


Date:	14 th February 2019
Meeting:	Governing Body
Item Number:	Item 7.4
Public/Private:	Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>

Author: (Name, Title)	John Pougher Head of Governance
GB Lead: (Name, Title)	Alex Seale Chief Operating Officer
Director approval	Alex Seale Chief Operating Officer
Director Signature	

Report Title:
Quarterly Governance Update
Decisions to be made:
<p>The Governing Body is asked to</p> <ol style="list-style-type: none"> 1. Approve the attached quarterly update paper 2. Note the actions completed and work remaining

Link to a Strategic Objective?	<input type="checkbox"/>	The report highlights governance work that facilitates the delivery of the CCG's objectives
Link to a Strategic Risk	<input checked="" type="checkbox"/>	

Continue to improve the quality of services	<input type="checkbox"/>	Improve patient experience				<input type="checkbox"/>
Reduced unwarranted variations in services	<input type="checkbox"/>	Reduce the inequalities gap in North Lincolnshire				<input type="checkbox"/>
Deliver the best outcomes for every patient	<input type="checkbox"/>	Statutory/Regulatory				<input checked="" type="checkbox"/>
Purpose (tick one only)	Approval <input checked="" type="checkbox"/>	Information <input type="checkbox"/>	To note <input type="checkbox"/>	Decision <input type="checkbox"/>	Assurance <input type="checkbox"/>	

Executive Summary (Question, Options, Recommendations):	
<p>As part of legal directions the CCG was required to produce and implement a governance action plan that would be subject to scrutiny by the Governing Body. The attached report highlights the latest position against the agreed actions. All elements of the Plan are now green.</p> <p>The CCGs exit from special measures has been approved by NHS England Regional Management Team and will now progress to formal national approval over the next few weeks</p>	
Recommendations	<ol style="list-style-type: none"> 1. Approve the attached report 2. Note the actions completed and work remaining
Report history	
Equality Impact	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Sustainability	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Risk	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Legal	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Finance	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	

<i>Patient, Public, Clinical and Stakeholder Engagement to date</i>									
	<i>N/A</i>	<i>Y</i>	<i>N</i>	<i>Date</i>		<i>N/A</i>	<i>Y</i>	<i>N</i>	<i>Date</i>
Patient:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Clinical:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Public:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

No.	Recommendation	Lead	Action	Outcomes	RAG	Updates	RAG
1	Board Development Programme: Board maturity matrix TOR/JDs'	AS/JP	Dec '17	Circulate to GB responses end Dec '17	A	Board Maturity matrix completed and agreed. GB JD's to be finalised.	G
2	The CCG should undertake a rapid appraisal of all the TOR's of its committees to ensure consistency and remove duplication	AS	End Nov '17	Initial precis to be discussed at SLT 28/11	A	Complete - new committees been operating since Jan'18	G
3	All governing body members but particularly the executive team should be set formal objectives and appraisals should be undertaken annually	EL/MS	March '18	Plan to ensure all members have a date for mtg in diary	R	New Head of People commenced June '18. New appraisal process agreed will be cascaded through organisation by May '19. Jan '19 work shop with GB on strategic directions and objectives. Strategy to be finalised by March '19.	G
4	The governing body should appoint a board secretary whose role it is to be the custodian of governance in the organisation supported by a Corporate mgt role	AS /JP	End Dec '17	Work with Hull Board secretary to understand the role/requirements	A	Identified Board Secretary support from Hull CCG.	G
5	The governing body should rarely note or receive items but should actively take decisions and do so in public domain	JP	End Nov '17	Agreed at GB workshop 9/11	G	Complete. All agendas reviewed.	G

No.	Recommendation	Lead	Action	Outcomes	RAG	Updates	RAG
6	The governing body should meet bi-monthly in public to: <ul style="list-style-type: none"> • develop workplan – bi-monthly • OD/corporate business – workshops alternate months 	AS /JP	Jan '18	Develop a board workplan aligned to strategic intentions	R	This has been in operation since Dec '17 - GB workplans on agenda for April meeting	G
7	The CCG should move rapidly to an integrated reporting system which covers the full gamut of its responsibilities and enables at a glance the relationships between quality, finance and workforce	CEL/ES/ AS E Munday C Nicholson L Tilly	Jan '18	To pull together initial report for Dec mtg	A	Monthly integrated report been presented since Feb '18	G
8.1	Work with North Lincolnshire Council to develop an integrated place based plan	EL	End of Mar '18	Work with 'place plan' to develop strategic intentions	A	STP Health Place Plan submitted end August'18	G
8.2	Re-establish links with PH for population health and prevention	AS	End of Jan '18	Establish regular meetings and attendance at key committees	A	Prevention one of 6 key priorities agreed by GB work in place to develop programme delivery	G
9	Commissioning: The CCG needs to review options for delivering acute commissioning/contracting with other neighbouring CCGs	EL/AS	End of Jan '18	Need to identify need and discuss with neighbouring CCGs	R	HASR work in phase 2 and CCG commissioning services from primary care to support NLaG. Agreed joint approach and through CCP to working and shared capacity (NL/NELCCG).	G

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10	The CCG should focus its strategy as a place-based commissioner focusing on primary care, ambulatory care and mental health on local strengths and align more closely with the place plan	EL/SS/AS	Mar '18	Need to agree commissioning intentions and strategic direction	A	STP Health Place Plan submitted August '18. Out of Hospital Transformation Board est'd since July '18. Workstreams and Model of Care agreed.	G
11	Regulators: NHSE must move quickly to support the CCG through any strategic change	EL/ AS	Monthly reviews	Discuss priorities at monthly directions meetings	G	Complete	G
12	Culture: The CCG will implement an OD plan linked to the strategic intentions	EL	End Mar '18	Review OD work and implement agreed work plan	A	OD partner identified. OD diagnostic completed and Workplan to be agreed Jan '19.	G
13	Wider Partnerships: Re-establish links to STP and workstreams to ensure align to place based plan	EL/MD/SP	End Mar '18	As part of capacity review in CCG work with STP/JCC to maximise input	A	PMO team working across the HASR/STP to align work	G
14	Develop relationships with third sector to ensure all partners involved in CCG working with public and develop local COMPACT	Governing Body	End Mar '18	Establish a regular meeting with CVS and Healthwatch to share and understand issues/ risks and opportunities	A	Healthwatch including CVS engaged in a number of meetings. Engagement in Out of Hospital Transformation.	G
15	Comms and Engagement: The CCG needs to review internal and external comms & engagement to ensure aligned to strategic direction	EL	End Mar '18	Review the current provision and develop a plan aligned to strategic intentions	A	New comms and engagement team started 3 rd Aug '18.	G

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15	Comms and Engagement: The CCG needs to review internal and external comms & engagement to ensure aligned to strategic direction	EL	End Mar '18	Review the current provision and develop a plan aligned to strategic intentions	A	Range of consultations including CVS. On-going planned and public and stakeholder engagements.	G