

<b>Meeting: Governing Body (Virtual Meeting)</b>			
<b>Meeting Date</b>	24 April 2020	<b>Action</b>	Approve
<b>Item No.</b>	3	<b>Confidential</b>	No
<b>Title</b>	Minutes of the Last Meeting and Action Log		
<b>Presented By</b>	Dr Jeff Schryer, CCG Chair		
<b>Author</b>	Emma Kennett, Head of Corporate Affairs and Governance		
<b>Clinical Lead</b>	-		

<b>Executive Summary</b>
<p>The minutes of the Public meeting held on 22 January 2020 are presented as an accurate reflection of the previous meeting of the Governing Body reflecting the discussion, decision and actions agreed.</p> <p>Updates against the actions have been provided for information.</p>
<b>Recommendations</b>
<p>It is recommended that the Governing Body:</p> <ul style="list-style-type: none"> <li>• Approve the minutes of the Public meeting held on the 22 January 2020 as an accurate record; and</li> <li>• Note the updates provided against the actions</li> </ul>

<b>Links to CCG Strategic Objectives</b>	
<b>SO1 People and Place</b> To enable the people of Bury to live in a place where they can co-create their own good health and well-being and to provide good quality care when it is needed to help people return to the best possible quality of life	☒
<b>SO2 Inclusive Growth</b> To increase the productivity of Bury's economy by enabling all Bury people to contribute to and benefit from growth by accessing good jobs with good career prospects and through commissioning for social value	☒
<b>SO3 Budget</b> To deliver a balanced budget	☒
<b>SO4 Staff Wellbeing</b> To increase the involvement and wellbeing of all staff in scope of the OCO.	☒
Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:	
GBAF N/A	

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

Governance and Reporting		
Meeting	Date	Outcome
N/A		

<b>Title</b>	<b>Minutes of the Governing Body (Meeting in Public) held on the 22 January 2020</b>		
<b>Author</b>	Emma Kennett, Head of Corporate Affairs and Governance		
<b>Version</b>	0.1		
<b>Target Audience</b>	Public Members/Governing Body Members		
<b>Date Created</b>	January 2020		
<b>Date of Issue</b>	January 2020		
<b>To be Agreed</b>	25 March 2020		
<b>Document Status</b> (Draft/Final)	Draft		
<b>Description</b>	Minutes of the Governing Body meeting in Public 22 January 2020		
<b>Document History:</b>			
<b>Date</b>	<b>Version</b>	<b>Author</b>	<b>Notes</b>
	0.1	Emma Kennett	Forwarded to the CCG Chair for review
<b>Approved:</b>			
<b>Signature:</b>			
			..... <b>Dr Jeff Schryer, CCG Chair</b>

# Governing Body

## Meeting in Public

### MINUTES OF MEETING

Governing Body, 22 January 2020 15:00-17.00

Chair – Dr Jeff Schryer, CCG Chair

## ATTENDANCE

### Members

Dr Jeff Schryer	CCG Chair (Chair)
Mrs Fiona Boyd	Registered Lay Nurse of the Governing Body
Mr Peter Bury	Lay Member
Dr Daniel Cooke	Clinical Director
Dr Cathy Fines	Clinical Director
Mr Howard Hughes	Clinical Director
Ms Catherine Jackson	Executive Nurse
Mr Geoff Little	Chief Officer
Ms Margaret O'Dwyer	Director of Commissioning and Business Delivery
Mr Peter Thompson	Secondary Care Clinician
Mr Chris Wild	Lay Member – Finance
Mr Mike Woodhead	Joint Chief Finance Officer

### Others in attendance

Ms Lesley Jones	Director of Public Health
Mrs Emma Kennett	Head of Corporate Affairs and Governance – Minutes

### Public Members/Officers

Mr Joseph Timan	Bury Times
Mrs Carrie Dearden	Communications & Engagement Manager, Bury CCG
Ms Barbara Barlow	Healthwatch Chair/Public Member
Ms Karen Johnston	Head of Communications, Engagement and Marketing, Bury CCG / Bury Council

## MEETING NARRATIVE & OUTCOMES

<b>1</b>	<b>Welcome, Apologies And Quoracy</b>
1.1	Dr Schryer welcomed those present to the meeting and noted apologies had been received from: - <ul style="list-style-type: none"><li>Mr David McCann, Lay Member for Patient and Public Involvement</li></ul>
1.2	Dr Schryer advised that the quoracy requirements had been satisfied in accordance with the CCG's Constitution. The meeting was therefore declared quorate.
<b>2</b>	<b>Declarations Of Interest</b>
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 <a href="#">here</a> .		
2.3	<b>Declarations of interest from today's meeting</b> There were no declarations of interest for today's meeting raised.		
2.4	<b>Declarations of Interest from the previous meeting</b> 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	<b>Minutes of the last Meetings and Action Log</b>		
3.1	<ul style="list-style-type: none"> <li>• <b>Minutes</b> The minutes of the Governing Body meeting held on 27 November 2019 were considered and agreed as a correct record.</li> <li>• <b>Action Log</b></li> <li>• A/11/01 - A further report in relation to Communications and Engagement would be submitted to the Governing Body meeting in January 2020. It was noted that a presentation on the latest Communications and Engagement campaign and associated activity was included on today's Governing Body agenda and the full strategy would be submitted to the meeting in March 2020.</li> </ul>		
ID	Type	The Governing Body:	Owner
D/01/02	Decision	Approved the minutes of the meetings held on the 27 November 2019.	

4.	<b>CCG Chair and Chief Officer Update</b>		
4.1	<p>Mr Little provided an update on the latest CCG and Council developments. It was reported that: -</p> <ul style="list-style-type: none"> <li>• Work was ongoing in relation to the development of the Bury Strategy for 2030 which would be aligned to the work being undertaken in Greater Manchester. It was noted that engagement on the strategy was in progress. A Team Bury/Strategy Event with partners was scheduled to take place on the 23<sup>rd</sup> January 2020. The neighbourhood model was a key element of the strategy in terms of focusing on integrated working. The draft Strategy would be brought back to the Governing Body at an appropriate time.</li> <li>• Bury had been successful in becoming the first Town of Culture within Greater Manchester. A launch event had taken place yesterday which had included a number of performances and fun activities. There was a need to understand the importance of cultural activity on long term wellbeing.</li> <li>• Dr Schryer had visited Unsworth Medical Centre in the South of Bury earlier today to present two staff members with staff awards as they weren't able to attend the Staff Award event in December 2019. The category was the only 'public voted for' category: The Patient Choice Award. Mr Bury and Ms Barlow had been involved in the judging panel for the awards and there had been a high calibre of nominations received. Dr Schryer commented that Bury was</li> </ul>		

4.2	known for having strong GP Practices and the Governing Body commended the staff members at Unsworth for this achievement.		
	Dr Schryer referred to Bury being the first Town of Culture and emphasised the important role that culture has in individual lives.		
ID	Type	The Governing Body:	Owner
D/01/03	Decision	Noted the information	
D/01/04	Decision	Commended the staff members at Unsworth Medical Centre for the Patient Choice Award achievement.	

5.	Governance
	<ul style="list-style-type: none"> <li><b>Governing Body and SCB Sub Structure</b></li> </ul>
5.1	Mr Little presented a report which built on the two previous reports that had been considered at the meetings of the Strategic Commissioning Board in October and November 2019 and also reflected feedback from the CCG's Governing Body, specifically in respect to future arrangements for the discharge of duties with regard to involving the public in commissioning.
5.2	<p>In summary, the paper set out: -</p> <ul style="list-style-type: none"> <li>A high-level timeline for delivering an operation sub-governance structure by 1<sup>st</sup> April 2020 to support the Strategic Commissioning Board in receiving and providing onward assurance as necessary to the Governing Body and Cabinet respectively;</li> <li>Additional assurance in respect of patient and public involvement for recommendations to be made by the Strategic Commissioning Board to the Governing Body in respect of a final decision for the future of the Patient Cabinet, which currently was a sub-committee of the Governing Body, and high level support for a system-wide Professional Reference Board.</li> </ul>
5.3	It was highlighted that further work was ongoing in respect of developing a Single Finance Committee between the CCG and Council as well as a single Quality & Performance Assurance Board.
5.4	Mrs Jackson referred to the reference within the report about the Terms of Reference for the new Quality & Performance Committee being shared and commented that she had not yet had sight of this information. Ms O'Dwyer would ensure that these Terms of Reference were shared as per the action within the report.
	<ul style="list-style-type: none"> <li><b>Proposed new OCO Structure</b></li> </ul>
5.5	Mr Little submitted a report in relation to the proposed new OCO Structure.
5.6	The report brought together the outcome of the consultation on the re-structuring of the CCG to create the One Commissioning Organisation (OCO) and where relevant, the associated changes in Bury Council that also impact on the OCO.

5.7	It was highlighted that Bury Council and CCG have been working under the leadership of a single Chief Executive / Chief Accountable Officer since October 2018. The two organisations have committed to integrate fully to drive better health outcomes and reduce demand and therefore cost through the establishment of a One Commissioning Organisation (OCO).
5.8	In terms of the consultation process, the proposals within both CCG and Council had been subject to an extensive period of 90 days consultation, with numerous opportunities for staff to comment on proposals via a range of engagement methods.
5.9	It was noted that following feedback, amendments were made to the proposals in a number of areas including reviewing the proposals for the integration of the I.T. functions, recognising the need for a specific focus on children's commissioning at this particular time, clarifying that the Council's proposals for an on call rota would be limited to the most senior Council Officers, recognising the need to strengthen information governance, and acknowledging that as the Council and CCG remain separate statutory bodies, there were differences in terms and conditions and policies for staff. In terms of children's commissioning, further detailed proposals on this element would be brought back to the Governing Body and Council Cabinet at an appropriate time.
5.10	The objective of creating the One Commissioning Organisation was also clarified as the integration of Council and CCG structures in order that the two organisations work together in a formal partnership, with integrated delivery teams working as one; joint leadership and common support services to deliver quality outcomes and cost efficiency. The OCO is the delivery vehicle for all Bury health and care commissioning which will operate within an integrated CCG and Council structure to a Joint Executive Team. It was noted that the implementation of the new structures would be evaluated as part of the ongoing process to ensure that arrangements were being usefully embedded and that no adverse operational issues were being encountered hence demonstrating whether the changes had been 'Well Led'.
5.11	An OCO Staff Event had been arranged for the 29 <sup>th</sup> January 2020 which would provide a further opportunity to discuss with staff about how they may fit into the new structure.
5.12	It was highlighted that the Executive Director of Strategic Commissioning role would be advertised during week commencing 27 <sup>th</sup> January 2020.
5.13	Mr Hughes emphasised that the OCO developments were extremely positive and these changes were welcomed.

ID	Type	The Governing Body:	Owner
D/01/05	Decision	Noted the high-level timeline proposed;	
D/01/06	Decision	Supported the proposal for a robust system wide Professional Reference Board to be established which spans the OCO in its widest sense, including representation from each Partner within the LCO and note that further work is ongoing to confirm the remit;	

D/01/07	Decision	Noted the approach in respect to patient and public involvement, including the principles and mechanisms set out in the paper which will be incorporated into the Communication and Engagement Strategy 2020-2023;	
D/01/08	Decision	Noted the update in respect to the Finance Committee;	
D/01/09	Decision	Noted the update in respect to the Quality and Performance Assurance Committee.	
D/01/10	Decision	Approved the outcome of the consultation and note the proposals for next steps.	
D/01/11	Decision	Noted that at an appropriate time, changes to the CCG Constitution will be required.	
A/01/01	Action	The Terms of Reference for the new Quality and Performance Assurance Committee to be shared with the relevant individuals within the CCG and Council.	Mrs Featherstone
A/01/02	Action	Further detailed proposals on Children's Commissioning would be brought back to the Governing Body and Council Cabinet at an appropriate time.	Mr Little

<b>6.</b>	<b>Communication and engagement campaign update / planned activity</b>
6.1	<p>Ms Johnston was in attendance to provide a presentation in relation to the Communication and engagement campaign update / planned activity. It was reported that: -</p> <ul style="list-style-type: none"> <li>• “Bury’s got the right care for you” was a new borough-wide behaviour change campaign, with the main launch planned for early February 2020.</li> <li>• Key opportunity for making necessary financial savings around the way people engage with our public services, particularly in the NHS.</li> <li>• Campaign objectives to support this included encouraging people to consider and use alternatives to A&amp;E, communicating the current financial pressures faced by Bury’s public services and helping people to help themselves – creating a better understanding of how to find services, and how to use them properly.</li> <li>• In terms of the campaign development, the CCG was working with a creative agency to develop a suite of materials to work across two phases, colouring aligned with national ‘Choose Well’ campaign, icons had been used for different service types e.g. stethoscope = GP and simple messaging had been developed to cut through to busy lives.</li> <li>• In terms of the Campaign Phase 1a and 1b, Phase 1a ran before and over Christmas with references to festive opening hours; phase 1b is current. This included awareness raising of Bury’s health and care service offer, organic social media on CCG and partner channels and paid for activity on Facebook and Snapchat as below, Google ‘key word search’ advertising and encouraging initial feedback and analytics.</li> </ul>



- In relation to Campaign Phase 2, this was currently under development which would launch early February 2020. It would be fronted by real people from Bury, talking about the great care they've received in the borough covering all sorts of services including pharmacy, extended GP hours, walk-in centres and out-of-hours.
- In terms of the Campaign microsite, a bespoke campaign microsite had been commissioned which incorporated a service finder, general information on Bury health and care services and how to use them. A memorable URL had been developed namely findnhsservicesbury.org.uk.
- The Campaign planning and next steps were outlined which included using partners to leverage communications, for example, Fairfield, primary care, Bury Council, voluntary sector, paid for channels including Facebook, Google, Snapchat and bus shelter sides across the borough, printed materials including A4 posters, A5 leaflet for GP surgeries.
- In terms of the legacy of microsite and suite of materials – develop an 'always on' campaign for Bury that continues to meet our objectives.
- The Communication and Engagement Strategy was being developed and would be submitted to the Governing Body in March 2020. As part of this, there were plans to develop a Lived Experience Panel which the CCG could call upon for consultation when required.
- Work was on going in respect of collating the evidence for the Community Engagement indicator with all evidence being required by the 10 February 2020.

6.2 Mrs Jones enquired whether the service finder suggested what service would be best for individuals. Ms Johnston reported that the different services were displayed; however it did not suggest particular services. It was noted that there was an opportunity to include further narrative about available services as part of the microsite

6.3 Mrs Jones also enquired about the use of the Bury directory and whether the campaign was also linking in via this route. Ms Johnston would explore this further as part of the planned activities.

6.4 Ms O'Dwyer highlighted the importance for members of the public being kept informed of available services and the need for these messages being reinforced. It was noted that this work linked to the urgent care work and it would be useful to evaluate the success of the campaign to assess whether individuals may have selected other services in the absence of the campaign.

6.5 Dr Fines reported that there was a need to eliminate any urban myths as part of the campaign as there was often a perception that GP appointments could not be made which is not always the case.

6.6 Mr Wild enquired whether technology could be used to access available GP appointments in real time. Dr Schryer stated that there was an application available however this was not compatible with the current GP IM&T system in Bury.

ID	Type	The Governing Body:	Owner
D/01/12	Decision	Noted the presentation.	

<b>7.</b>	<b>Finance</b>
	<b>a) Finance Committee Chair's Report</b>
7.1	Mr Wild provided an update following the Finance, Contracting & Procurement Committee meeting held on the 16 <sup>th</sup> January 2020. It was reported that there had been one procurement decision taken at the meeting which related to a 2 year contract in relation to ASD/ADHD.
	<b>b) Finance Report and 2020/21 Budget</b>
7.2	Mr Woodhead presented the latest finance report in relation to the Month 9 position and provided a verbal update on the 2020/21 Budget.
7.3	It was highlighted that the CCG was projected to achieve its financial plan for 2019/20, i.e. delivery of the in-year breakeven control total set by NHS England (NHSE).
7.4	The key points to note were outlined as follows: - <ul style="list-style-type: none"> <li>• Acute services were forecast to overspend at year end by £2.9m. This is related to over performance in acute contracts predominantly non-elective services.</li> <li>• The CCG position assumes full delivery of £12.5m QIPP. There is a high level of risk to this delivery at month 9, with £8.3m of the gap unidentified. The CCG and Local Authority are working to mitigate this through the pooled budget arrangement.</li> </ul>
7.5	In terms of the 2020/21 budget, the full planning guidance had been expected in advance of today's meeting however the full detail would not be available until week commencing 27 <sup>th</sup> January 2020.
7.6	It was anticipated that there would be significant challenges faced from a financial perspective during the next financial year with some difficult decisions that needed to be taken in terms of prioritisation which would ultimately require Governing Body approval. It was noted that in the region of £40m savings were required over the next 5 years.
7.7	It was reported that there were also challenges across the wider health and social care economy that needed to be considered.
7.8	The deadline for submission of financial plans was the 9th April 2020 and the CCG would continue to have discussions via the appropriate governance routes including SCB and the Finance, Contracting and Procurement Committee.
7.9	Dr Schryer commented that this was a challenging position as part of a wider challenged system.
7.10	Mr Hughes highlighted that there had been unprecedented demand in urgent care in recent times which was having an impact on demand. It was reported that the CCG needed to work in conjunction with the public to ensure people are accessing the right services at the right time. Ms O'Dwyer stated that providers also had a role to play in managing demand and there was a need to work together as a system to manage demand.

7.11	Mr Woodhead reported that from a capacity point of view, there were limited alternatives to absorb any demand. Mr Little commented that a long term solution was required to tackle these demand issues.		
ID	Type	The Governing Body:	Owner
D/01/13	Decision	Noted the Chair's update from the Finance, Contracting & Procurement Committee held on the 16 <sup>th</sup> January 2020.	
D/01/14	Decision	Noted the CCG financial position at month 9, which is in line with plan.	
D/01/15	Decision	Noted the position and risks to delivery of QIPP.	

8.	Public Questions in relation to the agenda		
8.1	There were no questions raised.		
ID	Type	The Governing Body:	Owner
D/01/16	Decision	Noted the information,	

9.	Quality & Performance		
	<ul style="list-style-type: none"> <li><b>Quality &amp; Performance Committee Chair's Report</b></li> </ul>		
9.1	Mr Bury submitted the Quality and Performance Committee Chair's report to the Governing Body which specifically focused on the deep dive undertaken in respect of growth in elective waits which was considered at the Quality & Performance Committee meeting held on the 8th January 2020.		
9.2	It was highlighted that the Quality & Performance Committee undertook a deep dive into the newly identified risk in respect of growth in elective waits. The risk, which was identified in September 2019, was added to the Risk Register following initial assessment in October, on a level 20 risk. This was primarily identified as a risk to service delivery, the risk owner and Committee have set a target level of risk at 16 to be achieved by 31 March 2020.		
9.3	It was reported that this risk was added to the Risk Register due to the growth in waiting times within Bury rising exponentially and therefore potentially impacting on achievement of the national waiting time standard, and subsequently patient outcomes.		
9.4	It was noted that whilst controls and mitigations have been identified and were being progressed, it was acknowledged that these would only reduce the risk to a level 16 if they were realised, however slippage in QIPP schemes, affordability of measures to reduce waits and issues within the management of existing risks were likely to be addressed before the end of the financial reporting year. Whilst it was recognised that transformation would ultimately deliver improvements, this risk was time dependent, and there was a need to consider an immediate approach.		
9.5	The Committee's view was that this was a significant system risk and should be considered as a risk to delivery of the CCG's strategic objectives and included in the Governing Body Assurance Framework (GBAF).		

9.6	Mr Little highlighted that there needed to be clear revised action plans developed to address this issue. Mr Hughes commented that there was a risk from a financial perspective should there be an expedition of waiting times therefore consideration needed to be given as to what specialities may need to be targeted. It was agreed that the revised action plans would need to be submitted to the Governing Body meeting given the significance of these issues.
9.7	Mr Thompson referred to the role of Primary Care from a referral management perspective. Ms O'Dwyer commented that the referrals from GPs were on the decrease and there was also a need to consider the impact of Consultant to Consultant referrals on capacity/demand. <ul style="list-style-type: none"> <li>• <b>Deep Dive on Elective Care</b></li> </ul>
9.8	Ms O'Dwyer gave a presentation which provided a deep dive on Elective Care. The presentation covered: - <ul style="list-style-type: none"> <li>• Elective Waits – targets and current position. It was noted that the Constitutional Standard was for 92% of patients to commence treatment within 18 weeks. Temporary dispensation was for there to be fewer patients waiting in March 20 than March 18. For Bury, this meant the waiting list should be 12,979 or less by March 20. As at November 19, there were 16,146 Bury patients on a waiting list. This equated to 3,167 or 24.4% more patients than in March 2018. The November 2019 actual position was much worse than the anticipated level in the trajectory.</li> <li>• Speciality/provider breakdown.</li> <li>• The issues leading to increased waiting lists.</li> <li>• The current position.</li> <li>• What was being done to reduce the lists.</li> <li>• PAHT Action Plans that had been developed which included Strategic CCG-led and joint provider/CCG actions and Operational CCG-led and joint provider/CCG actions.</li> <li>• The work being undertaken with the Northern Care Alliance in relation to the Outpatient Transformation Programme.</li> </ul>
9.9	Dr Schryer commented that this was a very comprehensive presentation with the issue of increased waiting lists requiring immediate attention.
9.10	Mrs Boyd enquired whether the CCG was confident that all virtual clinic opportunities were being explored and enquired whether there were any hidden waiting lists that had been identified. Mrs Jackson reported that a new electronic system was in place for managing waiting lists and that hidden waiting lists had been expected as a result of this during November/December 2019. Mrs Boyd commented that this may account for the increased trajectory during this time. Mrs Jackson reported that further information had been requested in relation to the number of people waiting.
9.11	Mr Hughes commented there appeared to be a lot of work being undertaken at Directorate level and highlighted it may be beneficial to have a System Wide Sub Group for implementation of any plans within this area. A general discussion took place regarding the issues impacting on the increased waiting lists including the pension offer, increased demand, capacity and workforce issues.

9.12	Mrs Boyd enquired whether there was confidence about the different workforce and planning models that were being explored further including the role of the Advanced Nurse Practitioner. Mrs Jackson explained the ongoing work within this area and commented that there was a lack of workforce resilience at a national level at the moment which needed to be addressed.
9.13	Dr Schryer enquired about patient choice and how this information could be relayed to patients in a way that did not have an adverse impact on waiting lists. Ms O'Dwyer commented on the role of the Referral Booking Centre in this regard. A general discussion took place regarding the role of GPs in the context of the Patient Choice agenda linked to the current financial position of the CCG.
9.14	Dr Schryer emphasised that there was a need for realism across the health care system in terms of the issues faced which needed to involve holding people to account. It was reported that the Governing Body needed to own these issues from a performance perspective.
9.15	<p>Mr Little highlighted that there needed to be robust plans in plan to tackle performance issues such as elective care waits including progress columns on what previous actions have been taken.</p> <ul style="list-style-type: none"> <li>• <b>Performance Report</b></li> </ul>
9.16	Ms O'Dwyer submitted 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.
9.17	The report presents the CCG's performance position for October 2019 and outlined any proposed changes to performance at a national level
9.18	<p>In terms of A&amp;E Performance, PAHT had underachieved against the constitutional standard of 95% in October 2019 with performance reported at 81.7% across all PAHT hospital sites.</p> <ul style="list-style-type: none"> <li>• <b>Safeguarding Assurance Framework, CCG Safeguarding Policy and Training Strategy</b></li> </ul>
9.19	Dr Fines presented a report in relation to the Safeguarding Assurance Framework, CCG Safeguarding Policy and Training Strategy.
9.20	It was reported that NHS England expected that NHS Bury CCG fulfilled the responsibilities and duties placed upon it regarding Safeguarding.
9.21	The Framework detailed how the CCG would set in place arrangements to discharge safeguarding duties placed on it by NHS England Safeguarding Accountability Framework 2019, The Children Act 1989, The Children Act 2004, specifically section 11, Working Together to Safeguarding Children 2018, the Care Act 2014, Prevent requirements and the Mental Capacity Act 2006. The responsibilities of staff from the Accountable Officer through to all staff were outlined. It was noted that the CCG has had a framework in place since 2013 and this was refreshed in 2016. New requirements were published in July 2019 and these were reflected and captured in the revised document.

9.22	The CCG training strategy had been refreshed following the publication of guidance by the Royal Colleges.
9.23	The CCG internal Safeguarding Policy had been refreshed and was presented for approval. The changes were minor and reflected updated guidance and legislation. The policy also reflected the training strategy and the CCG safeguarding assurance framework.
9.24	The three documents together, supported the CCG in meeting its statutory requirements to safeguard the most vulnerable residents when commissioning services.
9.25	The documents were presented to and ratified by the Quality and Performance Committee on the 8 <sup>th</sup> January 2020.
9.26	Mr Little suggested providing the Governing Body with some further detail in relation to Serious Case Reviews as part of a future Safeguarding Report to the Governing Body.

ID	Type	The Governing Body:	Owner
D/01/17	Decision	Considered this risk and requested that a more detailed action plan be brought back to a future Governing Body meeting.	
A/01/03	Action	Action Plan on Elective Waits to be brought back to a future Governing Body meeting.	Ms O'Dwyer
D/01/18	Decision	Noted the verbal update on the other key issues discussed at the Quality and Performance Committee.	
D/01/19	Decision	Noted the Elective Waits presentation and actions being taken to address the issues.	
D/01/20	Decision	Received the Performance Report.	
D/01/21	Decision	Noted the contents of the Safeguarding documents and the responsibilities outlined.	
D/01/22	Decision	Approved the Framework, the Policy and Training strategy.	
D/01/23	Decision	Approved uploading the documents onto the CCG website.	
A/01/04	Action	Safeguarding Policies to be uploaded to CCG website	Mrs Kennett
A/01/05	Action	Further detail in relation to Serious Case Reviews to be included as part of a future Safeguarding Report to the Governing Body.	Mrs Jackson

<b>10.</b>	<b>Audit Committee</b>
	<ul style="list-style-type: none"> <li><b>Audit Committee Chair's Report</b></li> </ul>
10.1	Mr Wild presented the latest Audit Committee Chair's report which provided an update of the Audit Committee meeting held on the 6 December 2019.

10.2	<p>This paper provided an outline of the matters discussed, assurances sought and decisions ratified at the last Audit Committee meeting. The report aimed to provide information and assurance to the Governing Body that a robust, effective governance system was in place and that the Committee was discharging its responsibilities.</p> <ul style="list-style-type: none"> <li>• <b>GBAF</b></li> </ul>
10.3	<p>Ms O'Dwyer submitted the latest GBAF report to the Governing Body.</p>
10.4	<p>It was highlighted that the GBAF, which sets out the current levels of risk and continued actions to enable the delivery of the CCG's Strategic Objectives as at 30 November 2019, was reviewed by the Audit Committee at its last meeting on 6<sup>th</sup> December 2019.</p>
10.5	<p>The Audit Committee was advised that all 10 risks included in the report had been reviewed since the last presentation of the report in September, however all risks have remained static. The Committee acknowledged that this was in part expected as many of the risks require management over the medium-to-long term. The current profile of the risks within the report was summarised as:</p> <ul style="list-style-type: none"> <li>• 7 remain at a significant level of current risk (level 15 or above) to delivery of the CCG's Strategic Objectives;</li> <li>• 3 remain at a high level of current risk (level 8-12) to delivery of the CCG's Strategic Objectives.</li> </ul>
10.6	<p>The Audit Committee was notified that three of the strategic risks had been assigned to the SCB for oversight, and that any feedback from the review of these risks would be included in future reports, however it was noted that at the SCB meeting of 2<sup>nd</sup> December, a request had been made to change GBAF_PR_4.1 to reflect that decisions should be informed by all staff and clinicians, rather than influenced. This would be reflected in future reports.</p>
	<ul style="list-style-type: none"> <li>• <b>Corporate Risk Register</b></li> </ul>
10.7	<p>Ms O'Dwyer presented the latest Corporate Risk Register to the Governing Body.</p>
10.8	<p>It was reported in line with the Risk Management Strategy, the Audit Committee was required to retain oversight of any risks with a net risk score of 15 and above. These risks were classified as significant were they to materialise and therefore the Committee's review ensured that they had received independent scrutiny.</p>
10.9	<p>The Audit Committee reviewed the Corporate Risk Register, as presented, at its meeting on the 6<sup>th</sup> December 2019 and was advised that one new risk had been included on the Corporate Risk Register in respect of concerns relating to Growth in Elective Waits and that all other risks had remained static since the last report in September. It was also noted that a 'deep-dive' was planned to be undertaken in respect to the PCFT Mixed Sex Accommodation risk, however this had been rescheduled.</p>
10.10	<p>The Audit Committee was assured on the appropriate management and review of risk and recommended the report to the Governing Body.</p>

10.11	<p>The Governing Body was advised that there were currently 5 risks included on the Corporate Risk Register (operational risks) at a level 15 or above (as at 30 November 2019), excluding those reported through the Governing Body Assurance Framework (strategic risks) as listed:</p> <ul style="list-style-type: none"> <li>• Growth in elective waits (new);</li> <li>• Autistic Spectrum Conditions Assessment – Work force capacity to maintain waiting times;</li> <li>• PCFT - Mixed Sex Accommodation (SSA breaches);</li> <li>• Embedding Lessons Learnt in Practice from SI Investigations; and</li> <li>• Datix: Resource requirements to maximise optimization.</li> </ul>
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ID	Type	The Governing Body:	Owner
D/01/24	Decision	Noted the Audit Committee Chair's report.	
D/01/25	Decision	Considered the GBAF presented and discussed any concerns arising from the information provided.	
D/01/26	Decision	Received the Corporate Risk Register and assurances provided.	

## 11. Committee Chair Reports

11.1	<ul style="list-style-type: none"> <li>• <b>Primary Care Commissioning Committee</b></li> </ul> <p>Mr Bury provided an update from the Primary Care Commissioning Committee meeting which had taken place earlier in the day (22 January 2020).</p>
11.2	<ul style="list-style-type: none"> <li>• <b>Clinical Cabinet</b></li> </ul> <p>Mr Hughes submitted the latest Chair's update reports from the Clinical Cabinet meetings held on the 4 December 2019.</p>

ID	Type	The Governing Body:	Owner
D/01/27	Decision	Noted the information.	

## 12 Closing Matters

13.1	Dr Schryer thanked members for their contributions and summarised the main discussion points.
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ID	Type	The Governing Body:	Owner
D/01/28	Decision	Noted the information.	

<b>Next Meeting</b>	Wednesday, 25 March 2020, 15.00-17.00 at Townside Primary Care Centre
<b>Enquiries</b>	Emma Kennett, Head of Corporate Affairs and Governance. <a href="mailto:Emma.kennett@nhs.net">Emma.kennett@nhs.net</a>



## Governing Body Action Log

### Status Rating



- In Progress



- Completed



- Not Yet Due



- Overdue

A/11/01	A further report in relation to Communications and Engagement would be submitted to the Governing Body meeting in January 2020.	Mr Little		January 2020	An update on the Communications and engagement work was included on today's agenda. The strategy would be submitted to the Governing Body meeting in March 2020.
A/01/01	The Terms of Reference for the new Quality and Performance Assurance Committee to be shared with the relevant individuals within the CCG and Council.	Mrs Featherstone		January 2020	Completed
A/01/02	Further detailed proposals on Children's Commissioning would be brought back to the Governing Body and Council Cabinet at an appropriate time.	Mr Little		TBC	Added to Forward Plan as pending item.
A/01/03	Action Plan on Elective Waits to be brought back to a future Governing Body meeting.	Ms O'Dwyer		TBC	Will be included as part of Regular Performance Report
A/01/04	Safeguarding Policies to be uploaded to CCG website	Mrs Kennett		February 2020	Uploaded to website.
A/01/05	Further detail in relation to Serious Case Reviews to be included as part of a future Safeguarding Report to the Governing Body.	Mrs Jackson		TBC	To be included as part of future report