

### Sub-Committee Report

This Report is to assure the Governing Body that the committee has formally met in accordance with their terms of reference and to advise Governing Body members of the business transacted at the most recent meeting.

The Governing Body is asked to note the business discussed and to raise any questions in relation to the same.

<b>Title of Sub-Committee</b>	<b>Finance and Performance Committee</b>
<b>Date Meeting Held</b>	26 <sup>th</sup> June 2019
<b>Chaired By</b>	Sally England, Lay Member Finance and Performance
<b>Aligned Executive Director</b>	Chris Ford, Joint Chief Finance Officer
<b>Quoracy</b>	The meeting was not quorate as two members of the Executive Team were not present.
<b>Conflicts of Interest declared</b>	None
<b>Key Decisions Made</b>	1. Approval of minutes from meeting held on 24th April 2019
<b>Items requiring approval by the Governing Body</b>	No items require approval from the Governing Body.
<b>Delegated decisions requiring ratification by the Governing Body</b>	No delegated decisions required ratification from the Governing Body.
<b>Policies Ratified for noting by the Governing Body</b>	No ratified policies require noting by the Governing Body.
<b>Risks identified during the meeting</b>	See narrative below.
<b>Financial implications identified during the meeting</b>	See narrative below.

**Key points to note from June meeting are as follows:**

▪ **Quoracy:**

The Finance and Performance Committee was not quorate in April, was cancelled in May due to the unavailability of Executive team members and again was not quorate in June for the same reason. The Committee's Terms of reference require the attendance of "at least two members of the Executive Team, including the following: Accountable Officer, the Chief Finance Officer and the Director of Commissioning & Performance". Given the importance of the financial position and QIPP programme and the materiality of the potential risks involved, it is important that Executive team members prioritise the Finance and Performance meeting each month to allow the Committee to discharge its responsibilities as defined in the Terms of Reference.

▪ **Financial position:**

The Committee noted the financial position reported at month 2 and the deterioration in the acute position. It was noted that the Joint Programme Board had been set up and had discussed these issues in a meeting attended by Executive members from both Trusts and the CCG. The Committee noted the willingness to work together, be open, share information and understand the key drivers of activity and cost growth and to make progress in between Programme Board meetings. It was also noted that NHS England had offered support in addressing the on-going issues. The Committee requested an update at the next meeting on progress given the potential risk to the CCG's financial position.

▪ **QIPP programme:**

The Committee noted some slippage in the delivery of QIPP, both from a financial and delivery perspective and requested an update on the re-framing of the Financial Recovery Board at the next meeting and progress to identify additional scheme given the £8.7m gap against target. It was requested that pipeline schemes should continue to be reported.

▪ **Risk register**

The Committee requested that the financial risk register should be reviewed to accurately reflect the current financial risks and residual risk ratings.

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<b>Title of Sub-Committee</b>	Integrated Commissioning and Quality Committee
<b>Date Meeting Held</b>	27 <sup>th</sup> June 2019
<b>Chaired By</b>	Alison Borrett
<b>Aligned Executive Director</b>	Anne Murray
<b>Quoracy</b>	Yes
<b>Conflicts of Interest declared</b>	None
<b>Key Decisions Made</b>	Review of Cancer Pathway for Patients
<b>Items requiring approval by the Governing Body</b>	Performance Report SEND Update LD Review
<b>Delegated decisions requiring ratification by the Governing Body</b>	None
<b>Policies Ratified for noting by the Governing Body</b>	None
<b>Risks identified during the meeting</b>	<ul style="list-style-type: none"> <li>• Serious Mental Illness Physical Health Checks – Under Performance against National Standard</li> <li>• WSOA</li> <li>• Physical Health Check</li> <li>• SEND</li> </ul>
<b>Financial implications identified during the meeting</b>	None

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<b>Title of Sub-Committee</b>	Primary Care Commissioning Committee
<b>Date Meeting Held</b>	12 <sup>th</sup> June 2019
<b>Chaired By</b>	Alison Borrett
<b>Aligned Executive Director</b>	Mike Thompson
<b>Quoracy</b>	Quorate
<b>Conflicts of Interest declared</b>	Dr Roshan Jayalath as a GP in Bedford.
<b>Key items discussed and decisions made</b>	<p>Primary Care updates including;</p> <ul style="list-style-type: none"> <li>• BLMK strategy update</li> <li>• Noting of the 11 newly formed PCNs, 5 practices not yet aligned but work ongoing with the practices to ensure 100% coverage of patients.</li> <li>• Details of PCN finance</li> </ul> <p>List closures;</p> <ul style="list-style-type: none"> <li>• Decision made by PC Contracts Group to deny list closures for Priory Gardens and Eastgate Surgery ratified by PCCC</li> </ul> <p>Premises updates;</p> <ul style="list-style-type: none"> <li>• PCCC agreed to continue the Biddenham new surgery project to PID stage. Outcome of the public engagement was very mixed but it was felt by the committee that the future needs / benefits outweigh the challenges made</li> <li>• PCCC declined to approve an application for funding to be made available for premises start-up costs such as development of business cases and it was suggested to investigate NHSE capital funds further</li> <li>• Outcome of Dunstable Hub public consultation was positive it was recommended to take to GB</li> </ul> <p>Practice updates;</p>

	<p>TVMC</p> <ul style="list-style-type: none"> <li>• PCCC ratified the virtual meeting decision and discussion with the Exec team to continue with the contract award to the new provider with strict quality reporting and monitoring through KPIs and a contingency plan being identified</li> <li>• PCCC recommended that an audit be undertaken of the procurement for advisory purposes</li> <li>• Lessons learned to be undertaken and reported at the next GB</li> </ul> <p>Larksfield</p> <ul style="list-style-type: none"> <li>• The decision made virtually to allow the soft merger of Larksfield practice with a Hertfordshire practice was ratified</li> </ul>
<b>Items requiring approval by the Governing Body</b>	<p>No approvals required, papers recommended to be taken to GB;</p> <ul style="list-style-type: none"> <li>• Dunstable Hub engagement report</li> <li>• Lessons learned paper from the TVMC procurement</li> </ul>
<b>Delegated decisions requiring ratification by the Governing Body</b>	None
<b>Policies Ratified for noting by the Governing Body</b>	None
<b>Risks identified during the meeting</b>	<ul style="list-style-type: none"> <li>• Risk that individual networks may fail to deliver the benefits expected of a PCN</li> <li>• Risk that lack of communication to the public about the role of a PCN may affect the success of PCNs</li> <li>• Risk of failure of new provider at TVMC</li> </ul>
<b>Financial implications identified during the meeting</b>	None

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<b>Title of Sub-Committee</b>	Patient and Public Engagement Committee (PPEC)
<b>Date Meeting Held</b>	2 July 2019
<b>Chaired By</b>	Alison Borrett, Lay Member for Patient and Public Engagement
<b>Aligned Executive Director</b>	Jane Meggitt, Director of Partnership Engagements and Communications
<b>Quoracy</b>	The meeting was quorate
<b>Conflicts of Interest declared</b>	None
<b>Key Decisions Made</b>	<ol style="list-style-type: none"> <li>1. Approval of minutes from meeting held on 4 April 2019</li> <li>2. Confirmation that the committee were assured that the CCG had followed good practice when conducting the formal public consultation on the development of an Integrated Health and Care Hub in Dunstable.</li> <li>3. Confirmation that the committee were assured that the CCG had followed good practice when carrying out engagement with patients and public around the relocation of the De Parys Avenue and Linden Road branch surgeries from Bromham to a new building in Biddenham.</li> <li>4. Approval of the approach to take for engaging on the BLMK health and wellbeing plan which will be informed and co-designed by local residents focusing on what matters 'at place' for the population.</li> <li>5. Approval of the approach to undertake six-week targeted engagement to gather additional information and feedback from patients and staff regarding the Hydrotherapy pool at Bedford Hospital Trust.</li> <li>6. Approval of the process for members of the committee to deal with off-agenda briefings</li> </ol>
<b>Items requiring approval by the Governing Body</b>	No items require approval by the Governing Body.

<b>Delegated decisions requiring ratification by the Governing Body</b>	No delegated decisions require ratification by the Governing Body.
<b>Policies Ratified for noting by the Governing Body</b>	No ratified policies require noting by the Governing Body.
<b>Risks identified during the meeting</b>	No risks were identified during the meeting.
<b>Financial implications identified during the meeting</b>	None

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<b>Title of Sub-Committee</b>	<b>Audit &amp; Governance</b>
<b>Date Meeting Held</b>	<b>12<sup>th</sup> June 2019</b>
<b>Chaired By</b>	<b>Saqhib Ali</b>
<b>Aligned Executive Director</b>	<b>Chris Ford</b>
<b>Quoracy</b>	<b>Yes</b>
<b>Conflicts of Interest declared</b>	<b>None</b>
<b>Key Decisions Made</b>	None
<b>Items requiring approval by the Governing Body</b>	None
<b>Delegated decisions requiring ratification by the Governing Body</b>	None
<b>Policies Ratified for noting by the Governing Body</b>	None
<b>Risks identified during the meeting</b>	None
<b>Financial implications identified during the meeting</b>	None.

## **Summary**

Received updates from Internal Audit and External Audit. Internal Audit Programme for 19/20 has begun, Personal Health Budgets and Quality Primary Care site-work has commenced. Fieldwork for QIPP to begin in July.

PMO did not attend their deep-dive in June, intention is they will come in August.

External Audit gave an update post Year End Audit. The wording of “unlawful” in a submission to Secretary of State was discussed referring to the £9m transfer from MKCCG to Bedfordshire CCG making good the error made by NHS England in transferring funds to MKCCG intended for Bedfordshire. Annual Audit Letter is due in July.

The GBAF was reviewed but the Risk Registers which are being reviewed were not presented.

The Conflicts of Interest Policy and Standards of Business Conduct Policy were updated for GDPR.