

<b>Meeting: Governing Body (Virtual Meeting)</b>			
<b>Meeting Date</b>	27 May 2020	<b>Action</b>	Receive
<b>Item No.</b>	4.2	<b>Confidential</b>	No
<b>Title</b>	Record of Operational and Urgent Decisions		
<b>Presented By</b>	Geoff Little, Chief Executive and Accountable Officer		
<b>Author</b>	Lisa Featherstone, Deputy Director - NHS Bury CCG and Bury Council Corporate Core - Governance and Assurance Emma Kennett, Head of Corporate Affairs and Governance		
<b>Clinical Lead</b>	-		

<b>Executive Summary</b>
<p>The Governing Body is responsible for the leadership and governance of the CCG. Notwithstanding the level and pace of change required in response to the current Covid19 response, the Governing Body must remain mindful of the statutory duties that apply, whilst balancing this with the need to support the strategic and operational response.</p> <p>Interim Governance arrangements have been put in place to manage both Operational and Urgent Decisions during the Covid-19 Pandemic.</p> <p>The attached log details the Operational and Urgent decisions that have taken been taken to date during the Pandemic.</p>
<b>Recommendations</b>
<p>It is recommended that the Governing Body:</p> <ul style="list-style-type: none"> <li>• Receive the Urgent and Operational decision log; and</li> <li>• Note the review of the emergency planning governance arrangements and records.</li> </ul>

<b>Links to CCG Strategic Objectives</b>	
<p><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</p>	☒
<p><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</p>	☒
<p><b>SO3 Budget</b> To deliver a balanced budget</p>	☒

Links to CCG Strategic Objectives	
<b>SO4 Staff Wellbeing</b> To increase the involvement and wellbeing of all staff in scope of the OCO.	<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 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 an Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Is an 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 checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>

Governance and Reporting		
Meeting	Date	Outcome
N/A		

## Record of Operational and Urgent Decisions

### 1.0 Introduction

- 1.1 This report outlines amendments to the current governance arrangements that have and will continue to be invoked to support and enable NHS Bury CCG to respond to the current Covid19 Pandemic in a timely manner, whilst safeguarding the integrity of decision-making.

### 2.0 Background

- 2.1 The Governing Body is responsible for the leadership and governance of the CCG. Notwithstanding the level and pace of change required, the Governing Body must remain mindful of the statutory duties that apply, whilst balancing this with the need to support the strategic and operational response.
- 2.2 The current pandemic is placing an unprecedented demand on the Bury system, including the CCG as a level 2 responder under the Civil Contingencies Act 2004. Whilst Business Continuity Plans are in place and have been invoked, there was a need to also temporarily amend the governance arrangements to enable decisions to be made in as real-time as possible to support system response requirements whilst providing assurance and oversight to the Governing Body.
- 2.3 The temporary change to the governance arrangements, as set out below, was approved at the Governing Body Briefing in accordance with the Emergency powers arrangements on 23rd March 2020:
- Suspension of standing orders in respect to calling meetings, timeframes of meeting papers, admission of the public and press;
  - Establishment of an Urgent Decision Group, in accordance with arrangements set out at Clause 3.8 of the CCG's Standing Orders with the addition of Cllr Simpson, Elected Member and Portfolio Holder for Health and Social Care;
  - Formal recording of operational decisions made in line with delegations; and
  - Pausing meetings within the governance structure, particularly those meeting in public.
- 2.4 At a further briefing of the Governing Body on 17 April 2020, a further discussion determined that virtual Governing Body meetings should be considered. Arrangements have been put in place to support this, with formal invites extended to the Press and Healthwatch as an independent advocate for the public voice as it is not yet possible to live-stream the public meetings, however work in progressing to develop this future to enable increased public participation.
- 2.5 The virtual Governing Body will receive an update on the response to Covid-19 and will receive updates on key areas of work only. Whilst in session the Governing Body will take decisions on all matters presented, irrespective of reservation or delegation status. The Urgent Decision Group will continue to operate between Governing Body meetings to ensure the timely approval of decisions required to support the local response to Covid-19

### **3.0 Record of Operational and Urgent Decisions**

- 3.1 Good governance, including robust record keeping, remain paramount during an emergency response.
- 3.2 A record of Urgent and Operational decisions taken must be maintained, published and presented to the Governing Body accordingly.
- 3.3 It is imperative that all decisions taken are proportionate to the response and are subject to a level of oversight and scrutiny.
- 3.4 Accompanying this report is a record of those decisions that have been made to date.
- 3.5 The Governing Body is advised that a review of the emergency planning governance arrangements and records will be undertaken to ensure the transfer of decisions taken to support the response onto the formal record as required.

### **4.0 Conflicts of Interest**

- 4.1 The temporary governance arrangements will still require the effective management of Conflicts of Interest will continue to be observed in line with the CCG's Conflicts of Interest Policy with relevant actions taken to mitigate the risk of any perceived or actual conflict of Interest.

### **5.0 Recommendations**

- 5.1 The Governing Body is requested to:
  - Receive the Urgent and Operational decision log; and
  - Note the review of the emergency planning governance arrangements and records.

Date:	Number:	Status				Title / Subject Matter	Reason for Operation Decision	Equality Impact Assessment	Details of Operation Decision Taken	Decision taken by:					
		For Approval	For Recommendation	For Consideration	For Information					Joint Chief Finance Officer	Executive Nurse (Director of Quality)	Director of Commissioning & Business Delivery	Others Consulted	Clinical Director	Lay Member
09/04/2020	ODL 001				X	Change to Out of Office Reply – Patient Services Inbox in response to Coronavirus Pandemic	The timescales for dealing with Complaints, PALs and FOIs may need to be adjusted as a result of the pressures faced by the Coronavirus Pandemic. This means a potential deviation in the timescales set out in the CCG Patient Services and Freedom of Information Policies. The possible delays have been recognised by the Information Commissioner's Office and it has been acknowledged that requests may not be complete in whole or in part.	N/A	In response to the Coronavirus Pandemic, the out of office reply for the Patient Services Inbox buccg.burypatientservices@nhs.net has been changed as follows: Thank you for contacting the Patient Services Team at NHS Bury Clinical Commissioning Group (CCG). Please note that due to the current coronavirus pandemic (COVID-19), NHS Bury CCG is working to support the robust response across Health and Care services in Bury, and is therefore working in accordance with its Business Continuity Planning arrangements. To explain further, NHS Bury CCG is currently undertaking critical work aimed towards the protection and safeguarding of at risk groups during the COVID-19 outbreak. As a result, the organisational areas responsible for providing the content of replies to Complaints and Freedom of Information requests may not be able to provide full information for the completion of Complaints and Freedom of Information request or meet the standard timeframes as set out in legislation, as set out below, although we will endeavour to respond to your enquiry as quickly as possible. •PALs enquiries within 3 days •Complaints acknowledgements within 3 working days. •Freedom of Information requests within 20 working days; The possible delays have been recognised by the Information Commissioner's Office and it is also acknowledged that requests may not be complete in whole or in part. We will confirm as much as possible when we send our response to your request, however if you are dissatisfied with the response provided, we would advise you to re-submit the request in 3-6 months when we may be in a position to confirm our response. If you have any comments or questions in the meantime, please direct them to us via the online form (quick link to be inserted when clicking form) or email buccg.burypatientservices@nhs.net. We are promoting contact electronically where possible, however you can also write to us at: NHS Bury CCG, Townside Primary Care Centre, 1 Knowsley Place, Knowsley Street, Bury, BL9 0SN, however there may be a delay in receiving your correspondence. Kind Regards,  Patient Services Team						

Urgent Decisions Log – NHS Bury CCG



Date of Meeting	Number:	Decision reserved to:					Status				Title / Subject Matter	Reason for Urgency	Equality Impact Assessment	Outcome	
		CCG Membership	Governing Body	Strategic Commissioning Board	Primary Care Commissioning	Other Committee (please name)	For Approval	For Recommendation	For Consideration	For Information					
27/03/2020	UDL 001				X		X					Quality in Primary Care (QinPC) Contract for 2020-2023	Details in relation to the proposed Quality in Primary Care (QinPC) contract for 2020-2023, along with the associated business case. The options of implementing the contract within the context of the current Covid-19 pandemic also explored.	N/A	<b>Approved</b> the business case for the Quality in Primary Care Contract for 2020-2023; <b>Confirmed</b> the financial envelope for the Quality in Primary Care Contract; <b>Confirmed</b> support for Option 2 in the report which was to extend the time period for the development of the action plans until the end of September 2020. This provides additional time for the development of the plans so they can be produced when hopefully the impact of the pandemic has lessened. There was a risk that this time period may need to be extended.
03/04/2020	UDL 002			X			X					IFR Process	Ordinarily the IFR Panel meets monthly, and whilst this could be operated virtually, temporarily suspending the meetings will enable the relevant clinicians and CCG colleagues to be available to support the current COVID-19 pandemic response. Setting out arrangements that can be followed will ensure that continuation of service delivery for relevant IFR requests	This is a temporary change in process which reflects the current position in respect to elective treatment at this time, but does not restrict continuation of treatment or urgent decisions in respect to Mental Health funding	<b>Agreed</b> to suspend formal IFR panels due to clinical availability and lack of likelihood for decisions to be implemented in a timely manner for an initial period of 3 months. <b>Agreed</b> to approve any request for a roll-over of previously agreed funding for a 3-month period pending a formal decision, which will allow continuation of treatment without commitment for a long period without going to panel. <b>Agreed</b> to move forward any mental health requests for services not locally commissioned on a delegated authority basis, to the director lead with appropriate clinical support. It was noted that the IFR panel does not add value to such decisions and only one other CCG uses the panel for such decisions <b>Agreed</b> to make urgent decisions under delegated authority to GMSS EUR clinical triage team, relevant CCG Director and appropriate clinical support. It is not anticipated that there will be many, or possibly any, such decisions – this will give cover if an unanticipated urgent request for treatment comes through at this time.
03/04/2020	UDL 003		X				X					COVID-19 response for patient triage Bury CCG	This proposal outlines the COVID-19 response the CCG can make related to triage and managing GP practice patient demand. It provides a solution using askmyGP. The CCG requested an urgent emergency options appraisal paper relating to Digital First Primary Care to best address patient need during the coronavirus pandemic	This proposal will change working practice in terms of providing the public with greater access to online consultations. For groups of the population who may classify themselves as digitally-excluded they may feel at detriment however more support is being provided to help all residents in Bury with access to digital services. Alternative access to services remains in place, in line with service provision agreed as part of the COVID-19 response.	<b>Accepted</b> recommendation three in order that the askmyGP solution could be delivered at an accelerated pace.
03/04/2020	UDL 004				Remuneration Committee		X					Overtime Payments	It is currently anticipated that the peak will be realised as the Easter Weekend approaches and therefore the system will require additional capacity to provide support across a range of agreed Priority Services, including Community Hubs, Social and Primary Care. To ensure maximum resource is available, an Urgent Decision is needed to expand the current payment arrangements for overtime above those set out in the NHS Agenda for Change Terms and Conditions Handbook.	The proposal includes payment of overtime above NHS Terms and Conditions for staff at B8a and above, including contractors. Approved national arrangements will continue to apply for all other employees. Through HR Guidance, provision has already been to ensure equal payment for equal work, where colleagues are redeployed into roles at a higher level for payment to be made at the appropriate higher level to reflect the work being done. Overtime will also be at the higher rate in these instances.	<b>Approved</b> the payment of overtime rates, outside of current NHS Terms and Conditions, specifically and only for the Easter weekend at this time, in the absence of national and regional guidance as follows: -all staff at Band 8a and above, including contractors, who are not ordinarily entitled to overtime payments, to be remunerated in accordance with the arrangements previously agreed and applied to on-call working (excluding retention payment) at time for hours work plus time in lieu for work on Bank Holidays and time for payment for the Saturday and Sunday between the Bank Holiday; and -standard Bank Holiday arrangements to apply, as set out in NHS Terms and Conditions, for staff at B7 and below.
03/04/2020	UDL 005		X						X			Recommended Contractual Payments to General Practice 2019/20	The Governing Body was advised of the decisions made with regards to the year end payments for the Locally Commissioned Services (LCS) held between Bury Clinical Commissioning Group (CCG) and General Practice and to establish the payment protocol for contracts in place with General Practice across the first 6 months of financial year 2020/21 in light of the COVID-19 outbreak.	N/A	<b>Approved</b> the payments to Practices as set out within the report in respect of the LCS contracts.
09/04/2020	UDL006				Remuneration Committee		X					On-call payments for CHC and complex MH team	It is currently anticipated that additional on-call requirements will be needed from the continuing health care and complex mental health team during the period of the pandemic. To ensure maximum resource is available, an Urgent Decision is needed to expand the current on-call arrangements in addition to the current rota covered by senior managers.	The proposal includes payment of additional on-call allowances for agreed senior colleagues from the CHC and complex mental health team. The current on-call policy is for senior managers and covers the whole CCG operation. The proposal for additional on-call allowances will be for the nominated members of the team and at a rate which remunerates individual via the same principles although on a lower rate which recognises the particular expertise that they are providing .	<b>Approved</b> an interim on-call arrangement for a period of 2 months specifically in respect to CHC and Complex Mental Health advice, which recognises the need for colleagues to remain available during their period of on-call, including payment of a 'retention allowance' aligned to the CCG's on-call policy as follows: - •On-call allowance – the proposal is for individuals to be available for on-call for 1 day each week and therefore they would attract a 9.5% allowance in accordance with Agenda for Change which will be set at point 38 of the Band 8a scale. This would mean a monthly retention payment of £74.36 per month, based on the calculations shown in Appendix A. •Payment – Principles set out in the CCG approved on-call policy will be followed in respect to payment for hours worked, subject to a minimum of 3 hours, applied at point 38 of the Band 8a scale. •Bank Holidays- Staff who are on-call on a general public holiday, irrespective of pay band will be entitled to a day in lieu in accordance with paragraph 13.4 of the NHS Terms and Conditions handbook irrespective of work done. •Time in lieu - a request can be made to take time off in lieu in preference to payment for hours worked and will be agreed with the individual's line manager.
09/04/2020	UDL007		X				X					Establishment of COVID Management Service (CMS)	Trigger could be met at any time	Possible change of procedures/working practice No anticipated negative impact on EIA groups	<b>Noted</b> the Escalation Triggers described above in relation to the CMS. <b>Approved</b> Greenmount to be the third CMS site based on the decision rationale above. <b>Approved</b> Spring Lane to be the second CMS site based on the decision rationale above, initially from 8.00am – 8.00pm. <b>Confirmed</b> that BARDOC are to act as the lead provider for all CMS sites established.
09/04/2020	UDL008		X				X					National Press Reported Pressures on the NHS111. Should pressures escalate further for the local NHS111 service this paper seeks prior approval, if certain triggers are met, to move to a system where all Bury GP Out Of Hours calls are transferred/filtered/diverted to BARDOC for a local response.	Trigger could be met at any time	Possible change of procedures/working practice No anticipated negative impact on EIA groups	<b>Approved</b> the development of a standardised message for all GP answer phones to remove variation in the quality of the message given and to promote the use of NHS111 Online as a first option: •Promote NHS111 Online support as the first option; •Ring NHS111 only if urgent; •Advise patients to phone GP practice in hours for a clinical triage; •Confirm there is no walk-in access to the surgery. <b>Approved</b> the increased call volumes going through the GM CAS service from 999/111 and the need to ensure all care homes in Bury access the GM CAS (BARDOC) rather than an NHS111 response. <b>Agreed</b> that based upon one or more of the identified triggers establish agreement that all GP out of hours calls be transferred/filtered/diverted to BARDOC for a local response. There was likely to be a cost incurred for this with BARDOC (some of the cost maybe able to be incorporated through the GM CAS costs).
17/04/2020	UDL009				Joint ExecutivTeam		X					Arrangements for handling Freedom of Information requests	Whilst the CCG and wider NHS are responding to Covid19, there are pressures in responding to Freedom of Information Requests within the statutory 20 working day requirement.  It can be noted that although there are staff currently available to process requests from a Patient/Corporate Services perspective, requests often require input from various/multiple departments within the CCG who may be experiencing additional pressures as a result of the current Covid19 pandemic and resources being diverted to Priority 1 services within the CCG and Council.  The handling of Freedom of Information requests from a Patient Services/Corporate perspective has been classified as a Priority 3 area for the CCG and is hence not deemed as critical to the emergency response and/or community wellbeing.	This is a change in policy and will result in a delay to the timescales in which a response to a request will be provided. This delay will be applicable to all Freedom of Information Requests.	<b>Approved</b> Freedom of Information Request responses for an interim period. This will involve the Patient Services/Corporate Services team no longer approaching other departments within the CCG for information at this current time. <b>Noted</b> that there may be instances where the Patient Services/Corporate Services Team is aware that the information is already available on the CCG website or is not held by the CCG. In those instances, the requester will be signposted accordingly. <b>Agreed</b> that a standard letter be sent in response to any new requests advising individuals to re-submit their request in 3-6 months' time when the CCG should be in a better position to confirm its response.
17/04/2020	UDL010				Quality & Performance Committee		X					Amendment to Patient Services Processes	Whilst the CCG and wider NHS are responding to Covid19, there is limited availability of resource to undertake investigations into Patient Services functions, including complaints, MP and general enquiries. Complaints management, including investigation, is a statutory function. Clear parameters are set out both within legislation and local policy, which the CCG would be unable to meet at this time. Amending the current process, proportional to the emergency planning response, allows a clear and consistent message to be provided to the population.	This is a change in policy and will result in a delay to the timescales in which a response to a complaint raised will be provided. This delay will be applicable to all complaints, unless there is an immediate concern in respect to safeguarding, patient or clinical safety.	<b>Agreed</b> to pause the on-going complaint investigations for all existing complaints. <b>Agreed</b> to the amendment of the process for new complaints, MP and general enquiries to include logging and acknowledgement only. <b>Agreed</b> to the clinical review of all complaints received to determine clinical significance in respect to safeguarding, patient or clinical safety concerns. <b>Agreed</b> to the assessment of the complaint, MP and general enquiry against the Serious Incident Framework threshold; investigation only of those that meet the threshold; and agreement to accept completion of consent forms electronically.
17/04/2020	UDL011	X					X					Re-appointment of Clinical Director	One of the Clinical Director's Terms of Office expired on 31/03/2020. Ordinarily the CCG Membership would receive a proposal one month prior to the contract end date on the re-appointment of the Clinical Director, in accordance with the CCG Constitution, Standing Orders and Scheme of Reservation and Delegation. The membership would be asked to vote, with one vote per Member Practice, to confirm or reject the re-appointment. Usual practice cannot be completed at this time and therefore the matter is proposed as an urgent decision. It is the responsibility of the Accountable Officer to recommend a course of action.	This is a change in routine practice that would be followed to seek approval of the re-appointment of a Clinical Director. It is considered that there is no direct or in-direct negative impact, due to their being another vacancy on the Governing Body.	<b>Approved</b> the re-appointment of the Clinical Director on the basis of an operational contract extension of 12 months, which would bring the last Term of Office in line with the new 4-year term of office arrangement set out in the refreshed and approved CCG Constitution, allowing a full Membership vote to be undertaken prior to the end of the contract extension

01/05/2020	UDL012					Remuneration Committee	X				Annual Leave Arrangements	The Working Time (Coronavirus) (Amendment) Regulations 2020, published on 26 <sup>th</sup> March 2020 have introduced new arrangements in respect to the carry forward of annual leave as a consequence of employees supporting the response to Covid-19 Pandemic. These changes impact on current policy arrangements, and therefore an urgent decision is required to support changes to policy as necessary.	The decision makes a change to policy but with no adverse impact any group of people	<b>Agreed:</b> that employees from priority 1 services (or those redeployed into priority 1 services), who have been unable to take leave due to the need to remain in the workplace to provide essential services due to the coronavirus pandemic, to will be able to carry over up to 20 days untaken annual leave to be used across the next two annual leave years (2020/2021 and 2021/2022); <b>Agreed:</b> The carry forward of annual leave is temporarily suspended to ensure that all annual leave is outstanding from 2019/20 and due during 2020-2 is taken within the two-year period; and <b>Agreed:</b> Any leave outstanding whether carried forward or current entitlement will be paid upon termination of employment.
01/05/2020	UDL013	X			X		X				Bury GP Practices - May Day Bank Holiday Cover	General practice asked to open on Bank Holiday 8th May CCG offered practices 2 options Sub contract provision on this day to another provider (and not open) Open practice as if it was a working day Clinical Directors asked the Fed to develop a delivery option that would provide cover so practices could close as an option for practices to use. EWH/General Practice hub model and current general practice provision used as foundation for proposal Contact with practices has identified 16 practices (70% pop) wishing to close their own practice and be part of the Feds coordinated provision while 9 practices will open their surgeries.	No	<b>Supported</b> the proposal for GP cover over the May Bank holiday as described within the paper with the caveat of ensuring that emergency prescriptions and home visiting within core hours (8.00 -10.00 a.m.) are addressed.
07/05/2020	UDL014			X			X				Pilot a Single Point of Access (SPOA) telephone line for an all age non-clinical Mental Health Thrive offer, to support 24/7 mental health crisis provision and wider local services in Bury.	Establishing a local VCF SPOA telephone line to compliment the GM Mental Health crisis pathway in the urgent response to Covid 19, identified by NHS England and the priorities set out in the NHS 10 year plan and Bury Locality all-age Thrive models.	No	<b>Approved</b> the commissioning of a Bury VCF SPOA telephone line pilot for 10 months, operating 6 days Monday-Saturday between the hours of 9 a.m. – 5 p.m. for Phase 1 and Phase 2, expanding to 8 a.m. - 8 p.m. for Phase 3. <b>Agreed to prepare</b> and award a contract. <b>Approved</b> a clear pathway which incorporates the PCET 24/7 Helpline and GM CAS Mental Health crisis pathways.