

# HSI21/091

## GOVERNING BODY

<b>Title of paper</b>	Reports from Committees of the Governing Body		
<b>Agenda item</b>	12	<b>Date of meeting</b>	8 December 2021
<b>Director leads</b>	Simon Garlick, Non Executive Director for Governance – Chair, Audit and Risk Committee Edward Palfrey, Non Executive Director (Secondary Care Specialist) – Chair, Quality, Performance and Finance Committee		
<b>Clinical lead (if applicable)</b>	Nicola Decker, CCG Clinical Leader		
<b>Author</b>	Stephen Cummins, Governance Manager Helen Goff, Governance and Committee Support Officer		

<b>Purpose</b>	For decision	<input type="checkbox"/>
	To ratify	<input type="checkbox"/>
	To discuss	<input type="checkbox"/>
	To note/receive	<input checked="" type="checkbox"/>

<b>Executive Summary</b>	
<p>Since the last meeting in public of the Governing Body in November, the following Committees of the Governing Body have met in line with the approved Terms of Reference/CCG Constitution:</p> <ul style="list-style-type: none"> <li>Audit and Risk Committee held on 10th November 2021, chaired by Simon Garlick</li> <li>Quality, Performance, Finance and Workforce Committee held on 24th November 2021, chaired by Ed Palfrey</li> </ul> <p>A summary report is appended from each of the Committees, highlighting to the Governing Body the key issues and subjects discussed.</p>	
<b>Recommendations</b>	<p><b>The Governing Body is asked to receive and review the summary reports from the following meetings:</b></p> <ul style="list-style-type: none"> <li><b>Audit and Risk Committee held on 10th November 2021</b></li> <li><b>Quality, Performance, Finance and Workforce Committee held on 24th November 2021</b></li> </ul>
<b>Publication</b>	Include on public website ✓

<b>Please provide details on the impact of following aspects</b>	
Equality and quality impact assessment	This paper does not request decisions that impact on equality and diversity.
Patient and stakeholder engagement	Not applicable
Financial and resource implications / impact	There are no financial implications arising from this paper.
Legal implications	There are no legal implications arising from this paper.
Principal risk(s) relating to this paper	There are no new risks arising from this paper.
Key committees / groups where evidence supporting this paper has been considered.	Audit and Risk Committee held on 10th November 2021 Quality, Performance, Finance and Workforce Committee held on 24th November 2021

Audit and Risk Committee Summary	
1.	<b>Date of Meeting</b> : 10 November 2021
2.	<b>Overview of business including key issues for Governing Body:</b>
	<p>1. <b>Security, Counter Fraud, Bribery and Corruption Updates</b> - The Committee received a brief update which outlined the key fraud, bribery and corruption work undertaken for NHS Hampshire, Southampton &amp; Isle Of Wight Clinical Commissioning Group for the period 23 August 2021 to 25 October 2021. Areas covered included awareness, prevention and detection, investigations and loss and the work plan tracker.</p>
	<p>2. <b>Revised Counter Fraud, Bribery and Corruption Policy</b> - The Committee received the policy, which had been reviewed and updated to ensure that it referenced the NHS Hampshire, Southampton and Isle of Wight CCG and aligned to the Cabinet Office Government Functional Standard for counter fraud (GoVS013) and NHSCFA Requirements.</p>
	<p>3. <b>Governing Body Assurance Framework (GBAF)</b> - The Committee reviewed the GBAF, noting concerns, in particular with Risk ID 12 - System Workforce Resilience &amp; Sustainability, and Risk ID 6 - Planning for the Future.</p>
	<p>4. <b>Internal Audit</b></p> <p>i. <b>Update on the Implementation of Recommendations</b> – The Committee received a paper which provided an update in relation to progress being made in implementing recommendations arising from Internal Audit reviews.</p> <p>ii. <b>Progress report against the 2021/22 Annual Internal Audit Plans</b> – The Committee received a report, which provided an update on the progress since the last meeting, and brought to the attention of the Committee any significant Internal Audit and related issues which may have an impact on the CCGs.</p> <p>iii. <b>Final Internal Audit Reports</b> – The Committee received four final reports issued following the last meeting.</p> <ul style="list-style-type: none"> <li>• Service Development Funding (SDF) and Systems Funding for the Sustainability &amp; Transformation Partnership (STP) / Integrated Care System (ICS)</li> <li>• Key Finance Systems – Phase 1</li> <li>• Primary Care Finance</li> <li>• Quality Governance - Serious Incidents</li> </ul>
	<p>5. <b>External Audit Progress Report</b> – The Committee received an update on the progress of the 2021/22 financial statements and value for money audits and signposted Committee members to publications, news and reports that may be of interest.</p>
	<p>6. <b>Amendment to Standing Financial Instructions</b> – The Committee received a paper setting out a number of amendments to the Standing Financial Instructions and Delegated Financial Authority for Hampshire, Southampton and Isle of Wight CCG. For requests to raise invoices and charges other than healthcare contracts:</p>

	<ul style="list-style-type: none"> <li>• The limit for the Accountable Officer and Chief Finance Officer approval of £10,000,000 has been replaced with an unlimited value.</li> <li>• A new category for approval by the Director of Finance of up to £10,000,000 has been added</li> <li>• Limits for Deputy Director of Finance or Executive Director or Managing Director have been changed from £250,000 to £5,000,000</li> <li>• A new category for approval by Assistant / Associate Director of Finance or Locality Associate Director of up to £1,000,000 has been added</li> <li>• A new category for approval by Senior Manager (8a, 8b, 8c) of up to £100,000 has been added</li> </ul>
	7. <b>Finance Update</b> - The Committee received an update highlighting financial pressures at the start of H2 and resultant actions to address the financial deficit.
	8. <b>Single Tender Waivers</b> – The Committee received an updated Single Tender Waivers Log which was broken down into three sections: <ul style="list-style-type: none"> <li>• Direct Awards (the majority)</li> <li>• Direct Awards via an approved Framework (with confirmed Direct Award facility)</li> <li>• Decision Log re: Waivers where a future decision was required upon contract expiry i.e. an ongoing recurrent need</li> </ul>
	9. <b>Losses and Special Payments</b> - The Committee received a report, which advised that there were no Losses and / or Special Payments to report in the year to date.
	10. <b>Public Inquiry Update</b> - The Committee received a paper which set out the status of the Public Inquiry work arising from the COVID-19 pandemic and provided a high-level overview of work underway including key actions and risks
	11. <b>Future Ways of Working Action Plan</b> - The Committee received a paper, which provided an update on the implementation of actions associated with the Lessons Learned Report filed at the completion of the Future Ways of Working Programme which delivered the merger of the six CCGs to form Hampshire, Southampton and Isle of Wight CCG.
3.	<b>Items to escalate to Board</b> There were no items identified for escalation to the Governing Body.
4.	<b>Key reference documents:</b> <ul style="list-style-type: none"> <li>• Draft Minutes of meeting held on 10 November 2021 will be published once approved by the Committee</li> </ul>
5.	<b>Date of Next Meeting - 26 January 2021</b>

<b>Quality Performance, Finance and Workforce Committee</b>	
	<b>Date of Meeting:</b> 24 November 2021
	<b>Overview of business including key issues for Governing Body</b>
<b>(a)</b>	<b>Exception reports from local teams</b>
	Urgent Care pressures were reported as a main theme across each area. Assurance was provided that a range of actions are being taken to address the issues. Ambulance holds were reported as an issue in some areas. Primary Care resilience was also a common theme. There are GP workforce issues and increased demand. There is anxiety for GP colleagues relating to the Patient Access requirements from April 2022 which will result in additional workload. Clear guidance is needed relating to the issuing of Medical Exemption Certificates relating to the COVID vaccine. The Refugee Asylum Hotels are creating additional demand for already overstretched services. The Committee proposed a Hampshire & Isle of Wight (HIOW) solution in collaboration with system partners. Levels of aggression in the system was raised as a growing issue. For South West, University Hospital Southampton (UHS) flagged a supply risk relating to yellow top blood bottles.
<b>(b)</b>	<b>Quality and Performance</b>
	A sustained increase in demand for all urgent care services and a significant increase in Primary Care demand was reported. South Central Ambulance Service (SCAS) are operating at Resource Escalation Action Plan (REAP) Level 4 (severe pressure). Occupancy level increases continue resulting in increased numbers of ambulance handover delays. Assurance was provided that the ambulance handover delays trajectory is improving and that a comprehensive action plan is in place. Urgent Care performance is declining and ambulance service response times are not being achieved. Assurance was provided that immediate actions are being taken to maximise patient care and that longer term actions are in place to address the underlying causes of delays. Relating to Child & Adolescent Mental Health Service (CAMHS), Tier 4 capacity remains an issue. Plans are being agreed to ensure that no patient will wait over 104 weeks from the end of March 2022. 52 week waits are static. Relating to Cancer performance, there is an increase in two week referrals particularly for breast and gynaecology. Relating to sickness absence across the system, the Committee were assured that significant work is taking place to put in place mitigating actions to address the issues. Sickness absence is acknowledged as a key risk. There have been four serious incidents relating to SCAS waits which are subject to investigation. The rise in violence and aggression against primary care staff was highlighted. There is growing anxiety within the workforce relating to the mandated requirement for vaccination. Maternity Services are under significant pressure due to increased births and staffing issues. Twelve intrauterine deaths have been reported by Portsmouth Hospitals University (PHU). Three have been reported as serious incidents and the others are subject to investigation.
<b>(c)</b>	<b>System Assurance Framework 2021/22</b>
	An overview of the NHS System Oversight Framework and the System Assurance Framework for 2021/22 for the HIOW Integrated Care System (ICS) was provided. Implementation of the System Assurance Framework will ensure that the HIOW system, in partnership with NHS England/Improvement (NHSE/I), meets minimum oversight/assurance requirements for 2021/22, in the transition to greater delegation for oversight/assurance in 2022/23. The Committee acknowledged that the framework will need to iterate further as the ICS infrastructure continues to evolve and embed.
<b>(d)</b>	<b>Continuing Healthcare (CHC) and Funded Nursing Care Q2 2021-22 Assurance</b>
	The Committee were updated on the NHSE requirement to complete 80% of CHC assessments within 28 days of referral. An improvement trajectory has been agreed with

	NHSE. The target has been achieved for Q2. The completion of the backlog of CHC cases following the COVID-19 CHC pause has been a challenge and there is a likelihood that the target will not be achieved for Q3 whilst the focus remains on clearing this. There is likely to be a significant improvement in Q4. Work has taken place to clear a high number of longstanding complaints and the Committee were assured that new complaints are now being worked on. The Committee were assured that close work is taking place with Local Authorities relating to the issues and improvements required. The Committee were assured that no care will be compromised relating to the £4m CHC efficiency savings required for H2.
<b>(e)</b>	<b>Finance</b>
	The CCG delivered a £2.3m surplus in H1. As the planning process for H2 is not yet concluded, national guidance was to report a break even position for M7 against a temporary, nationally determined allocation. The revised allocation following the submission of the plan will be reflected in the report for M8.
<b>(g)</b>	<b>H2 Planning position update</b>
	The Committee were updated on the H2 Planning submission. The activity and performance submission was compliant with requirements to have zero 104 week waits (which will be a significant challenge) and the requirements to hold or reduce the numbers of patients waiting over 52 weeks. The continued increases in non-elective activity pose the greatest risk to achieving these targets and delivering on zero 104 week waits relies upon mutual aid. The activity and performance submission was non-compliant relating to waiting list growth as the expectation is that the overall waiting list size will grow. The HIOW ICS system financial plan has a deficit plan submission of £15.5m for H2. There is an expectation that between now and end March 2022 that this position is improved on with the aim to break even. Work is taking place to look into how this can be achieved.
<b>(h)</b>	<b>Better Care Fund Plans</b>
	The Better Care Fund (BCF) Plans for each system have been submitted. The focus of each BCF plan for this financial year is strengthening health and care services out of hospital across each Local Authority footprint.
<b>(i)</b>	<b>Workforce Report</b>
	HIOW is the most affected system in the South East region for absence and the absence rate is impacting the safe delivery of services. The Committee were assured that there is an absence improvement plan in place. Although absence rates have decreased, they are likely to climb over winter. There are high rates of anxiety, depression, stress and other psychiatric illness compared to other systems in the region and the Committee were assured that this is being looked into. Assurance was provided that research has taken place to look into the causes of absence and actions that may make a difference. There is not expected to be an improvement in absence rates over the next 12 months. Vacancy rates are a concern in particular areas of the workforce. The Committee were assured that pipeline work is ongoing. Relating to mandatory vaccinations for NHS staff, some staff members will choose not to be vaccinated and the options for these members of staff will need to be assessed. This will create additional pressure for the workforce teams.
<b>(j)</b>	<b>Procurement</b>
	Relating to the Age Related Macular Degeneration ratification paper (South West /North and Mid), the Committee approved the ratification document and supported the conditions precedent and if met to award a 27 month contract to the preferred bidder.  Relating to the Isle of Wight Phlebotomy justification paper, the Committee supported the decision to agree a 3+2 contract and noted how any challenges would be dealt with.
<b>(k)</b>	<b>Items for escalation</b>
	The Quality, Performance, Finance and Workforce Committee wished to escalate the following to the Governing Body:

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|  | <ul style="list-style-type: none"><li>• Asylum Seekers demand for services – the need for a HIOW solution in collaboration with system partners</li><li>• Levels of aggression is a growing issue in the system, particularly for Primary Care</li><li>• The anxiety for GP colleagues relating to the Patient Access requirements from April 2022 which will result in additional workload</li><li>• Workforce pressures</li></ul> |
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