



**Minutes of the NHS North Kirklees CCG Governing Body Meeting held on  
Wednesday 1<sup>st</sup> April 2015, 2.00pm – 5.30pm  
Dewsbury Town Hall**

**Present:**

David Kelly (DK)  
Chris Dowse (CD)  
Andrew Cameron (AC)  
Julie Elliott (JE)

Kath Greaves (KG)  
Rachael Kilburn (RK)  
Tony Gerrard (TG)  
Khalid Naeem (KN)  
Kiran Bali (KB)

Deborah Turner (DT)

Matt Shepherd (MS)  
Steve Brennan (SB)  
Adnan Jabbar (AJ)

**In-attendance:**

Siobhan Jones (SJ)

Sarah Muckle (SM)  
Pat Patrice (PP)

**Apologies:**

Richard Parry (RP)  
Rachel Spenser-Henshall (RSh)  
Yasar Mahmood (YM)  
Nadeem Ghafoor (NG)  
Helen Shallow (HSh)  
Helen Severns (HS)  
Jackie Holdich (JH)  
Joanne Crewe (JCr)

**Minutes:**

Natasha Brown (NB)

Chair  
Chief Officer  
GP Member  
Quality, Performance &  
Finance Lay Member  
Practice Nurse Member  
Practice Manager Member  
Audit Lay Member  
GP Member  
Patient and Public Engagement Lay  
Member  
Head of Quality and Safety & Chief  
Nurse  
Secondary Care Consultant Member  
Chief Finance Officer  
GP Member

Head of Communications and  
Engagement  
Consultant in Public Health  
Governance and Corporate Affairs  
Senior Manager

Kirklees Council  
Interim Head of Public Health  
GP Member  
GP Member  
Head of Finance and Contracting  
Head of Transformation  
Head of Primary Care  
Registered Nurse Member

Corporate Governance Administrator

**NKCCGGB/15/001**

**Introductions**

The Chair opened the meeting by welcoming all those in attendance. It was highlighted that this was a meeting in Public not a Public Meeting and questions could be raised by members of the public and will be answered accordingly as indicated on the agenda. The Governing Body (GB) Members introduced themselves.

DK read out a statement in relation to the questions from the public:

“As you will be aware, Parliament was dissolved this week in preparation for the general election in May 2015. We are now in what is called the ‘pre-election period’. NHS organisations are subject to guidance designed to ensure that they remain politically impartial at this time. In response to the guidance, we have decided that we will not have our usual public questions session during this meeting. We will however take any written questions from members of the public and provide written answers to these in the minutes of this meeting, which will be published in the usual way.

NHS business should proceed as normal with no disruption to patient services – but as issues relating to the NHS tend to be high profile, and likely to attract far greater scrutiny in the pre-election period than would otherwise be the case, special care is needed to avoid being caught up in issues of propriety or party political controversy.”

**NKCCGGB/15/002**

**Declarations of Interest**

TG declared an interest as a Lay Member for Greater Huddersfield Clinical Commissioning Group (GHCCG) however; TG advised that he had no specific interests relating to the agenda.

**NKCCGGB/15/003**

**Unconfirmed Minutes of NHS North Kirklees CCG Governing Body Meeting held on 4<sup>th</sup> March 2015.**

The Governing Body was ASSURED that the minutes were a true and accurate record with NOTED amendments.

**NKCCGGB/15/004**

**Live Action Sheets**

**NKCCGGB/14/304 – Monthly Performance Report**

DT informed the GB that she had a discussion with Jane O'Donnell regarding the urine testing in relation to MRSA, identified in the Post Infection Review. Jane advised that this was routine secondary screening for patients with infection portals For instance, confirming that a urine testing is carried out for patients who have indwelling catheters and wound swabs would be taken from patients with pressure ulcers. In this particular case, this was additional testing for a patient who had a catheter.

**NKCCGGB/15/005**

**Matters Arising**

No issues or comments were raised.

**NKCCGGB/15/006**

**Patient Story – Yorkshire Children's Centre**

DT introduced Helen Orlic and 3 volunteers from the Yorkshire Children's Centre who were present on behalf of the Befriending and Travel Companion Services to share their experience and stories with the GB.

The Children's Centre recently merged with the Batley Resource Centre. Helen presented a power point presentation highlighting what the Befriending Service involves and the impact it has on people's lives.

The second service is Travel Companions. This is the next step to Befriending or a starting point to getting out and about. Volunteers offer their time and cars to drive clients to appointments, socialising or shopping. Volunteers can also accompany clients on public transport, taxis or even walking short distances.

The service offers friendship, company and help to build confidence in order to join a community activity or Lunch Club and support to establish other social contacts.

Both projects have been running for 2 years and have run successfully in North Kirklees, subsequently, the services will be rolled out across Huddersfield.

Helen introduced 3 volunteers to the GB who shared their experience.

DT thanked the volunteers and acknowledged the hard work that is going on which is making a positive impact on people's lives.

KG advised that she was aware of the Befriending service as this was offered to her mother. It was AGREED that information will be included in the Newsletter and will be circulated to member practices.

Training days are undertaken for the volunteers which include security and confidentiality training. Other training had also been undertaken around adult safeguarding and dementia.

The GB thanked Helen and the volunteers for attending the meeting.

**NKCCGGB/15/007**

### **Quality and Safety Report**

DT presented the Quality and Safety Report which was scrutinised and discussed in length at the Quality, Performance and Finance Committee on 18<sup>th</sup> March 2015 and on the morning of 1<sup>st</sup> April 2015.

### NHS Choices and patient opinion

DT informed the GB that in January and February 2015, 19 comments had been left regarding Dewsbury and District Hospital on the NHS Choices website which included positive and negative comments. The QPFC were assured that any negative comments had been followed up.

The GB NOTED that to date, no comments had been supplied via the NHS Choices website from patients who have used Locala Services. However, Locala have a strong Patient Opinion presence.

### Quarter 3 CQUIN Achievements

The quarter 3 CQUIN achievement for MYHT was 100%.

DT informed the GB that North Kirklees CCG will no longer be the lead commissioner for Spire Elland and Methley Park.

### Quality Board Summaries

The GB NOTED that the QPFC were assured on the Quality Board Summaries.

### Winterbourne Update

DT informed the GB that QPFC had requested to receive the 4 External Lives reviews and associated action plans and were requested to consider how assured they were in relation to the progress of these action plans, considering there are actions that were incomplete and past the timescales.

### Care Home Dashboard Summary

DT advised that the QPFC wanted to understand the work that is going on with the LA around care homes. DT described some of the work NKCCG is leading on to set a minimum standard in care homes including induction packs for nursing staff.

DT informed the GB that NKCCG will finalise their safety pledges and present to the QPFC for signoff prior to submission.

TG asked about the Norman Hudson Care Home in relation to the inspection process. In terms of re inspection, CQC use the existing outcome domains and inspect against these. They seek if the CCGs have any issues which may steer the inspection process. Since the inspection was non-compliant in June 2014, there hasn't been another inspection to inspect the areas that were not compliant. DT AGREED to look further into this and report back to GB in June 2015.

**ACTION – DT in investigate why there hasn't been a re-inspection at Norman Hudson Care Home. DT to feed back to the GB in June 2015.**

AC asked a question around the dementia screening at MYHT.

**ACTION - DT AGREED to check if MYHT are 100% compliant on dementia screening, and if so, why have the GP GB members not received this feedback.**

### Nursing Homes

Individual patients in any of the care homes are case managed by the Continuing Healthcare Nurses to ensure the patients are prescribed the correct care. If the nurses are not satisfied regarding the patient care, this will be flagged with the care home. Any care home that is not compliant has an immediate action plan put in place, and the CCG seek assurance to ensure that actions are taking place.

### CQC

DT provided the GB with an update on the progress on the MYHT CQC action plan. CQC will be re-inspecting in quarter 1 for 2015/16. This is likely to be in June 2015. MYHT has made significant progress on their action plan which is reviewed on a weekly basis, however, concerns continue around the staffing levels and DNA/CPR forms. This does not mean patients are not given these; however, it means that some forms may not be completed fully, by missing a tick box and to ensure all sections are complete. DT was assured that MYHT are taking the relevant actions against the CQC action plan.

### **The GB:**

- **RECEIVED and NOTED the contents of the Quality and Safety Report**
- **Were satisfied that the paper provided ASSURANCE**

NKCCGGB/15/008

### **Chair's Report**

#### Prime Ministers Challenge

DK informed the GB that our Federation submitted a bid for the Prime Minister Challenge and the bid was unsuccessful. The results showed that 1 in 10 was approved and the chances of success were small.

#### Future Governing Body meetings

DK informed the GB that following the Governance Review, it has been decided that the GB meetings will be held bi-Monthly. The Venues of future GB meetings will be taking

place in Community centers across North Kirklees. Dates, times and venues can be viewed on the website.

#### Director of Public Health

It was CONFIRMED that Rachel Spencer – Henshall had been appointed as Director of Public Health. The GB formally thanked SM for all her hard work and commitment. SM has been very instrumental with the setup and authorisation of the CCG.

**NKCCGGB/15/009**

#### **Chief Officer Report**

CD advised that it was requested at the last GB meeting, the Chief Officer Report would include a reflection of the highlights and achievements that have been made in the last 12 months. This was reflected in the Chief Officer report.

#### **The GB:**

➤ **RECEIVED and NOTED the Chief Officer's Report for information.**

**NKCCGGB/15/010**

#### **Finance and Contract Report**

SB presented the Finance and Contract report and informed the GB that scrutiny and debates took place at QPFC on Wednesday 18<sup>th</sup> March 2015.

#### Finance duties

It was NOTED that the Finance Team continue to work hard to ensure all invoices are paid in a timely manner, however this is not a statutory duty therefore there will be no penalties if the invoices are not paid within a set timeframe.

#### Year end accounts

The Finance Team are working towards year end positions. It was CONFIRMED in QPFC that the CCG will achieve its surplus at the year end.

SB reminded the GB that delegated authority was given to the Audit Committee last year to approve of the Annual Report and Accounts. When this decision was made, it was AGREED that this would continue until revoked. TG informed the GB that all members were invited to the QPFC to participate in the discussions in relation to the financial plans. TG confirmed that this process will be followed for the Audit Committee and invites will be sent out to all GB members.

**ACTION – TG to formally invite all GB members to the Audit Committee when signing off the Annual Report and Accounts.**

The GB NOTED that the draft Accounts will be submitted on 23rd April 2015 and the final accounts will be submitted in May 2015. The final Annual Report and Accounts will be presented to the GB in August 2015.

All GB members will be sited on the Annual Report and Accounts prior to them being presented to the Audit Committee to allow for comment.

#### **The GB:**

➤ **NOTED the Finance and Contract position and the associated risks identified in the report**

**NKCCGGB/15/011**

#### **Monthly Performance Report**

SB presented the monthly performance report which was presented to the QPFC on the morning of Wednesday 1<sup>st</sup> April 2015.

A number of areas were discussed at QPFC where performance continues to be an issue for the CCG. This included:

- Ambulance Response Times
- Cancer Waiting Times Standard
- Mental Health Access Standards
- 18 weeks RTT Standards
- A&E 4 Hour Waiting Time Standards
- MRSA and C.Diff

#### Yorkshire Ambulance Service (YAS)

TG drew the GB attention to the actions being taken by YAS to improve measures.

CD provided the GB with ASSURANCE that a daily call takes place each morning to discuss demands that health care systems are facing.

KG drew the GB attention to the decrease in performance for the Diabetic Retinopathy and questioned if this was due to it not being part of QoF and if this could be something the CCG could influence. SM agreed to find out the detail of this performance issue.

#### **ACTION – SM to investigate the decrease in the Diabetic Retinopathy Screening.**

JE pointed out that we have come to the end of 2014/15 and requested assurance that we review the performance issues, and urged that the CCG need to learn lessons and build these into the future performance reports. CD advised that performance is on the SMT agenda and is reviewed on a regular basis.

#### **The GB:**

- **NOTED** and that North Kirklees CCG Performance for the reporting period December/Q3 2014 against the key outcome and measures for 2014/15
- **Were ASSURED** that actions are being taken to address areas of under and over performance

#### **NKCCGGB/15/012**

#### **Quality, Performance and Finance Committee Terms of Reference (TOR)**

JE presented the QPFC TOR and advised that recent amendments had been made to reflect the CCGs conflicts of Interest Policy and the CCGs Constitution. The GB NOTED that the Declarations of Interest now refers to “please refer to the Conflict Of Interest Policy”.

JE informed the GB that following the QPFC, there were some additional proposed changes which the GB was asked to consider:

JE read out the recommendations made by QPFC:

#### Quorum

“A quorum shall consist of at least 4 members which will include a Lay Member and a Practice Member. Where conflicted items are being considered, quorum shall consist of at least 4 non conflicted members one of whom will be a Lay Member.”

#### Frequency of meetings

It was NOTED that meetings will be held at least monthly.

#### Relationships and Reporting

The Committee will receive minutes from other meetings that are captured in the work plan.

List of Membership and those in attendance

It was recommended for individual names to be removed and leave the positions detailed in the TOR.

KN questioned if the Practice Member could be changed to Clinical Practice Member. DK advised that the only non-clinical Practice Member on the Committee was the Practice Manager and the other members were clinical. It was AGREED that the GB were content with the wording as Practice Member.

CD reminded GB members that the Conflict Of Interest Policy is accessible on the website.

The GB NOTED that Jane O'Donnell's job title was incorrect.

**ACTION – PP to amend the TOR to state Jane O'Donnell's correct job title.**

**The GB:**

- **APPROVED the recommendations made by Quality, Performance and Finance Committee**
- **Were ASSURED that the Terms of Reference for the Quality, Performance and Finance Committee were fit for purpose**

**NKCCGGB/15/013**

**Terms and Remuneration Committee Terms of Reference (TOR)**

KB presented the TOR for the Terms and Remuneration Committee which were discussed at the Committee on 24<sup>th</sup> March 2015.

Declarations of Interest

The GB NOTED that the recommendations were to amend the Declaration of Interest to state "Please refer to the Conflict of Interest Policy". This would ensure consistency was met across all TOR for each Committee within the CCG.

List of Membership and those in attendance

It was recommended for individual names to be removed from the list of membership and those in attendance and leave the positions detailed in the TOR.

**The GB:**

- **APPROVED the recommendations made by the Terms and Remuneration Committee**
- **Were ASSURED that the Terms of Reference for Terms and Remuneration Committee were fit for purpose**

**NKCCGGB/15/014**

**Governing Body Assurance Framework (GBAF)**

PP presented the GBAF which had been revised to ensure it captured the strategic and long term risks to the CCGs four strategic objectives.

It was NOTED that the risks have been identified through discussions with the Chair and Heads of Service during February 2015.

CD highlighted that the GBAF is not the organisational risk register.

TG questioned the organisational sustainability being a risk score of 20 on the Executive Summary, as this was not consistent within the GBAF itself. PP CONFIRMED that the correct risk score for the organisational sustainability was a score of 16.

CD advised that the SMT will keep a close an eye on the risks and take actions where applicable. It was NOTED that reports will be presented to the GB on a regular basis and that the issues are also scrutinised at QPFC on a regular basis.

It was AGREED that the GBAF will be presented to the GB on a 6 monthly basis.

**ACTION – NB to amend the work plan to ensure the GBAF is presented to the GB on a 6 monthly basis.**

The GB were reminded that the Risk Register is on a 6 week cycle and the risks in the GBAF will also be tied into the risk register.

**ACTION - An additional column to be added to highlight where each area of work is going and where they are scrutinised.**

**The GB:**

- **RECEIVED and APPROVED the Governing Body Assurance Framework for 2015/16**

**NKCCGGB/15/015**

**Governing Body Work Plan**

The GB reviewed the Governing Body Work Plan and made the following recommendations:

It was AGREED that the Annual Report will be presented to the GB in August 2015.

It was AGREED that the Francis Report would be removed from the Work Plan as this is managed by the QPFC.

**ACTION – NB to amend the Work Plan to indicate the changes agreed by the GB.**

**NKCCGGB/15/016**

**Ratified minutes of the NHS North Kirklees CCG Governance and Corporate Affairs Committee held on 3<sup>rd</sup> December 2014.**

The GB **RECEIVED** and **NOTED** the minutes of the NHS North Kirklees CCG Governance and Corporate Affairs Committee held on 3<sup>rd</sup> December 2014.

**NKCCGGB/15/ 017**

**Ratified minutes of the Health and Wellbeing Board held on 26<sup>th</sup> February 2015.**

The GB **RECEIVED** and **NOTED** the minutes of the Health and Wellbeing Board held on 26<sup>th</sup> February 2015.

CD advised that DK will become the deputy Chair for the Board as of June 2015.

**NKCCGGB/15/018**

**Risk Management Framework**

Noted and accepted the contents of the report.

**NKCCGGB/14/227**

**Any Urgent Business**

None raised.

**NKCCGGB/14/151**

**Date and Time of Next Meeting**

**Wednesday 3<sup>rd</sup> June 2015, 9.00am – 12.30pm**  
**Options Centre, 7 George Street, Dewsbury, WF13 2LX**

The Chair informed the GB that future dates will be published on the NKCCG website.

This concluded the content of the Governing Body meeting and the Chair declared the meeting **CLOSED** at approximately 4.30pm.

**Chairman's Signature:** 

**Date: Wednesday 3<sup>rd</sup> June 2015**

**AGREED ACTIONS**  
**NHS North Kirklees Governing Body**  
**Wednesday 1<sup>st</sup> April 2015**  
**2.00pm – 4.30pm**  
**Dewsbury Town Hall**

<b>Agenda Item</b>	<b>Lead Name</b>	<b>Action</b>	<b>Comments</b>
<b>NKCCGGB/15/007</b> <b>Quality and Safety Report</b>	DT	DT in investigate why there hasn't been a re-inspection at Norman Hudson Care Home. DT to feed back to the GB in June 2015	
	DT	DT AGREED to check if MYHT are 100% compliant on dementia screening, and if so, why have the GP GB members not received this feedback.	
<b>NKCCGGB/15/010</b> <b>Finance and Contract Report</b>	TG	TG to formally invite all GB members to the Audit Committee when signing off the Annual Report and Accounts.	Complete
<b>NKCCGGB/15/011</b> <b>Monthly Performance Report</b>	SM	SM to investigate the decrease in the Diabetic Retinopathy Screening.	
<b>NKCCGGB/15/012</b> <b>Quality, Performance and Finance Committee Terms of Reference (TOR)</b>	PP	PP to amend the TOR to state Jane O'Donnell's correct job title.	Complete
<b>NKCCGGB/15/014</b> <b>Governing Body Assurance Framework (GBAF)</b>	NB	NB to amend the work plan to ensure the GBAF is presented to the GB on a 6 monthly basis.	Complete.
	PP/DT	An additional column to be added to highlight where each area of work is going and where they are scrutinised	Complete

<b>NKCCGGB/15/015</b> <b>Governing Body Work Plan</b>	NB	NB to amend the Work Plan to indicate the changes agreed by the GB.	Complete. All changes have been made to the work plan and will be presented to the Governing Body on 3 <sup>rd</sup> June 2015.
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