business as usual in terms of monitoring within the DRR and CRR.</p> <p>The Audit Committee reviews all risks twice per year.</p>
<p>Summary of the key work of the Committee and the assurances provided to the Governing Body.</p>	<p>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:</p> <ul style="list-style-type: none"> • 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 QIPP 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. <p>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 2020-21.</p>

Attendance Records for 2020/21

Finance, Performance, Contracting and Commissioning Committee

FPCCC Members	16/4/20	21/5/20	18/6/20	16/7/20	20/8/20	17/9/20	15/10/20	19/11/20	17/12/20	18/2/21	18/3/21	Number of meetings attended
Dr Ian Woods (Chair), Secondary Care Doctor	✓	✓	✓	✓	✓	A	✓	✓	✓	✓	✓	10
Dr Charles Parker (Vice-Chair) Clinical Chair	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	A	10
Dr Alistair Ingram, Vice-Clinical Chair	A	✓	✓	✓	✓	✓	✓	✓	✓	N/A	N/A	8
Dr Bruce Willoughby, GP Governing Body Member	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	A	✓	1
Sheenagh Powell, Lay Member for Finance	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	11
Amanda Bloor, Accountable Officer	✓	✓	✓	A	✓	✓	✓	✓	A	A	A	7
Jane Hawkard, Chief Finance Officer	✓	✓	A	✓	✓	✓	✓	✓	✓	✓	✓	10
Wendy Balmain, Director of Strategy and Integration	✓	A	✓	A	✓	✓	✓	A	A	✓	✓	7
Sue Peckitt, Chief Nurse	✓	✓	✓	✓	✓	✓	A	A	A	A	A	6
Simon Cox, Director of Acute Commissioning	✓	A	A	A	A	A	A	✓	✓	✓	A	4
Julie Warren, Director of Corporate Services, Governance and Performance	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	11
Total Members attendance	9	8	8	7	9	8	8	8	7	7	6	
Other attendees (non-voting)												
Dilani Gamble, Deputy Chief Finance Officer	N/A	N/A	N/A	N/A	N/A	N/A	N/A	✓	N/A	N/A	N/A	1
Dr Mark Hodgson, GP GB Member	✓	✓	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2
Dr Chris Ives, GP GB Member	✓	✓	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2
Ken Readshaw, Lay Member for Audit	✓	✓	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2
Vanessa Burns, Deputy Director of Acute Commissioning	N/A	✓	N/A	N/A	N/A	✓	N/A	N/A	✓	N/A	N/A	3
Kirsty Kitching, Assistant Director of MH/LDP	N/A	✓	N/A	N/A	N/A	N/A	N/A	✓	✓	N/A	✓	4
Ken Latta, Head of Medicines Management	N/A	✓	N/A	N/A	N/A	N/A	N/A	✓	N/A	N/A	N/A	2
Steve Jordan, Assistant Director of Contracting & Procurement	N/A	✓	✓	N/A	N/A	N/A	✓	N/A	N/A	N/A	N/A	3
Alec Cowell, Deputy Director Financial Services & Reporting	N/A	N/A	✓	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	1
Lisa Pope, Deputy Director of Primary Care & Integration	N/A	N/A	✓	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	1
Sam Haward, Head of Community Services & Integration	N/A	N/A	✓	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	1
Christian Turner, Deputy Director Business Change & Planning	N/A	N/A	✓	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	1
Chris Ranson, Senior Pharmacist	N/A	N/A	N/A	N/A	N/A	✓	N/A	N/A	✓	N/A	✓	3
Total in attendance	3	7	5	0	0	2	1	3	2	0	2	

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