

Title of Meeting:	Governing Body Meeting			Agenda Item: 9.3									
Date of Meeting:	23 June 2022			<table border="1"> <thead> <tr> <th colspan="2">Session (Tick)</th> </tr> </thead> <tbody> <tr> <td>Public</td> <td>X</td> </tr> <tr> <td>Private</td> <td></td> </tr> <tr> <td>Workshop</td> <td></td> </tr> </tbody> </table>		Session (Tick)		Public	X	Private		Workshop	
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Public	X												
Private													
Workshop													
Paper Title:	Quality and Clinical Governance Committee Key Messages												
Responsible Governing Body Member Lead Kate Kennady, Lay Member for PPE and Chair of the Quality & Clinical Governance Committee			Report Author and Job Title Kate Kennady, Lay Member for PPE and Chair of the Quality & Clinical Governance Committee										
Purpose (this paper is for)	<table border="1"> <thead> <tr> <th>Decision</th> <th>Discussion</th> <th>Assurance</th> <th>Information</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td>X</td> <td></td> </tr> </tbody> </table>					Decision	Discussion	Assurance	Information			X	
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		X											
Has the report (or variation of it) been presented to another Committee / Meeting? If yes, state the Committee / Meeting: No.													
Executive Summary <p>The Quality and Clinical Governance Committee has been established to provide oversight on any quality or equality impact relating to all commissioned services through its review and monitoring of quality surveillance metrics that may indicate an adverse impact on quality or safety and therefore require further mitigation to be considered.</p> <p>The Committee provides assurance to the Governing Body that any risk to equality and quality has been appropriately mitigated and how continuous improvement will be monitored. The Committee also monitors safeguarding and oversees the development of and approve policies relating to HR and Corporate.</p> <p>The following assurance report details key topics discussed at recent meetings.</p>													
Recommendations <p>The Governing Body is asked to receive the report as assurance.</p>													
Monitoring <p>An assurance report on key topics discussed at the Quality and Clinical Governance Committee will be brought to each Governing Body meeting.</p>													
Any statutory / regulatory / legal / NHS Constitution implications		The Quality and Clinical Governance Committee is accountable to the Governing Body and is required to provide key messages from its meetings.											
Management of Conflicts of Interest		No conflicts of interest have been identified prior to the meeting.											
Communication / Public & Patient Engagement		Key Messages are published with the Governing Body Papers.											
Financial / resource implications		None identified.											
Significant Risks to Consider		No significant risks to consider.											
Outcome of Impact Assessments completed		Not applicable.											

Report to Governing Bodies on meeting of Quality & Clinical Governance Committee

Meeting Date: 9 June 2022

Chair: Kate Kennady

The meeting was held virtually using Microsoft Teams. The committee was quorate. There were 14 attendees in total, 8 of whom were attending to present papers. There were no conflicts of interest declared.

Items approved:

- The Minutes from the 7 April 2022 were approved as a true and accurate record of the meeting.
- The Safeguarding Adults Policy
- The Fast-Track Policy – to be approved post meeting via Chair's action.
- Equality and Diversity Annual Report
- Annual Nursing and Quality report
- Patient Relations Annual Report

Key items discussed and minuted and other agenda items that provide assurance:

- Receipt of Internal Audit Reports
- Significant Risk Review
- ICS Quality Framework
- COVID-19 Update
- 0-19 Healthy Child Monitoring
- Quality/Equality Impact Assessments Update
- The role of the Medical Examiner in relation to deaths at home
- Safeguarding Children's Annual Report – circulated post meeting for assurance and information.

Position Statements for hand-over to the ICS were provided for the following:

- a. LeDER Report
- b. Serious Incidents – Quarter 4
- c. Adult CHC Report & EOL/Fast Track
- d. Mental Health incl TCP Update Report
- e. Children & Young People's Commissioning & CHC
- f. Safeguarding Children **
- g. Safeguarding Adults **
- h. Freedom to Speak Up Guardian
- i. Slavery and Human Trafficking Statement

Key issues to highlight:

- TEVV - The mental health provider is still subject to quality escalations and continues to work with CQC relating to adult in-patient and forensic services. Good progress has been made with action plans, but workforce pressures and business continuity continue to put pressure on services.
- YSFT - A Section 29a Warning Notice has been issued by CQC. The Trust has shared improvement plans with NYCCG. Work is ongoing to find solutions and mitigations to the system pressures. There are significant pressures across the whole care system with recruitment, general staffing, and staff retention. The levels of staff sickness absence appear to be reducing and is due to C19+ and non-C19 related illnesses. Staff burn-out is also a significant issue. These issues continue to affect the patient flow in acute settings.
- CHC – Good progress has been made with continuing health care. A number of audits have been returned with an assurance level of "significant" which is a huge improvement on previous audits. The achievement for EOL/fast-track approvals is 100%. For CHC backlog and trajectories is currently at 80% YTD. Recruitment has been successful during the pandemic and advertisements are currently out for administration staffing.

- Children's Services – there is a lack of availability for out of area placements and some children have been placed in resource centres until a suitable placement can be found. There is also a lack of provider capacity for Autism services and work continues.
- The Spring Booster vaccination programme in North Yorkshire is nearing completion and guidance is awaited for the forthcoming Autumn vaccination campaign. It is hoped that the Flu and COVID-19 vaccines can be administered together to reduce staff time.
- The Chair confirmed this is the final meeting of the NCCG Quality and Clinical Governance Committee and the business of the meeting will be managed by the Integrated Care System (ICS) when established on 1 July 2022. The Chief Nurse clarified that a suite of documents, for due diligence purposes, are being prepared for the handover to the ICS. The new ICS staffing structure and governance arrangements are still awaited. It is understood there will be an ICS Quality Board and the Quality Surveillance Group meetings will continue.

END.