

Meeting: Governing Body- meeting in public			
Meeting Date	27 March 2019	Action	Approve
Item No.	3	Confidential	No
Title	Minutes and Action Log		
Presented By	Dr Jeff Schryer, CCG Chair		
Author	Emma Kennett, Corporate Affairs and Governance Manager		
Clinical Lead	-		

Executive Summary
<p>The minutes are presented as an accurate reflection of the previous meeting of the Governing Body, reflecting the discussion, decisions and actions agreed.</p> <p>Updates against the actions have been provided for information.</p>
Recommendations
<p>It is recommended that the Governing Body:</p> <ul style="list-style-type: none"> • Approve the minutes as an accurate record; and • Note the updates provided against the actions

Links to CCG Strategic Objectives	
To encourage people so that they want to, and do, take responsibility for their own health and well-being.	<input type="checkbox"/>
To drive and support system wide transformation.	<input type="checkbox"/>
To commission joined-up health and social care for people in Bury through a Single Commissioning Framework.	<input type="checkbox"/>
To achieve financial sustainability for the Bury health and social care economy.	<input type="checkbox"/>
To support the Locality Care Alliance to deliver high quality services in line with commissioner intentions.	<input type="checkbox"/>
To be a high-performing, well-run and respected organisation with an empowered workforce	<input checked="" type="checkbox"/>
Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:	
GBAF <i>n/a</i>	

Implications						
Are there any quality, safeguarding or	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

patient experience implications?						
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Have any departments/organisations who will be affected been consulted ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any financial Implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Has a Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Is a Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any associated risks including Conflicts of Interest?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
N/A						

Governance and Reporting		
Meeting	Date	Outcome
N/A		

Title	Minutes of the Governing Body (Public) held on the 23rd January 2019		
Author	Emma Kennett, Corporate Affairs and Governance Manager		
Version	0.2		
Target Audience	Public Members/Governing Body Members		
Date Created	31 st January 2019		
Date of Issue			
To be Agreed	27 th March 2019		
Document Status (Draft/Final)	Draft		
Description	Minutes of the Governing Body meeting in Public 23 rd January 2019		
Document History:			
Date	Version	Author	Notes
31/1/19	0.1	Emma Kennett	Forwarded to the CCG Chair for review.
8/2/19	0.2	Emma Kennett	Amendments made.
Approved:			
Signature:			
		 Dr Jeff Schryer, CCG Chair

Governing Body

Meeting in Public

MINUTES OF MEETING

Governing Body, 23rd January 2019 15:00-17:00

Chair – Dr Jeff Schryer, CCG Chair

ATTENDANCE

Members

Dr Jeff Schryer, CCG Chair (Chair)
Mr Peter Bury, Lay Member
Dr Daniel Cooke, Clinical Director
Dr Cathy Fines, Clinical Director
Mr Howard Hughes, Clinical Director
Mrs Catherine Jackson, Executive Nurse
Mr Geoff Little, Chief Officer
Mr David McCann, Lay Member for Patient and Public Involvement
Ms Margaret O'Dwyer, Director of Commissioning and Business Delivery
Mr Chris Wild, Lay Member for Finance and Governance
Mr Mike Woodhead, Chief Finance Officer

Others in attendance

Ms Lesley Jones, Director of Public Health, Bury MBC
Mr Paul Horrocks, Communications Advisor
Mrs Emma Kennett, Corporate Affairs and Governance Manager – minutes

Public Members/Officers

Mrs Carrie Dearden, Communications and Engagement Manager. Bury CCG
Mr David Parker, Public Member

MEETING NARRATIVE & OUTCOMES

1	Welcome, Apologies And Quoracy
1.1	Dr Schryer welcomed those present to the meeting and noted apologies had been received from: - <ul style="list-style-type: none">• Ms Fiona Boyd. Registered Lay Nurse of the Governing Body• Mrs Catherine Jackson, Executive Nurse
1.2	Dr Schryer advised that the quoracy requirements had not been satisfied, however in accordance with the CCG's constitution, at paragraph 6.10.6, the meeting would proceed and all decisions made would be in good faith and will remain valid. As this was outside the scheme of delegation, the Audit Committee would be notified in accordance with the Standing Orders.

2	Declarations Of Interest
2.1	The Chair reminded Governing Body members of their obligation to declare any interest they may have on any issues arising from agenda items which might conflict

	with the business of NHS Bury Clinical Commissioning Group.		
2.2	Declarations made by members of the Governing Body are listed in the CCG's Register of Interests which is presented under this agenda and also available from the CCG's Corporate Office or via the CCG website here .		
	Declarations of interest from today's meeting		
2.3	There were no declarations of interest from today's meeting raised.		
	Declarations of Interest from the previous meeting		
2.4	There were no declarations of interest from the previous meeting raised.		
ID	Type	The Governing Body:	Owner
D/01/01	Decision	Noted the published register of interests.	

3	Minutes Of The Last Meeting And Action Log		
	<ul style="list-style-type: none"> minutes 		
3.1	The minutes of the Governing Body meeting held on 19 th December 2018 were considered and agreed as a correct record.		
	<ul style="list-style-type: none"> action log 		
3.2	The Action Log was discussed and following comments were made: -		
	<ul style="list-style-type: none"> A/03/01 - Agreed that a further update on Urgent Care would be provided to the Governing Body in July 2018 which would be brought back at an earlier stage should this be deemed necessary from a governance perspective. It was noted that this action had been previously been attributed to Mr North who had now left the organisation and related to the decision taken in relation to Urgent Care and reviewing the current position in this regard. Ms O'Dwyer agreed to bring a report back to the Public Governing Body in March 2019 in relation to this action. A/09/06 - Ms O'Dwyer to liaise with Mrs Featherstone regarding the CCG's Risk Matrix. It was noted that this action was being progressed outside of the meeting and updates would be made to the GBAF paper as required. This action could therefore be removed from the Action Log. A/11/01 - A joint Race Equality Action Plan to be developed between the CCG and Council and brought back to a future Governing Body Meeting. It was noted that a Plan would be brought back to the Governing Body in March 2019. A/11/02 - A further update in respect of CCG and Council Support Services to be provided at a future Governing Body meeting. It was noted that an update would be brought back to the Governing Body in March 2019. A/11/03 - A further discussion in relation to the Mutually Binding Agreement to be provided to the Governing Body in January 2019 as part of the Transformation update. An update on this item would be provided as part of today's agenda however the final draft of the agreement was not yet available. A/11/04 - A communication to be produced for GP practices in relation to the current position surrounding the Cancer 2 week performance. It was noted that a communication had been sent to GPs on the 24th December 2018. This action could be removed from the Action Log. 		

ID	Type	The Governing Body:	Owner
D/01/02	Decision	approved the minutes of the meeting held on 19 th December 2018 as a true and correct record.	
D/01/03	Decision	closed the completed actions on the action log.	

4 CCG Chair and Chief Officer Update

4.1	<p>Dr Schryer and Mr Little provided an update on the latest CCG developments. It was reported that: -</p> <ul style="list-style-type: none"> Urgent Care Services had been busy over recent weeks with large numbers of attendances at A&E. It was noted that the Local Care Alliance (working as one team with partners across health, social care and the voluntary sector) and the One Commissioning Function between the CCG and the Council, had rapidly been introducing solutions to help the Bury system provide a better service to people at such a busy time. The first example of this related to Heathlands and their Discharge to Assess beds. Through this new scheme, Heathlands, a large residential and nursing home in South Bury, along with Pennine Care and social care staff, have come together to work in a different way to better co-ordinate the care and support needed to get people well and able to return home. Secondly, to help manage considerable pressures at the Fairfield site, in under 24 hours a new 'Homeward Bound Unit' was set up and staffed by BARDOC GPs, Pennine Acute and social care staff, to ensure medically fit patients who need some extra assessment or support in order to get them home, have everything in place to enable a timely discharge. The Greater Manchester Target Operating Model had been developed which set out the direction of travel for the next 10 years in Greater Manchester. The Council would be considering the 2019/20 budget as part of its governance arrangements in February 2019. It was noted that Mr Woodhead, Chief Finance Officer, Bury CCG had been involved as part of the early discussions within this area. The LCA would be operational as an LCO as from the 1st April 2019. It was noted that significant work was being undertaken in respect of the Integrated Neighbourhood Teams. In terms of the OCO, significant progress was being made which included the CCG's Leadership team and Corporate Office function now being co-located at the Town Hall. 		
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ID	Type	The Governing Body:	Owner
D/01/04	Decision	Noted the Chair and Chief Officer update.	

5 The NHS Long Term Plan

5.1	<p>Mr Little presented a report which set out some initial comments on the NHS Long Term Plan. It was noted that the full plan could be viewed at www.longtermplan.nhs.uk.</p>		
5.2	<p>It was reported that the comments in this brief note were from the perspective of the implications of the Long Term Plan for Bury's Locality Plan. It was noted that there were, of course, a much wider range of issues in the Long Term Plan with relevance to the mainstream of NHS services, for example workforce, digital and specific action on the quality of care across a range of health services and health conditions. There were also significant proposals for CAMHS and LD. It was important to also note that the</p>		

financial implications were not yet known. In conjunction with the discussion on the Long Term Plan, there was a further report on today's Governing Body agenda which would cover the NHS Planning Guidance in further detail.

- 5.3 Mr Little outlined the potential implications of the NHS Long Term Plan from a number of perspectives including how this would impact in terms of Governance and Strategic Planning, implementation, funding, LCO, Mental Health and Adult Social Care.
- 5.4 In terms of Adult Social Care, it was noted that that the Long Term Plan related to the NHS in England and the Adult Social Care (ASC) Green Paper had not been produced. It was highlighted that some acknowledgement of the importance of social care to the integration of community and primary care would have been helpful as part of this NHS plan however the Government had committed to funding ASC to an extent that it does not impose any additional pressure on the NHS over the next five years. It would have been good to see an acknowledgement that ASC could be part of reducing pressures on the NHS. That said, the commitment offered some hope of a more sensible level of ASC funding.
- 5.5 There was no reference to the need to resolve the VAT and other barriers to social care being included in contracts between single commissioning functions and LCOs - one of GM's most important asks. However the commitments to provide better NHS support to people in care homes was good and linked to the Teaching Care Home work. It would be important to engage residential care providers in co-designing how these improvements work and there was a need to keep ASC at the forefront of the Bury response to the Long Term Plan.
- 5.6 Mr Horrocks enquired about the work being undertaken in relation to Childhood obesity in the locality and whether this was factored into the NHS Long Term Plan. Ms Jones explained how the obesity agenda operated at local level and the work being undertaken at Greater Manchester level in relation to increasing physical activity. It was reported that as part this work, there was a need to challenge the food environment in order for lifestyle changes to become much easier. Mr Little commented that in terms of the NHS Long Term Plan, there was a need to ensure that the determinants of health are at the forefront of the Health and Social Care Agenda going forward to ensure that programmes and initiatives are in line with these requirements.
- 5.7 Mr Horrocks enquired specifically about the work currently being undertaken in local schools in relation to what advice was being provided in relation to diet/fizzy drink consumption. Ms Jones reported that there were some initiatives underway however this was a much wider issue that needed to be addressed across the borough. Dr Fines commented that there needed to be a plan around healthy choices. A general discussion took place regarding the obesity agenda locally, regionally and nationally. Dr Schryer suggested a further discussion at a future Governing Body meeting in relation to childhood obesity.
- 5.8 Mr Bury enquired about the funding components of the Long Term Plan and the evidence around investing in out of hospital services in order to deflect demand from emergency care in hospitals and whether this would be achievable. Mr Woodhead commented that a number of the transformation programmes were constructed in this way however there was always likely to be difficult discussions with the acute sector around the delivery of services and the associated movement of funds. Dr Schryer highlighted that the way in which service delivery was viewed needed to change as outlined as part of the Long Term Plan in terms of tackling health inequalities as a

collaborative system.

ID	Type	The Governing Body:	Owner
D/01/05	Decision	Noted the Long Term Plan Briefing note.	
A/01/01	Action	A further discussion around Childhood Obesity to take place at a future Governing Body meeting.	Ms Jones

6 NHS Planning Guidance

6.1 Ms O'Dwyer and Mr Woodhead provided a joint presentation in relation to the NHS Planning Guidance for 2019/20. The presentation covered: -

- The need for plans to be aligned at system level in terms of the CCG Operating Plan, Provider Plans and Refreshed Investment Agreement.
- National Priority areas including Mental Health, Primary and Community Care, Planned Care and Urgent Care.
- Greater Manchester Partnership priorities for 2019/20.
- The financial elements of the Planning Guidance were outlined which included: -
 - a Single operational planning process for commissioners and providers to produce an aggregated system overview to deliver collective priorities, changes to the payment system to support redesign, integration & prevention e.g. Procedures of Low Clinical Value (PoLCV) & Outpatients, alignment across finance, activity, contracting and workforce.
 - The Provider sector to be in financial balance by 2020/21 and individual trusts and CCGs by 2023/24. It was noted that in order to deliver this Trusts in deficit must put recovery plans in place.
 - Provider Sustainability Fund (PSF) reformed with £1bn transfer into urgent and emergency care pricing. Remaining PSF together with a new financial recovery fund (FTF) will be allocated to trusts in deficit who agree their 2019/20 rebased control total.
 - Required additional investment in Primary Care and Community Services at faster rate than the overall NHS growth % for the next 5 years.
 - Additional investment over parity of esteem in Mental Health services with specific reference to CAMHS services, which will receive a greater level of funding, with upper age limit extend to 25 to support transition.
 - Additional NHS funding in population health to compliment the existing funding from Local Authorities.
 - Waiting list levels in 2020 to be no higher than in March 2018, with new sanctions for 52 week RTT breaches will lead to a £2.5k fine for provider and commissioner
- The Financial Plan Assumptions including areas to note, areas of focus, risk and key dates.

6.2 Ms Jones referred to the Greater Manchester priorities and commented that it was surprising that Children's hadn't been included on the list.

ID	Type	The Governing Body:	Owner
D/01/06	Decision	Noted the presentation.	

7 Governance in an Integrated Health and Care System

7.1 Ms O'Dwyer presented a report in relation to the governance arrangements in an integrated Health and Care System.

7.2 It was reported that in 2016, the CCG and Council jointly signaled a direction of travel to

	develop an integrated approach to health and care commissioning, setting out the advantages and benefits that joined-up working will have for our patients and residents.
7.3	It was highlighted that more recently in October 2018, an Accountable Officer of the CCG, who is also the Chief Executive for the Council, was appointed to cement at the most senior level the joint working across both organisations.
7.4	It was reported that in addition, and to realise the ambition, the CCG and Council have identified key priorities as follows: - <ul style="list-style-type: none"> • Commissioning and decommissioning strategy; • Joint financial plan and reporting; • Pooled & aligned budgets & management arrangements; • Performance and outcomes framework; • Risk and quality assurance framework; and • OCO shadow / partnership agreement and governance including developing and agreeing a model for integrated commissioning.
7.5	Ms O'Dwyer informed members that the paper provided some background and context to start a discussion, specifically in relation to the last bullet point, on the options for more streamlined governance starting with the Governing Body, its Sub-Committees and the Primary Care Commissioning Committee.
7.6	Ms O'Dwyer referred to Section 3.13 of the report and outlined the current composition of the Governing Body from a statute and Constitutional perspective.
7.7	Dr Fines enquired about the process that would need to be followed should the CCG need to update its Constitution. Ms O'Dwyer reported that any changes to the Constitution would need to be approved by the CCG's Membership in the first instance prior to the proposed changes being submitted to NHS England.
7.8	Mr Bury enquired as to whether the Local Authority would need to submit a similar Governance paper via their governance arrangements to ensure this dovetails with the CCG's proposals. Mr Little referred to the role of the OCO Partnership Board and how this may evolve over time. In terms of the proposed governance workshop at the next Governing Body meeting, it was highlighted that there was a need to understand the overall objectives of the OCO/Single Commissioning Function prior to defining what the exact governance arrangements needed to be. It was suggested that Ms O'Dwyer reviews the governance models adopted in Tameside and Glossop and Manchester CCGs to assess how these components may work from a Bury perspective.
7.9	Ms Jones referred to the role of the Health and Wellbeing Board and the need to ensure this appropriately links in with any new integrated governance arrangements that are developed.
7.10	Mr McCann highlighted that there was a need to clearly articulate the end goal in terms of the OCO prior to the governance arrangements being defined. A general discussion took place regarding the future governance arrangements and how a single Commissioning Board would operate.
7.11	Mr Wild highlighted that there was a need to establish an operationally effective governance system which was compliant from the statutory perspective of both organisations.

7.12	Dr Schryer suggested holding a workshop between Governing Body and Council members to review the future Governance arrangements.		
7.13	Mr Hughes commented that it would be prudent to amend the existing governance arrangements when making changes within this area to prevent any delays in moving towards integrated arrangements. It was highlighted that any Governance Workshop arranged would need to be appropriately facilitated to ensure that the required outputs are achieved.		
ID	Type	The Governing Body:	Owner
D/01/07	Decision	Reflected on the content of the Governance paper.	
D/01/08/ A/01/03	Decision/Action	Supported arrangement of a joint workshop between the Governing Body and Council Cabinet in relation to the future governance arrangements.	Ms O'Dwyer
A/01/02	Action	Governance Models for Tameside and Glossop and Manchester CCG's to be obtained. The Models would need to be reviewed to assess whether any of the components could be adapted to form the basis of the governance arrangements in Bury.	Ms O'Dwyer/Mr Little

8	Annual Equality and Diversity Report for 2017/18		
8.1	Ms O'Dwyer commented that the draft Annual Equality and Diversity Report for 2017/18 was reviewed by the Quality and Performance Committee in January 2019. It was noted that a number of proposed changes were required in respect of this report and the final draft would be submitted the Governing Body for sign off in March 2019.		
ID	Type	The Governing Body:	Owner
D/01/09	Decision	Noted the information.	
A/01/04	Action	The final draft of the Equality and Diversity Report to be submitted to the Governing Body in March 2019.	

9	EU Exit operational readiness for the health and care system		
9.1	Ms O'Dwyer submitted a report regarding the EU Exit operational readiness for the health and care system.		
9.2	It was reported that the UK government was preparing for every Brexit scenario, including a 'no-deal' outcome. The UK Government and the EU have now agreed the basis upon which the UK will leave the EU in March 2019. A 'No deal' exit is not the Government's policy, but it has a duty to prepare for all scenarios.		
9.3	It was highlighted that Sir Chris Wormald, Permanent Secretary, had written to all providers and commissioners of NHS organisations to set out the guidance and actions to be taken locally to manage the risk of a 'no deal' exit. The guidance from the Department of Health and Social Care to all health and care organisations on how to prepare in case of a no-deal has been issued and focused on the implications on the NHS in the event that the United Kingdom (UK) leaves the European Union (EU) without a ratified agreement on 29 March 2019 – a 'no deal' exit.		

9.4	Ms O'Dwyer commented that the report included an Action Plan for Bury CCG in response to the EU Exit Operational Readiness actions that are required to be completed by Commissioners, as set out in the EU Operational Readiness Guidance, issued by the Department of Health and Social Care on 21 December 2018.
9.5	Mr McCann enquired about the specific assurances the CCG would be obtaining from providers as part of the EU Readiness Action Plan. Ms O'Dwyer reported that the CCG would be writing to providers in this regard to obtain the relevant levels of assurance.
9.6	Mr Horrocks referred to Section 2.2 of the report and the reference made to Commissioners' ability to ensure that their Contracted health and care service providers are ready to manage the risks arising in a 'no deal' exit. Ms O'Dwyer explained that there were three sets of action cards that had been published by the Department of Health and Social Care which each card outlining the different sets of responsibilities for each organisation. A general discussion took place regarding the different responsibilities placed on the CCG and Council from a Brexit perspective.

ID	Type	The Governing Body:	Owner
D/01/10	Decision	noted the action plan and progress reported to date	
D/01/11	Decision	noted the high level risk assessment that has been completed, and consider the current level of risk reported	
A/01/05	Action	EU Exit operational readiness for the health and care system to become a regular item at Governing Body meetings for the near future.	Ms O'Dwyer

10	Future of Pennine Care Foundation Trust Community Services including Waiver
10.1	Ms O'Dwyer presented a report in relation to the future of Pennine Care Foundation Trust Community Services.
10.2	It was reported that Bury CCG commissioned a range of community services from Pennine Care NHS Foundation Trust (PCFT) via a contractual arrangement which has been in place for a number of years. In December 2018, PCFT presented a final paper to their Board setting out their future business model. As well as providing community services to Bury and others, the Trust also delivers Mental Health services. In its paper "Trust Strategy 2019-22: Maximising Potential", the Board agreed that its future direction of travel will be to concentrate its business solely on the delivery of Mental Health and well-being services. The purpose of this report is to advise the Governing Body of actions which now need to be put in place to ensure the safe ongoing delivery of community services from another Provider in the interim and to approve the Northern Care Alliance under the legal entity of Salford Royal NHS Foundation Trust (SRFT) to be the designated interim Provider for a period of two years.
10.3	Mr Woodhead referred to Section 2.6 of the report and outlined the discussions that had taken place in relation to the potential procurement process being undertaken within this area. It was reported that the limited timescales would make it difficult to appropriately test the market and get the necessary expressions of interest to allow the CCG to make an informed decision about the future of community services in the wider context of all services within the purview of the LCA. This thinking and approach is in line with the other commissioners of PCFT community services in the North East Sector who are also developing and implementing transformation programmes via their

	<p>respective LCAs. It was noted that following the approval by the PCFT Board of their strategic intent in December 2018, there was both local and national media interest and a joint statement was developed setting out this rationale by way of response.</p>
10.4	<p>Mr Woodhead reported that the December 2018 meeting of the Finance, Procurement and Contracting Committee had an extensive discussion on the proposal from PCFT and the CCG's options including procurement. The Committee supported the rationale set out above. The Committee invited the Chief Finance Officer to progress a waiver and given the contractual value of the services in question asked that the Governing Body support progression of this waiver. It was noted that support for the waiver from the Audit Committee had also been canvassed and members had been supportive in this regard. It was highlighted that there would be a need for this to formally reported to the Audit Committee meeting on the 1st March 2019.</p>
10.5	<p>Mr Hughes sought assurance that it would not be in the best interest for a procurement exercise to be undertaken in relation to Community Services and that the Northern Care Alliance would be best placed to be appointed as a designated interim Provider for a period of two years. Mr McCann detailed the discussion that had taken place at the Finance, Contracting and Procurement Committee in this regard and the assurance received.</p>
10.6	<p>Ms Jones enquired whether Pennine Care would remain an LCA Partner from a Mental Health Service delivery perspective moving forward. It was confirmed that Pennine Care would remain an LCA Partner on this basis.</p>

ID	Type	The Governing Body:	Owner
D/01/12	Decision	Received the Report of PCFT which signals a new direction of travel focussing wholly on mental health and well-being services;	
D/01/13	Decision	Agreed to the Northern Care Alliance under the legal entity of SRFT to be the preferred interim Provider for the on-going delivery of community services commissioned by the CCG;	
D/01/14	Decision	Supported the Chief Finance Officer in signing a waiver in support of D/01/13 above;	
D/01/15	Decision	Noted subject to 2 D/01/13 above that the CCG's contract with PCFT for these services will novate to the new Provider during Q2 of 2019/20;	
D/01/16	Decision	Noted the governance being put into place across North East Sector commissioners in order to oversee this transaction; and	
D/01/17	Decision	Noted that a further progress report will be presented in July 2019 or earlier if significant issues materialise which could derail this process and timetable.	

11	Public Questions in relation to the agenda
11.1	It was noted that there had been no questions received from members of the Public in advance of the meeting.

11.2	There were no questions raised from public members in attendance at the meeting.		
ID	Type	The Governing Body:	Owner
D/01/18	Decision	Noted the information.	

12	Transformation Agenda update		
12.1	Mr Little provided an update on the latest Transformation developments. It was reported that: -		
	<ul style="list-style-type: none"> In terms of the Mutually Binding Agreement, this was nearing completion and the Investment Agreement element needed to be agreed. It was noted that this was a Provider Agreement, however there was a need for the Commissioner to be sighted on these arrangements and to support the Investment Agreement, the In Scope Services and the Risk and Reward Scheme. It was agreed that Mr Little, Dr Schryer, Mr Woodhead and a nominated Lay Member should be given delegated authority to sign off the schedules from a Commissioner perspective if required ahead of the Governing Body in March 2019. 		
12.2	Mr McCann commented that it would be useful for the Governing Body to have sight of the final Mutually Binding agreement once this is available.		
12.3	Ms O'Dwyer reported that a further discussion in relation to one of the Schedules 'In Scope Services' needed to take place at a future Governing Body meeting. Dr Schryer commented that it would be useful to have a further discussion at the February Governing Body meeting in this regard.		

ID	Type	The Governing Body:	Owner
D/01/19/ A/01/06	Decision/Action	Agreed that Delegated Authority should be given to Mr Little, Dr Schryer, Mr Woodhead and a nominated Lay Member to sign off the Schedules to the Mutually Binding Agreement from a Commissioner perspective if required ahead of the March Governing Body.	Mr Little/Dr Schryer/Mr Woodhead/nominated Lay Member
A/01/07	Action	Latest version of the Mutually Binding Agreement to be circulated to Governing Body members highlighting the schedules which require Commissioner support.	Mr Little
A/01/08	Action	Further discussion in relation to the Mutually Binding Agreement and 'In Scope' Services Schedule to take place at the February Governing Body Meeting (closed) ahead of the Final version of the MBA and the schedules being made available to the next Public Meeting in March 2019.	Mr Little/Ms O'Dwyer

13	Audit Committee Update
	a) Audit Committee Chair's Report
13.1	Mr Wild presented the latest Audit Committee Chair's report which summarised the main discussions held at the meeting on the 8 th January 2019.
13.2	It was reported that the latest Governing Body Assurance Framework was presented to the Audit Committee. The GBAF was presented to advise on the current levels of risk and continued actions to enable the delivery of the Strategic Objectives for 2018/19.
13.3	It was highlighted that following the last review of the Governing Body Assurance Framework (GBAF) a request had been made for the format of the report and the risk scoring matrix to be re-considered. It was highlighted that a comparative review against other GBAF reporting styles across the North West had been undertaken and the report format had been amended. Work to review the risk scoring matrix, in line with the refresh of the Risk Management Strategy would continue with a view to implementation for 01 April 2019.
13.4	Based on the comments received by the Audit Committee, it was agreed that the report for the Governing Body would take the form of a one page Executive Summary including the dashboard, with the detailed narrative included as part of the report to be appended to the back of the report. It was suggested that Committee Chairs be given the opportunity to appropriately comment on their respective risk areas as part of the GBAF item at future Governing Body meetings. A copy of the GBAF in it's revised format is included on today's Governing Body agenda.
13.5	It was highlighted that a report had been considered in relation to the External Contract arrangements for conducting the 2018/19 audit and the need for a contract extension being granted in line with the original contract to allow this audit to be carried out prior to a procurement process being conducted in respect of the 2019/20 audit.
	b) Governing Body Assurance Framework
13.6	Ms O'Dwyer submitted the latest Governing Body Assurance Framework report to the Governing Body.
13.7	As mentioned above, the newly formatted GBAF was presented to the Audit Committee in January 2019 and subject to some further minor formatting reports, the committee welcomed the revised layout particularly the summary dashboard presenting a quarter by quarter risk assessment.
13.8	It was highlighted that the GBAF report now included:- <ul style="list-style-type: none"> • Appendix 1 (New) – GBAF Summary Dashboard, reflecting quarter by quarter risk assessment history and trend. • Appendix 2 (Current) – comprehensive GBAF and • Appendix 3 (new) – GBAF narrative • Appendix 4 – Alignment of each risk included on the GBAF to a Committee, Sub Committee of Partnership
13.9	Ms O'Dwyer referred to the Action on the Action Log in relation to the CCG's Risk

	Matrix and commented that further work was being undertaken to review the local thresholds being used as part of the 5 by 5 matrix.
	c) Corporate Risk Register
13.10	Ms O'Dwyer presented the latest Corporate Risk Register report to the Governing Body.
13.11	It was noted that there were currently two (2) risks included on the Corporate Risk Register (operational risks) at a level 15 or above, excluding those reported through the Governing Body Assurance Framework (strategic risks):
13.12	Since the last report, two (2) risks had de-escalated from the Corporate Risk Register: <ul style="list-style-type: none"> • Biliary stents (PAHT) now a level 10 risk; and • Failure to operate within 2018/19 financial control totals now a level 9 risk.
13.13	The Audit Committee reviewed the Corporate Risk Register at it's meeting in January 2019 and recommended the report to the Governing Body.

ID	Type	The Governing Body:	Owner
D/01/20	Decision	Noted the Chair's update report from the Audit Committee.	
D/01/21	Decision	Received the GBAF report.	
D/01/22	Decision	Noted the changes in the report including the alignment of risks to CCG Committees or Partnership Boards.	
D/01/23	Decision	Invited input from Committee Chairs in respect of their GBAF risks.	
D/01/24	Decision	Discussed any concerns arising from the information presented.	
D/01/25	Decision	Received the Corporate Risk Register and information presented.	

14	Finance, Contracting and Procurement Committee Chair's Report
	a) Finance, Contracting and Procurement Committee Chair's Report
14.1	There was no update provided as this information would be covered as part of the Finance Report for Month 9
	b) Finance Report Month 9
14.2	Mr Woodhead submitted the latest Finance Report for Month 9 to the Governing Body. It was reported that the CCG financial position to month 9 was on plan. It was highlighted that the key points in the month 9 forecast outturn position were as follows: - <ul style="list-style-type: none"> • Acute services forecast has increased by £0.3m in month 9 (£2.5m in M8). This was primarily as a result of increased expenditure in elective areas. While non-elective activity had increased in month 9 the contracted cap has mitigated these pressures. • Mental health services were forecast to be overspent by £1.7m, which largely related to cost of additional beds required for Bury service users. • Primary care services were forecast to be overspent by £1.0m in total primarily

14.3	<p>due to prescribing costs within GP surgeries and GPIT costs.</p> <ul style="list-style-type: none"> The forecast position assumed delivery of the £8.5m QIPP (£3.6m identified schemes, £3.8m crystallised non-recurrent mitigations and £1.1m anticipated non-recurrent mitigations). The assessed risk to the delivery of the £8.5m target is £3.4m. Work was ongoing to crystallise and identify mitigating items. The CCG is reporting a net risk of delivering the forecast financial position of £1.5m. Work was ongoing through the accelerated savings group to expedite savings plans where possible to reduce this net risk position. <p>The underlying position reported to NHSE at month 9 is a forecast deficit of £5.7m. This represented the position excluding benefits and pressures that are non-recurrent, therefore showed the impact to the recurrent (2019/20) financial position.</p>
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ID	Type	The Governing Body:	Owner
D/01/26	Decision	Noted the CCG financial position at month 9, which was on plan;	
D/01/27	Decision	Noted that the forecast outturn position remained in line with plan subject to the net risk position;	
D/01/28	Decision	Took assurance from the Finance, Contract and Procurement Committee's scrutiny of the financial position.	

15	Quality and Performance Committee Chair's Report
	a) Quality and Performance Committee Chair's Report
15.1	Mr Bury commented that there were no specific items to raise that wouldn't be covered on other parts of the agenda.
	b) Quality Dashboard
15.2	Members received copies of the latest Quality Dashboard for information and assurance purposes.
	c) Performance Report
15.3	Ms O'Dwyer presented the latest Performance report to the Governing Body. The purpose of this report was to provide an updated position on the CCG's performance against the national performance indicators set out in the NHS Constitution, as monitored by NHS England.
15.4	The report presented the CCG's performance position for October 2018 and also outlined any proposed changes to performance at a national level.
15.5	It was highlighted that of the indicators presented in the dashboard at Appendix A, the most recent monthly data shows achievement against twelve.
15.6	Mr Horrocks referred to the Cancer performance issues outlined within the report and enquired about the messages that were being relayed to members of the public in this regard. Dr Schryer highlighted that it would be useful for a communication to be drafted

	to members of the public in this regard.
15.7	Ms O'Dwyer referred to the current Urgent care performance as outlined from Section 3.68 of the report and commented that the A&E performance at Fairfield General Hospital had recently dipped however the system is working together to respond to the current pressures.
15.8	Dr Fines updated members on the discussions at the Quality and Performance Committee in relation to ASD waits and commented that this would be reviewed further as part of the next SEND inspection.

ID	Type	The Governing Body:	Owner
D/01/29	Decision	Noted the Quality report.	
D/01/30	Decision	Noted the Performance Report and updates provided.	
A/01/09	Action	A communication to be drafted for Public Members in relation to the Cancer waits.	Ms O'Dwyer
A/01/10	Action	A focused workshop in relation to Cancer Performance to be arranged. Providers would be invited to this workshop session.	Dr Schryer/Ms O'Dwyer

16	Committee Chair Reports
	a) Patient Cabinet
16.1	Mr McCann submitted the latest Patient Cabinet Chair's report to the Governing Body which summarised the key items considered at the meeting in 6th December 2018.
	b) Primary Care Commissioning Committee
16.2	Mr Bury provided a brief update on the discussions and delegated decision making that had taken place at the PCCC Meeting earlier in the day (23 rd January 2019)

ID	Type	The Governing Body:	Owner
D/01/31	Decision	Noted the Patient Cabinet Update.	
D/01/32	Decision	Noted the Primary Care Commissioning Committee update.	

17	Closing Matters
17.1	Dr Schryer summarised the main discussion points of today's meeting and thanked members for their contributions. It was highlighted that there was a need to review the number of reports being presented to future Governing Body meetings to ensure that the amount of time dedicated to items is appropriate.

ID	Type	The Governing Body:	Owner
D/01/33	Decision	Noted the information.	
A/01/11	Action	To ensure that sufficient time is allocated to significant reports on Governing Body agendas.	Dr Schryer

Next Meeting	Wednesday, 27 th March 2019, 15.00-17.00 at Townside Primary Care Centre
Enquiries	Emma Kennett, Corporate Affairs and Governance Manager Emma.kennett@nhs.net

Governing Body Action Log

Status Rating



- In Progress



- Completed



- Not Yet Due



- Overdue

Title	Action	Lead	Status	Due Date	Update
A/03/01	Agreed that a further update on Urgent Care would be provided to the Governing Body in July 2018 which would be brought back at an earlier stage should this be deemed necessary from a governance perspective.	Ms O'Dwyer		27 th March 2019	<p>A formal presentation in relation to the Urgent Care developments/pilot would be provided to the Governing Body in September 2018</p> <p>It was reported that a presentation in relation to Urgent Care would be provided to a future Governing Body meeting at the appropriate time.</p> <p>It was noted that this action had been previously been attributed to Mr North who had now left the organisation and related to the decision taken in relation to Urgent Care and reviewing the current position in this regard. Ms O'Dwyer agreed to bring a report back to the Public Governing Body in March 2019 in relation to this action.</p> <p>An update to be provided at the March 2019 meeting.</p>
A/07/02	A formal presentation in relation to the Urgent Care developments/pilot would be provided to the Governing Body in September 2018.	Mr North		TBC	As per action A/03/01
A/11/01	A joint Race Equality Action Plan to be developed between the CCG and Council and brought back to a future Governing Body Meeting.	Mr Little		27 th March 2019	An update on this action to be provided at the March 2019 meeting.

Title	Action	Lead	Status	Due Date	Update
A/11/02	A further update in respect of CCG and Council Support Services to be provided at a future Governing Body meeting.	Mr Little		27 th March 2019	An update on this action to be provided at the March 2019 meeting.
A/11/03	A further discussion in relation to the Mutually Binding Agreement to be provided to the Governing Body in January 2019 as part of the Transformation update	Mr Little		23 rd January 2019	A further update on this matter would be provided to the Governing Body in February 2019 with the final MBA and supporting schedules to go to the March Governing Body.
A/1/01	A further discussion around Childhood Obesity to take place at a future Governing Body meeting.	Ms Jones		May 2019	
A/1/02	Governance Models for Tameside and Glossop and Manchester CCG's to be obtained. The Models would need to be reviewed to assess whether any of the components could be adapted to form the basis of the governance arrangements in Bury.	Ms O'Dwyer/Mr Little		February 2019	
A/1/04	The final draft of the Equality and Diversity Report to be submitted to the Governing Body in March 2019.	Ms O'Dwyer		27 th March 2019	Included on the agenda.
A/1/05	EU Exit operational readiness for the health and care system to become a regular item at Governing Body meetings for the near future.	Ms O'Dwyer		27 th March 2019	Included on the agenda.
A/1/06	Delegated authority to Dr Schryer, Mr Little, Mr Woodhead and a Lay Member in respect of the schedules to the MBA if commissioner approval is required before the next Governing Body.	Mr Little/Dr Schryer/Mr Woodhead/nominated Lay Member		27 th March 2019	Update included on the agenda.

Title	Action	Lead	Status	Due Date	Update
A/1/07	Latest version of the Mutually Binding Agreement and its schedules to be circulated to Governing Body members.	Mr Little		27 th February 2019	Latest draft shared at February Closed Meeting
A/1/09	A communication to be drafted for Public Members in relation to the Cancer waits.	Dr Schryer		27 th February 2019	
A/1/10	A focused workshop in relation to Cancer Performance to be arranged. Providers would be invited to this workshop session.	Dr Schryer/Ms O'Dwyer		TBC	This has been confirmed for the 9 th April 2019, 4.00pm at Townside Primary Care Centre.
A/1/11	To ensure that sufficient time is allocated to significant reports on Governing Body agendas.	Jeff Schryer		27 th March 2019	Ongoing