

Minutes of the Clinical Commissioning Group (CCG) Governing Body

FORMAL – Part 1

Date and time of Meeting:	Friday 15 March 2019 10:35 – 12:25
Venue:	Training and Conference Suite, Number One Riverside
Ratified:	Friday 17 May 2019

Present:	Dr Chris Duffy Mrs Joanne Newton Mrs Denise Dawson Mrs Sam Evans Mr Peter Riley Dr Vijay Tandle Dr Bodrul Alam Mrs Sandra Croasdale Mrs Alison Kelly Mrs Andrea Fallon Mrs Sally McIvor Dr Aggy York Ms Kate Jones	Clinical Chair (<i>Chair</i>) Lay Member for Governance Lay Member for Patient and Public Engagement (<i>Non-Clinical Vice Chair</i>) Chief Finance Officer – Health and Social Care Integration Lay Member for Integrated Risk Secondary Care Clinician Clinical Board Member Strategic Commissioning Programme Director Head of Quality & Safeguarding and Deputy Executive Nurse (and on behalf of Karen Hurley) Director of Public Health Joint Director of Integrated Commissioning Clinical Board Member and Clinical Locality Lead – Rochdale CEO, Healthwatch Rochdale
In Attendance:	Miss Stacey Brogan Ms Helen Chapman Mrs Pam Dickinson	Minutes Corporate Affairs and Governance Manager Communications & Engagement Manager
Apologies:	Mrs Karen Hurley Mr Steve Rumbelow Dr Imran Ghafoor Dr Sonal Sharma Cllr Sara Rowbotham	Director of Operations and Executive Nurse Accountable Officer Clinical Locality Lead -Heywood and Middleton Clinical Board Member Portfolio Holder for Health & Wellbeing Rochdale Borough Council

AGENDA ITEM	ITEM	ACTION
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	<p>Public Open Forum</p> <p>The Chair welcomed everyone to the meeting and introductions were made. It was noted that questions have been raised at the Primary Care Commissioning Committee which are more appropriate for the Governing Body to respond to, these responses will be published on the CCG website and any further questions will follow the usual process.</p> <p>Clarity was provided that the CCG is a membership organisation and that the Clinical Lead for Heywood and Middleton and Clinical Lead for Rochdale attend on behalf of the member practices and do not represent patients.</p>	
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The following question was submitted in advance of today's meeting by TE on behalf of Better Health 4 Middleton.

Where is the Rochdale Falls Prevention Team?

It doesn't seem to exist, and more people are falling, getting injured and there's no obvious place where they can get help.

Where do people get help?

Better to have a prevention service than end up in hospital.

HMR CCG commission a central falls team provided by PAHT and we have an integrated community physio in 5 out of the 6 integrated neighbourhood teams (recruitment is currently taking place for the 6th).

The integrated approach has greatly reduced the amount of time patients wait to be seen by a community Physio. The teams receive referrals from any agency (including GP, Practice Nurse, Link4Life) for falls assessments for people who are identified of being at risk of falling and following a fall, as well as for walking aid assessments and generic community physio.

In addition to the above, Link4Life provide 2 programmes around balance & stability & take self-referrals and referrals from professionals including the Falls Team. These can be accessed by telephoning Paul Gardner, Programme Manager Health & Wellbeing Tel: 01706 926235 Mobile: 07890 250 655 Email: paul.gardner@link4life.org and requesting access to:

1. Functional Fitness
2. Postural Stability course. This is an accredited Falls prevention programme - Currently running at Rochdale Leisure Centre.

It was noted that a significant number of falls treatment take place in individuals homes, in addition there is the Patient Advice and Liaison Service (PALS) who can provide a sign post service on 0161 212 6270 or email patientservices.gmcusu@nhs.net. Contact details are also available via the Our Rochdale website www.ourrochdale.org.uk.

It was noted that a number of questions were raised at the last Primary Care Commissioning Committee (PCCC) on Friday 8 February 2019. The response to the questions raised are available via the CCG website at [Response to Public Questions raised on 8 February 2019](#)

The following supplementary questions were submitted in advance of today's meeting by JR on behalf of Bridging Communities 4 All.

This is not targeted enough.

The commissioning of services will be the same for all communities, however the delivery will be different for long term conditions and access to services maybe different in different areas. As a CCG we are encouraging providers to say how they will deliver the outcomes. A lot of work is taking place.

The member of the public noted that somewhere communication is breaking down and more needs to be done to address this.

There is not enough preventative work taking place.

The CCG confirmed a lot of prevention work is taking place, campaigns in relation to healthy diet, regular exercise, daily mile, cervical screening awareness etc. Advice is the same to all populations this is delivered differently to be sensitive to cultural views. A Clinical Board member confirmed the work taking place locally via the prevention access board. It is hoped to hold an engagement event to improve awareness locally in the near future.

The members of the public commented that the ways in which the messages are being delivered does not always work. The CCG acknowledged it was important to get the right message to the right people and this is a discussion that is taking place with care navigators as part of the awareness event to empower individuals so they can take on that message and share with their communities.

Why does the Patient, Public and Engagement Committee (PPEC) not have any patient representative?

Members of the public do not attend PPEC, organisations attend on behalf of their members, as a single member of the public does not necessarily represent all of the population. The CCG Engagement Lead meets with individuals outside of PPEC and the PPEC also has task and finish groups that report in when appropriate. The PPEC has representation from the Patient Participation Group and as part of Governing Body membership Healthwatch Rochdale represent patients within the borough.

Patients, Carers and Service Users are involved in the commissioning of services and link with the relevant work that is taking place. PPEC is a networking committee linking with third sector and voluntary organisations to ensure that communication links are made and ensure that information is shared with individual members of those organisations. Additionally, data obtained from individual patient, carer and service user experiences is utilised to performance and quality monitor commissioned services.

Healthwatch Rochdale is establishing a patient group which patients and members of the public are welcome to join, this will link in with PPEC via Healthwatch Rochdale representation.

Is it possible to see a time line of the priority area for 2019-20?

As a result of issues and gaps that we are aware off, which include the issues you have raised. A paper will go to the Integrated Commissioning Board after the Purdah period (3 May 2019). The date has yet to be confirmed.

The paper will look at strengthening the current commissioning cycle and will also ensure the EIA is embedded throughout the cycle for Health and Social Care. The process that will be followed includes, the endorsement at Integrated Commissioning Board and an implementation phase to make the improvements.

Members were advised that Better Health 4 Middleton are holding an event on 17 May 2019 regarding Community Services. 40 exhibitors have confirmed their attendance and members were invited to attend. It was agreed that the details of this event be shared via the CCG Communications Team, however it was noted that this clashes with the next Governing Body.

1 - GOVERNANCE

	Apologies	
	Apologies as noted above.	
15/03/19/1.1	<p>Committee Business</p> <p>1.1.1 It was highlighted to members that a two minutes silence may take place at 11:00 due to the atrocities in New Zealand.</p> <p>1.1.2 The Joint Director of Integrated Commissioning, Sally McIvor was welcomed back to her first Governing Body.</p> <p>1.1.3 As part of the work that has taken place to complete this year's Committee Self-Assessment there are some discrepancies regarding voting and non-voting members and attendance at Part 1 and Part 2 of the Governing Body. A review will take place and a further update will be provided.</p> <p>1.1.4 The Locality Asset Review presentation has been circulated to Governing Body members, and it was requested that any comments or questions be directed to the Chief Finance Officer – Health and Social Care Integration by Friday 22 March 2019. It was noted that a significant amount of detailed work has taken place across the locality Health and Local Authority estate.</p> <p>1.1.5 Members were reminded that the next meeting on 17 May 2019 will take place at Rochdale Town Hall and that the 21 June 2019 meeting will be the Annual General Meeting which will focus on diversity. Year 6 students from Lowerplace Primary School will be in attendance as part of the engagement session.</p> <p>1.1.6 The Governing Body agreed to note the verbal update provided.</p>	CD
15/03/19/1.2	<p>Declarations and Register of Interests</p> <p>1.2.1 Members were reminded of their obligation to declare any interest they may have which might conflict with the business of Heywood, Middleton and Rochdale Clinical Commissioning Group.</p> <p>1.2.2 Declarations declared by members are listed in the CCG's Register of Interests. The Register is available either via the Corporate Affairs and Governance Manager or the CCG website at the following link: Declarations of Interest Register</p> <p>1.2.3 The Chair requested any declarations of interests relating to today's agenda.</p> <p>1.2.4 None were received.</p>	

	1.2.5 The Governing Body agreed to note that there are no declarations of interest.	
15/03/19/1.3	Minutes of the CCG Governing Body Meeting held on 18 January 2019	
	1.3.1 The minutes of the meeting on Friday 18 January 2019 were agreed as a true and accurate record.	
15/03/19/1.4	Matters Arising / Action Log / Use of Chairs Actions	
	1.4.1 The action log was reviewed and updated.	
	1.4.2 Members were informed that no Chair's Actions have taken place since the last meeting. 1.4.3 The Governing Body agreed to note that no Chair's Actions have taken place.	
15/03/19/1.5	Chair's Report	
	Declaration of Interest: None	
	1.5.1 The content of the report was summarised	
	1.5.2 It was suggested that if "sitting is the new smoking", should we be moving more? Discussions took place and it was highlighted that the outcomes of not being active is becoming worse than those for smoking.	
	1.5.3 Members were asked for any comments or questions.	
1.5.4 No further discussions took place.		
1.5.5 The Governing Body agreed to note the content of the report.		

2 - ITEMS FOR DECISION

15/03/19/2.1	Sustainability Plan	
	Declaration of Interest: None	
	2.1.1 The content of the report was summarised, and it was noted that it is a statutory requirement to update this annually. 2.1.2 Members were advised that the CCG has received a certificate of excellence from the Sustainable Development Unit (SDU) for last year's reporting on sustainability as part of the public annual report. Only 42 CCGs (around 22%) have been selected for recognition out of 432 organisations across England. 2.1.3 Thanks were noted to Cheryl Fletcher, CCG Operations Manager for the significant amount of work that has taken	

	<p>place.</p> <p>2.1.4 Members were asked for any comments or questions.</p> <p>2.1.5 A query was raised regarding how this year's report compares to last years. It was noted that it is difficult to compare due to the format of the report changing but that analysis will take place and a further report will be brought back to Governing Body.</p> <p>2.1.6 The Governing Body agreed to approve the Sustainability Plan.</p>	SR / KH
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15/03/19/2.2	Governing Body Self-Assessment Checklist 2018/19	
	Declaration of Interest: None	
	<p>2.2.1 The content of the report was summarised.</p> <p>2.2.2 As previously mentioned under Committee Business a review will be taking place regarding membership and voting rights.</p> <p>2.2.3 It was noted that it is a statutory requirement for this to be reviewed annually.</p> <p>2.2.4 The Governing Body agreed to approve the Governing Body Committee Self-Assessment Checklist for 2018/19.</p>	

15/03/19/2.3	Opening Budgets	
	Declaration of Interest: None	
	<p>2.3.1 The detailed update was provided on the content of the report and it was noted that the report is in addition to the discussions that took place at the Finance Strategy Session on 8 February 2019.</p>	
	<p>2.3.2 A significant increase in allocations has been received, but there has also been an increase in must dos.</p>	
	<p>2.3.3 The CCG receives three allocations:</p> <ul style="list-style-type: none"> • Core allocation – increased by £17.5 million • Running Cost allocation (management of the CCG) – no increase, however a 20% reduction will be required for 2020/21 • Delegated Co – Commissioning allocation (primary care budgets) – increased by just under £1.9 million which is ring fenced 	
	<p>2.3.4 A review of each of the of the large budget areas has taken place and it was noted that the CCG has done well to maintain the 2018/19 prescribing budget.</p>	
<p>2.3.5 There is an expectation that funding for Mental Health services will increase and funds have been set aside to equate to growth plus 0.7% which equates to £2.2 million.</p>		
<p>2.3.6 It was noted that there are a number of must dos, which</p>		

	<p>include Improving Access to Psychological Therapies (IAPT) and Early Intervention in Psychosis (EIP). Clarity was provided that these funds are ring fenced and work is taking place to look at how these funds are invested.</p> <p>2.3.7 Community services funding of £1.36 million has been set aside.</p> <p>2.3.8 Members were advised that the CCG requires £392 million, therefore there is a shortfall of £12.3 million, which will be supported by the Savings Programme.</p> <p>2.3.9 Work has started to take place regarding the Savings Programme and it was noted that some of this will be via contract negotiations, which are due to be signed on 21 March 2019. Currently circa £6 million of savings have been identified of the £12.3 million required.</p> <p>2.3.10 It was highlighted that the total pooled fund gap is £14.5 million which is similar to last year's position.</p> <p>2.3.11 Members were asked for any comments or questions.</p> <p>2.3.12 Clarity was requested regarding the £8.6 million net risk. It was confirmed that this is the current position and there are risks, which hopefully will reduce following contract negotiations. There is reasonable confidence that the gap will reduce, however at this stage the CCG are not in a position where investment can take place, and any future investments will only be following the approval of a Business Case.</p> <p>2.3.13 The Governing Body agreed to approve the Opening Budgets for 2019/20 recognising that work needs to take place to improve the position and assurance that plans will be in place to ensure that we deliver. A further report will be submitted at the May meeting to provide an update position following contract sign off.</p>	SE
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15/03/19/2.4	Governing Body Terms of Reference – Update re Governance Structure	
	Declaration of Interest: None	
	<p>2.4.1 A verbal update was provided.</p> <p>2.4.2 It was noted that discussions took place at the Corporate Governance Committee on Wednesday 13 March 2019. A further review will take place to review the structures, however no change is currently required.</p> <p>2.4.3 The Governing Body agreed to note the verbal update provided.</p>	

3 - ITEMS FOR DISCUSSION

15/03/19/3.1	Quality and Safeguarding Report	
	Declaration of Interest: None	

	<p>3.1.1 The key elements within the report were summarised.</p> <p>3.1.2 Members were asked for any comments or questions.</p> <p>3.1.3 It was suggested that detail be included within the report regarding the date the Serious Case Review is completed.</p> <p>3.1.4 The Governing Body agreed to note the content of the report.</p>	AK
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15/03/19/3.2	Quality Premium Report	SC
	Declaration of Interest: None	
	<p>3.2.1 The content of the report was summarised, and key areas highlighted.</p> <p>3.2.2 Members were advised that it is unlikely that the award will be received this year.</p> <p>3.2.3 It was highlighted that there is potential for one of the penalties to be achieved which relates to the numbers on waiting list being less in comparison to the same time last year. This will be confirmed when the figures for February and March are received.</p> <p>3.2.4 Confirmation was received that any awards cannot be used towards the financial gap as a risk share agreement is in place with the Local Care Organisation.</p> <p>3.2.5 Clarity was provided that the £85k reward would be shared as part of the agreement with partners.</p> <p>3.2.6 Guidance regarding next year's Quality Premium has not yet been shared, but it was confirmed that it is expected that there will be an opportunity to choose indicators. Members agreed that it would be useful to start to consider this.</p> <p>3.2.7 A question was raised regarding the early cancer diagnosis indicator which has only been achieved by 3 CCGs in the country. It was noted that previously the definitions of indicators have been reviewed and changed which may occur this year particularly in relation to this indicator.</p> <p>3.2.8 The Governing Body agreed to note the content of the report.</p>	

15/03/19/3.3	Performance Report	
	Declaration of Interest: None	
	<p>3.3.1 The content of the report was outlined, and it was noted that the report is longer than usual due to being presented in a new format. Work will continue to take place to bring the data to life.</p> <p>3.3.2 Members were informed of good news relating to an increase</p>	

	<p>in the number of ambulances arriving at the Urgent Care Centre at Rochdale Infirmary. It is anticipated that this is an early sign that patients are being taken to the most appropriate place.</p> <p>3.3.3 The Two Week Wait (2WW) national target has not been achieved, but the position has significantly improved.</p> <p>3.3.4 Challenges regarding waiting time for a second appointment for Improving Access to Psychological Therapies (IAPT) were recognised. It was noted there are no targets regarding this in the contract which is currently being addressed.</p> <p>3.3.5 Members were advised that in relation to the Primary Care Workforce a BMJ article has highlighted that HMR are ahead of the game. In 2014 there was a projection that 32% of GP's will be retiring over the next 5 years, this is now at 42% retiring. It is reassuring that the work of the Primary Care Academy is already addressing this.</p> <p>3.3.6 The Governing Body agreed to note the content of the report and the update provided.</p>	
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15/03/19/3.4	Corporate Risk Register	
	Declaration of Interest: None	
	3.4.1 The content of the report was summarised, and key elements highlighted.	
	3.4.2 Training sessions are being organised to raise awareness of risk. The programme will focus on how to manage, score and consistently mitigate risk. The first session will take place on Tuesday 19 March 2019.	
	3.4.3 Members were asked for any comments or questions; no further discussions took place.	
3.4.4 The Governing Body agreed to note the content of the report.		

15/03/19/3.5.1	Finance Update Report	
	Declaration of Interest: None	
	3.5.1.1 The content of the report was outlined, and the key areas summarised.	
	3.5.1.2 It was highlighted that the CCG will achieve all its financial statutory duties for 2018/19.	
	3.5.1.3 Significant pressures in Acute and Mental Health are being considered and will be taken forward as part of next year's budget setting.	
3.5.1.4 Quality, Innovation, Productivity and Prevention (QIPP) for 2018/19 has also been delivered.		

	<p>3.5.1.5 Members noted the positive action plan that is in place for out of area beds and welcomed the positive steps that are being taken to address this.</p> <p>3.5.1.6 The Governing Body agreed to note the content of the report and the update provided.</p>	
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15/03/19/3.6.1	Kirkholt Development Quarterly Update	
	Declaration of Interest: None	
	<p>3.6.1.1 The content of the report was summarised.</p> <p>3.6.1.2 It was noted that the opening will be delayed by 3 months as a consequence of delays in the leases being signed. The GP practice is now working with the same solicitor as the CCG so this should avoid any further delays, and should be signed by 31 March 2019.</p> <p>3.6.1.3 The Memorial Tree has now been moved and will be replaced with a memorial bench within the new building.</p> <p>3.6.1.4 The Governing Body agreed to note the content of the report.</p>	

4 – GOVERNING BODY SUB-COMMITTEE REPORTS

15/03/19/4.1	Clinical and Professional Advisory Panel (CPAP) <i>(from 1 February 2019 and 1 March 2019 meetings)</i>	
	Declaration of Interest: None	
	<p>4.1.1 The content of the report was summarised.</p> <p>4.1.2 It was highlighted that the Chair of CPAP is really encouraged by the discussions and engagement that is taking place.</p> <p>4.1.3 Discussions at the February meeting focussed on Musculoskeletal (MSK) services. Attendees mapped the patient's journey, and it was interesting to note the different views received. A single point of access is being worked on to ensure seamless transitions between services.</p> <p>4.1.4 The March meeting focussed on QIPP. Discussions took place regarding ideas for any further potential savings. Assurance was provided that this information has been collated and will feed into the appropriate work streams.</p> <p>4.1.5 A query was raised regarding duplicate diagnostics and whether this will impact patient safety. It was confirmed that a workshop has taken place with secondary care clinicians and assurance has been provided that no issues have been raised locally with regards to Any Qualified Provider (AQP) quality.</p> <p>4.1.6 Positive feedback was provided regarding the CPAP meetings and the level of discussion that takes place. It was also noted that feedback and communication to the Locality Engagement Groups (LEG) is received very positively.</p>	

	4.1.7 The Governing Body agreed to note the content of the report.	
15/03/19/4.2	Integrated Commissioning Board (ICB) <i>(from 29 January and 26 February 2019 meetings)</i>	
	Declaration of Interest: None	
	4.2.1 The content of the report was summarised, and key areas highlighted.	
	4.2.2 It was noted that discussions took place regarding IVF at the January meeting. It was agreed that the number of cycles available will decrease from 3 to 1.	
	4.2.3 Following a question, it was confirmed that the policy and criteria has not changed. The only change relates to the number of cycles. If there is an exceptionality this will follow the process that is already in place across GM.	
	4.2.4 The Governing Body agreed to note the content of the report.	
15/03/19/4.3i	Heywood and Middleton Locality Reports <i>(from 12 February 2019 meeting)</i>	
	Declaration of Interest: None	
	4.3i.1 The content of the report was outlined.	
	4.3i.2 It was noted that discussions took place regarding the Falsified Medicines Directive which came in to force on 9 February 2019. Members were advised that medication which was being administered by the practice had to be scanned to verify its authenticity.	
	4.3i.3 Clarity was provided that it is a European guideline that medicines have a barcode. Work is ongoing by the CCG IT Department regarding the purchase of scanners for practices.	
	4.3i.5 The Governing Body agreed to note the content of the report and the verbal update provided.	
15/03/19/4.3ii	Rochdale Locality Reports <i>(from 12 February 2019 meeting)</i>	
	Declaration of Interest: None	
	4.3ii.1 The content of the report was outlined, and it was noted that the discussions were similar to those that took place at Heywood and Middleton.	
	4.3ii.2 Members were asked for any comments or questions. No further discussions took place.	
	4.3ii.4 The Governing Body agreed to note the content of the report and the update provided.	

15/03/19/4.4	<p>Audit Committee <i>(from 24 January 2019 meeting)</i></p> <p>Declaration of Interest: None</p> <p>4.4.1 The content of the report was summarised.</p> <p>4.4.2 It was highlighted that positive feedback has been received from external audit who have been very complimentary of the CCG, and that in their assessment those risks associated to the CCG apply to other areas in GM.</p> <p>4.4.3 The Risk Management System was reviewed, and 25 red risks remain, it was emphasised to members that audit are confident with the risk.</p> <p>4.4.4 The Governing Body agreed to note the content of the report.</p>
15/03/19/4.5	<p>System Transformation Committee (STC) <i>(from 1 February and 1 March 2019 meetings)</i></p> <p>Declaration of Interest: None</p> <p>4.5.1 The content of the report was summarised.</p> <p>4.5.2 It was noted that the Effective Use of Resource (EUR) criteria was reviewed at the February meeting.</p> <p>4.5.3 A paper for approval on Building Community Resilience and Capacity - Voluntary, Community and Social Enterprise (VCSE) Sector Investment 2019-20 was submitted at the March meeting. The Committee approved the non-recurrent funding of the VCSE schemes in 2019/20 and noted the plans to develop the children and young people's VCSE offer in 2019/20.</p> <p>4.5.4 The Governing Body agreed to note the content of the report.</p>
15/03/19/4.6	<p>Quality and Safeguarding Committee <i>(from 15 February 2019 meeting)</i></p> <p>Declaration of Interest: None</p> <p>4.6.1 Members were asked for any comments or questions. No further discussions took place.</p> <p>4.6.2 The Governing Body agreed to note the content of the report.</p>
15/03/19/4.7	<p>Corporate Governance Committee <i>(from 13 March 2019 meeting)</i></p> <p>Declaration of Interest: None</p>

	<p>4.7.1 A verbal update was provided.</p> <p>4.7.2 Lengthy discussions took place regarding the future of the Corporate Governance Committee (CGC) and whether it was still required as the Finance Performance and Risk (FPR) Group has been re-established.</p> <p>4.7.3 Further work will take place to review FPR membership to understand whether it will be appropriate for items previously discussed at CGC to be taken there.</p> <p>4.7.4 Work will also take place on the scheme of delegation for policies.</p> <p>4.7.5 The Governing Body agreed to note the verbal update provided.</p>	
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15/03/19/4.8	Primary Care Commissioning Committee <i>(from 8 February 2019 meeting)</i>	
	Declaration of Interest: None	
	<p>4.8.1 The content of the report was summarised.</p> <p>4.8.2 It was noted that the Lay Members have met with the Head of Primary Care and are assured regarding the management of Primary Care. This has also been recognised by Simon Steven's, Chief Executive NHS England's Office.</p> <p>4.8.3 The Governing Body agreed to note the verbal update provided.</p>	

5 – ANY OTHER URGENT BUSINESS

15/03/19/5.1	AOB – Healthwatch Consultation	
	Declaration of Interest: None	
	<p>5.1.1 It was highlighted that Healthwatch Rochdale are conducting a survey to help them establish their priorities for the coming year.</p> <p>5.1.2 Details have been shared via CCG Bitesize and members were encouraged to complete the survey which is available via the below link, noting that the closing date is 15 March 2019: https://www.surveymonkey.co.uk/r/HealthwatchRochdale050319</p> <p>5.1.3 The Governing Body agreed to note the verbal update provided.</p>	

6 – REPORTS PROVIDED FOR INFORMATION ONLY
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15/03/19/6.1	Children and Young People's Partnership (CYPP) <i>(from 7 January 2019 meeting)</i>	

	6.1.1 Item deferred.	
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15/03/19/6.2	Primary Care Commissioning Committee Ratified Minutes <i>(from 9 November 2019 meeting)</i>	
	6.2.1 Members were asked for any comments or questions on the report.	
	6.2.2 No further discussions took place.	
	6.2.3 The Governing Body agreed to note the content of the report.	

Other useful link:
<ul style="list-style-type: none"> • RBC - Health, School and Care Overview and Scrutiny Committee minutes • RBC - Health and Wellbeing Board • NHS HMR CCG and RBC Integrated Commissioning Board • NHS HMR CCG Primary Care Commissioning Committee

DATE AND TIME OF NEXT MEETING
Friday 17 May 2019 10:30 – 12:30 Rochdale Town Hall