Harrogate and Rural District Clinical Commissioning Group (HaRD CCG)

Governing Body
1 August 2019 10:00 – 12:00

The Nidderdale Suite,
Best Western Dower House Hotel,
Bond End, Knaresborough, HG5 9AL

Present

<table>
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<tr>
<th>Name</th>
<th>Position</th>
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<tbody>
<tr>
<td>Dr Alistair Ingram</td>
<td>Clinical Chair, HaRD CCG</td>
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<tr>
<td>Sheenagh Powell</td>
<td>Vice-Chair / Lay Member, HaRD CCG</td>
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<tr>
<td>Amanda Bloor</td>
<td>Accountable Officer, North Yorkshire CCGs</td>
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<tr>
<td>Dilani Gamble</td>
<td>Chief Finance Officer, HaRD CCG</td>
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<tr>
<td>Julie Warren</td>
<td>Director of Corporate Services, Governance &amp; Performance, NY CCGs</td>
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<tr>
<td>Wendy Balmain</td>
<td>Director of Strategy &amp; Integration, North Yorkshire CCGs</td>
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<tr>
<td>Simon Cox</td>
<td>Director of Acute Commissioning, North Yorkshire CCGs</td>
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<tr>
<td>Kate Kennady</td>
<td>Lay Member for Patient and Public Involvement, HaRD CCG</td>
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<td>Lance Gilroy</td>
<td>Lay Member for Patient and Public Involvement, HaRD CCG</td>
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<tr>
<td>Dr Ian Woods</td>
<td>Secondary Care Consultant, HaRD CCG</td>
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<tr>
<td>Dr Sarah Hay</td>
<td>GP Member, HaRD CCG</td>
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Apologies

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<tr>
<td>Sue Peckitt</td>
<td>Chief Nurse, North Yorkshire CCGs</td>
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<td>Dr Bruce Willoughby</td>
<td>GP Member, HaRD CCG</td>
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In Attendance

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<tr>
<td>Sasha Sencier</td>
<td>Corporate Governance &amp; Assurance Manager / Board Secretary to the Governing Body (Secretariat), HaRD CCG</td>
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<tr>
<td>Paula Middlebrook</td>
<td>Head of Quality and Nursing, HaRD CCG</td>
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<tr>
<td>Elaine Wyllie</td>
<td>Designated Nurse Safeguarding Children and Children in Care</td>
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Questions to the Governing Body

No questions were received by members of the public.

1.0 Apologies for Absence

Apologies were received from Sue Peckitt and Dr Bruce Willoughby. It was noted that Paula Middlebrook, Head of Quality and Safety, is deputising for Sue Peckitt and is in attendance to present Item 6.1 Quality and Safety Report.

The Governing Body:

Noted attendance and apologies and that the Governing Body is quorate.

2.0 Declarations of Interests in relation to the business of the meeting

No declarations of interest were received in relation to the business of the meeting.

The Governing Body:

Noted the above.
3.0 Governing Body Minutes

3.1 Governing Body Minutes of the Meeting held on 6 June 2019
The Governing Body reviewed the minutes from the meeting and no amendments were noted.

The Governing Body:
Approved the minutes of the meeting on 6 June 2019 as a true and accurate record.

4.0 Matters Arising from the Minutes
All matters arising were noted as complete and any updates are included in reports on today’s agenda.

The Governing Body:
Accepted the matters arising.

5.0 Reports from Harrogate and Rural District Clinical Commissioning Group

5.1 Clinical Chair
Dr Alistair Ingram informed that he continues to attend operational meetings at the CCG. Alistair informed that Joint Committees have met to discuss terms of reference and future work plans. Inaugural meetings will take place in August/September 2019.

Interviews for the Chief Finance Officer have taken place and an announcement on the appointment will be made shortly.

5.2 Chief Officer
Amanda Bloor presented the Chief Officer Report and also provided a verbal update.

The CCG continues to build on the transition work to merge the three North Yorkshire CCGs and an interim governance structure is now in operation. The structure has been shared with NHSE and they are in agreement that the approach is sensible. For the new Joint Committees, it has been agreed to take the approach to be inclusive at these meetings and all Governing Body members are welcome to attend where there is an interest and value can be added.

A joint North Yorkshire Governing Body Workshop is taking place on 26 September 2019 prior to the Governing Bodies meeting as Committees in Common. This workshop will focus on the strategy moving forward.

The Chief Finance Officer interviews have taken place and an appointment has been made subject to the usual processes being completed. The Staff engagement panel and interview panel were unanimous in their decision to appoint the successful candidate.

Directors and Clinical Chairs attended the NHSE Improvement and Assessment Framework (IAF) quarterly meeting. The feedback was positive and there was good rigour from NHS England. The annual IAF ratings for 2018/19 were discussed. HaRD CCG received a rating of ‘requires improvement’ and the CCG is working with NHS England to work through the consequences of that rating.
The CCG is currently holding exploratory conversations with North of England Commissioning Support services.

5.3 Audit Committee
Sheenagh Powell, Chair of the Audit Committee, noted that no meeting had taken place since the Governing Body last met in June 2019. The Audit Committee will hold its final meeting on 20 August in order to close off any business for 2018/19. The Committee will then meet with the other North Yorkshire CCGs as Committees in Common on 19 September 2019.

5.4 Primary Care Commissioning Committee (PCCC)
Kate Kennady, Chair of the PCCC informed that no meetings had taken place since the Governing Body last met in June 2019.

The North Yorkshire Primary Care Commissioning Committees are due to meet as Committees in Common on 5 September 2019.

The Governing Body:
Noted the reports from the CCG.

6.0 Quality and Operational Performance

6.1 Quality and Safety Report
Paula Middlebrook presented the Quality and Safety Report and noted that a detailed discussion in relation to all the information contained in this paper, had already taken place at the Quality and Clinical Governance Committee, prior to the paper being presented to the Governing Body for assurance.

Following safeguarding concerns in relation to Whorlton Hall Care Home, the CCG has checked that all patients with learning disabilities or mental health needs placed in facilities have their plans checked to ensure they are up to date and ensuring there are no safeguarding concerns around those individuals.

The CCG has been made aware of positive cases of Hepatitis A at a school in Ripon. Public Health England (PHE) and partners remain vigilant to a potential second wave. To avoid a second wave over the summer holiday period staff and children at the school were offered vaccination.

The CCG has been notified of an administrative error made by The Cervical Cancer Screening call and recall programme which is run by Primary Care Services England (PCSE), delivered by Capita. Due to the NHS Cervical Screening fail safe processes, the administrative errors were identified and handled correctly, however a small number of women missed an invitation to attend their appointment. Those who did experience delay and who need an invitation for screening have been contacted and will be able to access support from their local GP, who have also been contacted. No further actions are required of local practices or the CCG. Public Health England are reviewing the current arrangements in place and instigating a transition to an NHS delivered service.

It relation to autism waiting times, it is hoped that the backlog will completed by September 2019 and that through a new way of delivering and triaging assessments that in future, children will be seen quicker.
A two day workshop has been held with Tees, Esk and Wear Valleys FT (TEWV), Primary Care and LMC representation in May 2019 to develop a new model for the delivery of physical health monitoring for children and young people with eating disorders. An agreed model for delivery by TEWV was reached, however the CCG is awaiting confirmation from TEWV regarding timescales for implementation.

In relation to Continuing Healthcare, there has been a struggle to achieve the 28 day standard. Work has been done over the past 6 months to attain the standard, however there are some concerns regarding sustainability and work is being undertaken to understand what support will be required moving forward.

Julie Warren noted that the CCG is not an outlier and the challenge to recruit staff and a high turnover of staff is hard for continuity. The CCG needs to look at a number of areas across CHC and bring back a report to Governing Body.

The Governing Body:
Received the Quality and Safety Report as assurance.

6.2 Performance Report
Julie Warren presented the Performance Report and noted that a detailed discussion in relation to all the information contained in this paper had already taken place at the Finance, Performance and Commissioning Committee (FPCC) prior to the paper being presented to the Governing Body for assurance.

Julie Warren noted that in terms of the Clinical Priority areas, cancer and diabetes are rated as outstanding, Dementia is rated as good, and mental health and learning disabilities are rated as requiring improvement and there are plans in place to improve the ratings. Maternity is also rated as requiring improvement, however as previously noted at Governing Body, the CCG will never achieve a rating of good as there is no midwife led service available within the locality.

The CCG continues to work towards reducing the number of people with learning disabilities who are in inpatient beds. All patients are mapped onto a 12 point discharge plan with 46% having a community care & support solution identified.

All breast patients, despite missing the 14 day symptomatic target, achieved the 62 day target where cancer was diagnosed. There are challenges with the breast symptomatic target across WY&H HCP and the Cancer Alliance is working on this.

Although performance has been achieved so far this year, the Continuing Healthcare remains under considerable pressure due to vacancies in the team. Julie Warren has had discussions with NHS England around the issues and they have redeployed John Pattinson for one month to provide some senior clinical input.

Sheenagh Powell queried the pressures in relation to breast cancer services. Dr Sarah Hay informed the Governing Body that pressures are due to large referral numbers as the current referral system states that everyone needs to be seen within the two week target if they are highly likely to have breast cancer or are symptomatic.
The Governing Body:
Received the Performance Report as assurance.

Elaine Wyllie presented two reports to the Governing Body, both of which had been received by the Quality and Clinical Governance Committee.

North Yorkshire Safeguarding Children Partnership
Under the Children and Social Work Act (2017), HaRD CCG in association with the other North Yorkshire CCGs has new responsibilities to safeguard children and young people.

The Act requires a new alliance between the local authority, the police and the CCG to determine how agencies will work together locally to ensure that children are safeguarded and their welfare promoted. These new partnership arrangements are required to set out how agencies will ‘collaborate, share and co-own the vision for how to achieve improved outcomes for children; challenge appropriately and hold each other to account effectively;’ identify and analyse ‘new safeguarding issues and emerging threats;’ and promote learning such that services for children become more ‘reflective and implement changes to practice.’

In line with legislative guidance, the three responsible safeguarding partners in North Yorkshire have submitted their proposals for the new arrangements to the Secretary of State, and the new North Yorkshire Safeguarding Children Partnership (replacing the Safeguarding Children Board) will be operational from 01 September 2019.

Elaine Wyllie noted that North Yorkshire partnerships have always been extremely strong and commended Carrie Wollerton in her partnership work around this.

Safeguarding and Looked After Children Annual Report
Elaine Wyllie noted that this is the seventh Annual Report and sets out how the CCG Safeguarding and Looked After Children Team have worked with partner agencies to respond to threats and to the continuing risk to children from more widely recognised forms of abuse and neglect. It also provides assurance to the CCGs, their governing bodies, partner agencies and members of the public that the CCGs have fulfilled their statutory responsibilities to safeguard the welfare of children, including those that are looked after.

The report summarises work undertaken over the past twelve months and sets out ambitions for the forthcoming year.

The report offers a different approach to previous version and is more accessible and provides key highlights.

The Governing Body agreed that both reports were thorough and easy to read and thanked Elaine Wyllie and her team for their work.

The Governing Body:
Received assurance from both reports.
7.0 Finance, Activity and Delivery

7.1 Finance and Contracting Report
Dilani Gamble presented the Finance and Contracting Report which summarises the CCG's reported financial position for the 2019/20 financial year based on information available to 30 June 2019.

The CCG is reporting a forecast breakeven position that is consistent with the 2019/20 financial plan. This breakeven position is predicated on the CCG delivering against its control total of £8m deficit thereby qualifying for receipt of the planned £8m commissioner sustainability funding (CSF).

Risks to achieving this forecast outturn position were noted as mainly relating to delivery of the CCG's Quality, Innovation, Productivity and Prevention (QIPP) programme and pressures relating to acute and continuing healthcare expenditure. This will need to be managed throughout the course of 2019/20.

Dilani Gamble noted that the control total is £8m, and the underlying deficit is consistent with 2019/20 planned position of £14.7m.

The Governing Body:
Received the Finance and Activity report as assurance.

7.2 Transformation and Delivery Report
Wendy Balmain presented the Transformation and Delivery Report which provides an update on progress being made on the CCG's Transformation and Delivery Programme including the CCG Quality, Innovation, Productivity and Prevention (QIPP) savings programme for 2018/19 and the QIPP delivery plan for 2019/20.

Wendy Balmain noted that the full QIPP requirement for 2019/20 is £4898k as per the CCG’s financial plan and the CCG is on track for quarter 1 targets. A number of programmes are being delivered through planned and unplanned care with Harrogate and District NHS Foundation Trust (HDFT).

It is also important now to look at Primary Care Networks (PCNs), of which there are 4 across Harrogate and rural district and build relationships with clinicians in the acute sector and professionals in Primary Care. A number of development sessions have taken place with PCNs including one with the 11 PCNs across North Yorkshire.

The mobilisation phase of the Integrated Care Programme continues to progress and the programme is on track for launch in September 2019. The initial welcome sessions for staff have been completed and IT equipment is ready to roll out. The final service manager post has now been appointed to the Harrogate and Rural Alliance (HARA) Management Team and transition and induction planning for all key management posts is underway. A draft commissioner and provider Section 75 agreement has been prepared and a separate paper about the Section 75 is on the Governing Body agenda.

Wendy Balmain noted that the CCG is in a strong position regarding Delayed Transfers of Care (DTOCs) but there is a risk of a cost pressure in spot purchasing beds in the community.
Wendy Balmain informed that substantial savings within prescribing have been identified with and there is potential for further savings in this area too.

Simon Cox informed that in relation to prescribing there is an opportunity for efficient prescribing if hospitals linked more closely with Primary Care.

Simon Cox reiterated that although there is a lot of positive work going on around efficiency and savings with QIPP planning there is still a significant level of risk in the system.

Sheenagh Powell queried DTOCs and spot purchasing of beds and whether they have cash releasing benefit. Simon Cox informed that cash releasing is difficult. In Q1 the CCG is looking at circa 10% increase in A&E admissions and what we are not able to do is close beds. The CCG needs to work with HDTFT to understand whether we would be able to reduce the amount of spend on non-recurrent costs and escalation. We are already paying for the occupation of beds and spot purchasing comes at a premium cost. The CCG needs to look at whether we are at capacity with other beds in the system as this is more efficient.

Wendy Balmain agreed a provision cap of £125k for the next 3 months and has asked the CCG and HDTFT to provide a detailed joint report to look at options. The Governing Body agreed that this will be discussed at the next Joint Finance, Performance, Contracting and Commissioning Committee and the Joint Executive Business Committee.

**The Governing Body:**
Received the report as assurance.

**8.0 Strategy and Planning**

**8.1 Ipsos Mori 360 Feedback Report**
Amanda Bloor presented the annual Ipsos Mori 360 Feedback Report that provides intelligence to help the CCG develop and enhance stakeholder relationships. The results are also an input into NHS England’s assessment of the CCG’s performance as part of the annual assurance process.

Historically the CCG has performed well with a good level of completion rates and this year the CCG has scored above the national average on all areas.

NHS England and NHS Improvement has discontinued the 360° survey in its current form and no commissioned survey is currently anticipated for the 2019/20 business year.

Sheenagh Powell commented that the report is very encouraging and demonstrates a good reflection of the hard work taking place in the CCG.

**The Governing Body:**
Noted the Ipsos Mori 360 Feedback Report.
8.2 Commissioning Integrated Care – Section 75 Agreement

Wendy Balmain presented the Commissioning Integrated Care Section 75 Agreement.

In February 2018, Governing Body delegated operational responsibility to Finance, Performance and Commissioning Committee (FPCC) to continue to work with local providers within existing contractual frameworks and resources to deliver a new model of integrated health and care.

An extraordinary FPCC was convened in July 2019 to discuss and agree a 4 week engagement period around the Section 75 agreement. This is a joint process with North Yorkshire County Council who is also capturing comments during this period.

Wendy Balmain noted that there are some gaps within the document but that a lot of work had taken place from a number of colleagues to get this far. The new governance arrangement better reflects commissioners and the Harrogate alliance but ensure the sovereignty of each organisation with quarterly check points to ensure delivery.

The Joint Finance, Performance, Contracting and Commissioning Committee will receive verbal feedback and will be brought back to the Governing Body in September 2019 for approval.

The Governing Body:
Noted the Commissioning Integrated Care – Section 75 Agreement.

8.3 UCI World Road Cycle Championships September 2019

Simon Cox presented the UCI World Road Cycle Championships paper that informs the three North Yorkshire CCG Governing Bodies about preparations, plans and assurance mechanisms in place for the NHS in advance of the UCI 2019 World Road Cycle Championships to be held in Harrogate from 21 to 29 September 2019.

Simon Cox noted that significant planning with partner organisations has gone into this event but there will be additional pressures on Primary Care and Secondary Care services during this period.

There is also a potential financial impact and HDFT has estimated a reduction in income of circa £0.5m due to additional activity. The overall impact could be greater with a potential risk of £1m.

No additional funding is available to support the increased activity and conversations are ongoing to identify if other sources of funding could be made available. Simon Cox will also be investigating whether other public services are being reimbursed.

The Governing Body:
Noted the progress made to prepare for the UCI 2019 World Road Cycle Championships.
9.0 Governance

9.1 North Yorkshire CCGs – Governance Arrangements
Julie Warren provided an update on the governance arrangements across the North Yorkshire CCGs.

Following the outcome of the North Yorkshire CCGs Governing Bodies workshop that took place on 27 June 2019, the North Yorkshire Governing Bodies are being asked to formally approve decisions that were agreed at the workshop.

The Governing Body:
- Noted that they have discussed and given feedback on the North Yorkshire CCGs governance structure, as outlined in Appendix A.
- Approved the North Yorkshire CCGs governance structure.
- Approved to disestablish the CCG Governing Bodies non-statutory committees.
- Agreed to make a recommendation to Council of Members to establish the new non-statutory joint committees (taking place on 20 August 2019).
- Noted that the committees in the new structure will convene inaugural meetings in order to discuss and approve terms of reference.
- Noted the statutory committees (Audit, Primary Care Commissioning and Remuneration) remain and meet as Committees in Common until 31 March 2020.
- Note the update regarding communications and engagement and that further work needs to be done before a decision is made regarding the reporting governance arrangements of this group.

9.2 Quality and Clinical Governance Committee Report

The CCG carried out a self-assessment and a paper was brought to the Governing Body regarding this back in December 2018. Following the outcome of the assessment an action plan was developed and work took place across the three North Yorkshire CCGs in order to standardise areas of this work.

The CCG has recently re-assessed its compliance following the issuing of the updated assurance framework in July 2019 and the CCG now assesses its compliance as ‘substantial’.

A statement of compliance will be submitted to NHS England by the EPRR Executive Lead, Julie Warren.

The Governing Body:
Noted the update.

9.3 Quality and Clinical Governance Committee Report
Kate Kennady provided a verbal update for the Quality and Clinical Governance Committee (QCGC) report. The QCGC, which is accountable to the CCG’s Governing Body, provides assurance on the quality of services commissioned and promotes a culture of continuous improvement and innovation with respect to safety of services, clinical effectiveness and patient experience.
Kate Kennady noted that there is nothing to report by exception as details have been provided in other items on the agenda. Due to the timing of the update, QCGC has not been sighted on the clearance plan for autism assessment. Kate Kennady will ensure this is monitored through the new Joint Quality and Clinical Governance Committee.

The Governing Body:
Noted the key messages as assurance from the Quality and Clinical Governance Committee.

9.4 Finance, Performance and Commissioning Committee Report
The Finance, Performance and Commissioning Committee is accountable to the CCG’s Governing Body and provides assurance on financial issues relating to the CCG. The Committee also provides assurance on the delivery of the QIPP programme, reviews the performance of the main services commissioned, receives commissioning proposals and business cases, undertakes analysis and makes recommendations to the Governing Body.

Ian Woods noted that there is nothing to report by exception as details have been provided in other items on the agenda. The final FPCC has taken place and Ian will ensure any issues are transferred to the new Joint Committee.

The Governing Body:
Noted the key messages as assurance from the Finance, Performance and Commissioning Committee.

10.0 Minutes of the Governing Body Committees – to be Discussed by Exception
None to consider.

The Governing Body:
Noted the above.

11.0 Any Other Business
No other business was noted.

12.0 Next Meeting
Thursday, 26 September 2019
The Chris Houseman Suite,
York Sports Club, Shipton Road, York YO30 5RE

The Governing Body:
Noted the above.

13.0 Close Meeting to Members of Press and Public
Exclusion of public and the press

The Governing Body is recommended to approve the following resolution:
That the press and public be excluded from the remainder of the meeting on the grounds that publicity would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted.
Reason:
• One or more items contain information which relates to consultations or negotiations, or contemplated consultations or negotiations, in connection with any labour relations matter
• Information relating to the financial or business affairs of any particular person (including the CCG)
• One or more items contain Information relating to any individual.

The Governing Body:
Approved the above.
NHS Harrogate and Rural District Clinical Commissioning Group  
Actions from the Governing Body meeting on 1 August 2019

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<th>Action</th>
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