

Minutes of the Clinical Commissioning Group (CCG) Governing Body

FORMAL – Part 1

Date and time of Meeting:	Friday 18 May 2018 10:30 – 12:35
Venue:	Training and Conference Suite, Number One Riverside

Present:	Dr Chris Duffy Mr Paul Hinnigan Mrs Denise Dawson Mr Simon Wootton Mrs Sam Evans Dr Sonal Sharma Mr Paul Rowen Dr Vijay Tandle Dr Aggy York Dr Bodrul Alam Mrs Karen Hurley Dr Imran Ghafoor	Clinical Chair (Chair) Lay Member for Governance Lay Member for Patient & Public Engagement Chief Officer Chief Finance Officer Clinical Board Member Lay Member for Integrated Risk Secondary Care Clinician Rochdale Locality Lead Clinical Board Member Deputy Chief Officer / Exec Nurse Heywood and Middleton Locality Lead
In Attendance:	Miss Stacey Brogan Ms Helen Chapman Mrs Pam Dickinson Mr Steve Rumbelow Mrs Sandra Croasdale Mr Alex Leach	Minutes Corporate Affairs and Governance Manager Communications and Engagement Manager Chief Executive, RBC Strategic Commissioning Programme Director (on behalf of Sally Mclvor) Operations Manager, Healthwatch Rochdale (on behalf of Kate Jones)
Apologies:	Cllr Sara Rowbotham Mrs Sally Mclvor Ms Kate Jones Mrs Andrea Fallon	Portfolio Holder for Health & Wellbeing Rochdale Borough Council Joint Director of Integrated Commissioning CEO, Healthwatch Rochdale Director of Public Health, RBC

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.</p> <p>The following questions were raised from the public:</p> <p><i>Why are the Patient Participation Groups (PPG's) in the Middleton area poorly backed by the CCG?</i></p> <p>PPG's are run by the GP Practices and it is their decision whether they have these in place. The CCG and Primary Care Team has offered support and worked with the individual practices, however not all have engaged.</p>	
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The CCG set up two Boroughwide groups to support Rochdale PPGs and Heywood & Middleton PPGs. Heywood and Middleton decided they wanted to do something different and set up Better Health 4 Middleton, which is attended by the CCG.

I am currently working with GM Devolution representing older people. How as volunteers can we have a voice and awareness of what services are available?

The Deputy Chief Officer / Executive Nurse agreed to meet with the member of the public to gather more detailed information and discuss both PPG support and access to Older People's information to support the GM Older People's network.

Please can you provide an update on the Cross Boundary Issue?

As detailed in the letter you received. HMR CCG has a Cross Boundary Contract in place for HMR registered patients. This matter is the responsibility of Manchester Health and Care Commissioning, as the registered GP is a member of that organisation.

Following receipt of your consent. HMR CCG have forwarded your letter and the copy letter sent to Andy Burnham to the organisation for them to respond.

HMR CCG will provide you with the dates of Manchester Health and Care Commissioning Board meetings to assist with any further follow up.

Why do you have to go through BARDOC to contact the District Nurse Services, which is a private company?

Following feedback from patients in relation to frustration of having to contact various different numbers to access services. A single point of access is now in operation, this is a central telephone number, who provide triage and sign post to the appropriate service.

HMR CCG has commissioned BARDOC to provide this service, similar to any other service that is commissioned.

On behalf of Better Health 4 Middleton: Why don't we have any Admiral Nurses?

Although HMR CCG does not commission Admiral Nurses, we do have a number of other services that provide similar support and advice to that which an Admiral Nurse would typically offer. This includes:

- supporting families and carers of people with dementia to develop skills and techniques around communication to help them stay connected
- supporting families and carers of people with dementia to prevent or manage signs of fear and distress
- signposting to (or providing) additional care and support where individuals and/or families are struggling to cope

In Rochdale we currently have the following:

- A befriending service that matches volunteers with people with a diagnosis of dementia providing support for the person with Dementia and their carer

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	<ul style="list-style-type: none"> • Well-being Cafes that are purely reserved for people with a diagnosis of dementia and their carer • CrISP (a carer's information programme) providing emotional support/social isolation; help on clarifying their diagnosis/coming to terms with the condition; help with financial or legal considerations of caring or thinking about residential care settings and moving on following bereavement • A dementia advisor that supports people with a diagnosis and their carers • Shifa Family Link Project – (Supporting people with dementia). The Project offers support to people living in the community with memory changes or a diagnosis of dementia, their carers and family members to enhance their ability to live well and independently • Dementia Care offers specialist dementia carer support providing practical and emotional support and some signposting • Living Well with Dementia offers one to one holistic support including massage for pain management and can support both the patient and the carer for up to six months <p><i>On behalf of Better Health 4 Middleton: Why don't we have a late night chemist? Do we have to travel to Manchester or Salford?</i></p> <p>Contracts with community pharmacies are held by NHS England not the CCG.</p> <p>New contract pharmacies were required to open for 100 hours, there is no requirement for pharmacies to currently open during conventional hours to change their times of opening to extended hours</p> <p>There is now no "rota" in operation and pharmacies opening extended hours would need to have a justification for so doing - pharmacist(s) would be required to be there - all would cost money (not to mention safety). If there are few prescriptions and little in the way of over the counter sales, the pharmacy would run at a loss - something the owners are largely reluctant to do.</p> <p>Within the Middleton area the following pharmacies are open late:</p> <ul style="list-style-type: none"> • Boarshaw is open until 7pm • Tesco is open until 8pm <p>There is also an option for prescriptions to be delivered.</p> <p>There have been some really good questions raised today which would probably be of benefit to other members of the public. The Deputy Chief Officer / Executive Nurse will take these forward and request that relevant information is included in the CCG Living It magazine which is available throughout the HMR borough.</p>	KH
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1 - GOVERNANCE

	Apologies	
	Apologies as noted above.	

18/05/18/1.1	Committee Business	
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	<p>1.1.1 Members were informed that today will be Simon Wotton's last Governing Body. Thanks were noted to Simon for his contribution and support during his time at the CCG and members wished him well for the future.</p> <p>1.1.2 Steve Rumbelow, Chief Executive from Rochdale Borough Council was welcomed to the meeting.</p> <p>1.1.3 Dr Imran Ghafoor was welcomed to his first meeting and introductions were made.</p> <p>1.1.4 Members were reminded that there is no Governing Body in June as this is the Annual General Meeting (AGM).</p> <p>1.1.5 It was highlighted that all staff must complete their Conflict of Interest (CoI) training by the end of May 2018. Members were asked to inform the Corporate Affairs and Governance Manager when this has been completed.</p> <p>1.1.6 Although the Governing Body now takes place on a bi monthly basis it was noted that on the third Friday of the even months Governing Body Strategy Sessions will take place. To date there are sessions planned for Pennine Acute Hospitals Trust (PAHT) Transaction, IMT Strategy and a Safeguarding Update. Members were reminded to ensure that these dates are in their diaries.</p> <p>1.1.7 Members were also advised that the Lay Member for Governance has agreed to be the Vice Chair of the Governing Body.</p> <p>1.1.8 The Governing Body agreed to note the verbal update provided.</p>	<p>All</p> <p>All</p>
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<p>18/05/18/1.2</p>	<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 Interests</p> <p>1.2.3 The Chair requested any declarations of interests relating to today's agenda.</p> <p>1.2.4 Dr B Alam, Dr I Ghafoor, Dr S Sharma, Dr A York and Dr C Duffy declared an interest in item 3.5.2 QIPP Paper, due to their clinical roles. As this is not a decision item it was agreed that no further action was required.</p> <p>1.2.5 Dr C Duffy declared an interest in item 3.6.6 Children's Waiting List Update due to his connections with Pennine Acute Hospitals Trust (PAHT). As this is not a decision item it was</p>	
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	<p>agreed that no further action was required.</p> <p>1.2.6 Denise Dawson declared an interest in item 3.6.7 Long Term Conditions Test Bed Update due to her role as Long Term Conditions Project Manager. As this is not a decision item it was agreed that no further action was required</p> <p>1.2.7 Dr B Alam Dr I Ghafoor, Dr S Sharma, Dr A York and Dr C Duffy declared an interest in item 3.6.7 Long Term Conditions Test Bed Update due to their clinical roles. As this is not a decision item it was agreed that no further action was required.</p> <p>1.2.8 The Governing Body agreed to note that the above declarations of interest.</p>	
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18/05/18/1.3	Minutes of the CCG Governing Body Meeting held on 16 March 2018	
	<p>1.3.1 The minutes of the meeting on Friday 16 March 2018 were agreed as a true and accurate record with the following amendments:</p> <p>Attendance – Kate Jones, CEO Healthwatch Rochdale to be noted as an apology not as present.</p> <p>16/03/18/6.1.1 – AOB Promoting the work in the Borough “6.1.1.2the CCG partnered with MB NB Medical.....”</p>	

18/05/18/1.4	Matters Arising / Action Log / Use of Chairs Actions	
	<p>1.4.1 The action log was reviewed and updated.</p> <p>1.4.2 Members were informed that no Chair’s Actions have taken place since the last meeting.</p> <p>1.4.3 The Governing Body agreed to note that no Chair’s Actions have taken place.</p>	

18/05/18/1.5	Chair’s Report	
	Declaration of Interest: None	
	<p>1.5.1 Members were asked for any comments or questions.</p> <p>1.5.2 No further discussions took place.</p> <p>1.5.3 The Governing Body agreed to note the content of the report.</p>	

18/05/18/1.6	Chief Officers Report	
	Declaration of Interest: None	
	1.6.1 The content of the report was summarised.	

	<p>1.6.2 Thanks was noted to the Deputy Chief Officer / Exec Nurse and the Chief Finance Officer for the significant amount of support that they have provided to the Chief Officer during his time at HMR CCG.</p> <p>1.6.3 No further discussions took place.</p> <p>1.6.4 The Governing Body agreed to note the content of the report and the update provided.</p>	
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2 - ITEMS FOR DECISION

18/05/18/2.1	Business Continuity Plan	
	Declaration of Interest: None	
	<p>2.1.1 The content of the report was summarised and it was noted that the full Plan was reviewed during the Part 2 Governing Body due to contact information for individual members of staff being included.</p> <p>2.1.2 It was highlighted that the plan is regularly tested, and was tested during the cyber-attack and recently due to the bad weather.</p> <p>2.1.3 Once approved a review of formatting will take place.</p> <p>2.1.4 Members were asked for any comments or questions. No further discussions took place.</p> <p>2.1.5 The Governing Body agreed to approve the Business Continuity Plan.</p>	

18/05/18/2.2	Terms of Reference (ToR)	HC
	Declaration of Interest: None	
	2.2.1 Members were asked for any comments or questions on the revised Terms of Reference (ToR).	
	2.2.2 A query was raised regarding the role of the Governing Body and the Remuneration Committee. It was confirmed that the Governing Body has a number of standard schemes of delegation in place and delegates some of these to the Remuneration Committee.	
	2.2.3 It was suggested that information be included regarding the Col training that all members are required to complete. It was confirmed that this would be included in individual's contracts and would not be included within the ToR.	
	2.2.4 A revision will be made to the attendance to include the Head of Quality of Safeguarding/ Deputy Executive Nurse and Strategic Commissioning Programme Director. It was confirmed that they will be non-voting members.	
2.2.5 It was suggested that the Sustainability Section be amended to		

	include “safe”. Members agreed to this and agreed that all Committee ToR be amended to reflect this change.	HC
	2.2.6 The Governing Body agreed to approve the ToR with the above amendments.	

18/05/18/2.3	Quality and Safeguarding Terms of Reference (ToR)	KH
	Declaration of Interest: None	
	2.3.1 A verbal update was provided.	
	2.3.2 The ToR has been reviewed, and further review will take place to consider integration.	
	2.3.3 An updated version of the ToR will be submitted at the next meeting.	
	2.3.4 The Governing Body agreed to note the verbal update provided.	

3 - ITEMS FOR DISCUSSION

18/05/18/3.1i	Quality and Safeguarding Report	
	Declaration of Interest: None	
	3.1.i.1 The key elements within the report were summarised.	
	3.1.i.2 It was noted that the detailed discussions take place at the Quality and Safeguarding Committee.	
	3.1.i.3 The Pennine Acute Hospitals Trust (PAHT) has been re-assessed by the Care Quality Commission (CQC) and has been rated as ‘Requires Improvement’, which is an improvement from the previous rating of ‘Inadequate’. Rochdale Infirmary remains rated as ‘Good’.	
	3.1.i.4 Work continues to take place to review the Mental Health Serious Untoward Incident Panels (MHSUI) to ensure that lessons continue to be learnt.	
	3.1.i.5 A significant amount of work has taken place by the CCG Quality Improvement Nurse on Caring Together in Care Homes. This role and its responsibilities will be reviewed.	
	3.1.i.6 Child Protection Information Sharing (CPIS) has been implemented across the Borough and will ensure a connection between all services.	
	3.1.i.7 Learning following the Domestic Homicides continues to take place and once the outcome is finalised a 7 minute briefing is shared.	
	3.1.i.8 Members were asked for any comments or questions. No further discussions took place.	
	3.1.i.9 The Governing Body agreed to note the content of the	

	report.	
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18/05/18/3.1ii	Learning Disabilities and Mortality Review Programme (LeDer) Update Report		
	Declaration of Interest: None		
	3.1ii.1 The content of the report was summarised and key areas highlighted.		
	3.1ii.2 It was noted that within the organisation the Deputy Chief Officer / Exec Nurse is the lead for this supported by the Designated Nurse - Adults Safeguarding.		
	3.1ii.3 Two reviews have been completed and one is in the process of being finalised.		
	3.1ii.4 Concerns were raised regarding capacity and it was highlighted that additional funding has been requested across GM to support this.		
	3.1ii.5 Members were asked for any comments or questions.		
	3.1ii.6 A query was raised regarding the age range of 4 – 74 years. It was proposed that children aged 0 – 4 would be the responsibility of Children’s Services. It was agreed that further clarity be sought.		KH
	3.1ii.7 It was noted that this is a priority area and that this be included and promoted as part of the GP education sessions.		BA
3.1ii.8 The Governing Body agreed to note the content of the report and the verbal update provided.			

18/05/18/3.2	Quality Premium Report	
	Declaration of Interest: None	
	3.2.1 The content of the report was outlined.	
	3.2.2 It was noted that achievement of the Cancer target is close and that although unpredictable we are optimistic that the GP Access Survey will also be achieved.	
	3.2.3 The key challenges are the NHS Constitution indicators. A national review is taking place on how this is managed, and there is potential that two penalties will be revoked.	
	3.2.4 It was emphasised that a number of the targets are out of the CCGs direct control. A number of conversations have taken place with the Local Care Organisation (LCO) to introduce a Gain Share Agreement to ensure that all necessary parties are committed to delivering these targets.	
3.2.5 There has been some challenges relating to Continuing Healthcare (CHC), and thanks were noted to the CHC Team for the significant amount of work that has taken place. The target for CHC was achieved for Quarter 4.		

	<p>3.2.6 Members were asked for any comments or questions.</p> <p>3.2.7 A query was raised regarding the robustness of the data and it was confirmed that the data is national data from NHS England.</p> <p>3.2.8 The Governing Body agreed to note the content of the report.</p>	
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18/05/18/3.3	Performance Report	
	Declaration of Interest: None	
	<p>3.3.1 The content of the report was outlined.</p> <p>3.3.2 It was highlighted that we are now starting to see the impact of some of the transformation work in relation to A&E attendance.</p> <p>3.3.3 The Improving Access to Psychological Therapies (IAPT) target for Quarter 4 was achieved which is very positive.</p> <p>3.3.4 Members were advised that due to the numbers being low for 52 week waits, the information could be deemed as Patient Identifiable Data (PID) therefore this information has not been included within the report. Assurance was provided to members that the necessary action is being taken to address this.</p> <p>3.3.5 Members were asked for any comments or questions.</p> <p>3.3.6 Following a question regarding the 2018/19 trajectories it was confirmed that there are some challenges but achievement of the targets is more optimistic than previous years.</p> <p>3.3.7 Discussions took place regarding the reliance of other organisations in achieving targets, an example of A&E attendance was provided.</p> <p>3.3.8 The Governing Body agreed to note the content of the report.</p>	

18/05/18/3.4	Corporate Risk Register	
	Declaration of Interest: None	
	<p>3.4.1 The content of the report was outlined.</p> <p>3.4.2 It was noted that the Assurance Framework is included as an appendix to the report.</p> <p>3.4.3 Any risks which have been removed have been noted within the Executive Summary.</p> <p>3.4.4 Feedback was requested on the frequency that the Assurance Framework and Corporate Risk Register are submitted. It was agreed that the Corporate Risk Register be presented at each Governing Body and that the Assurance Framework be</p>	KH

	<p>presented on a quarterly basis.</p> <p>3.4.5 It was also highlighted that a Finance, Performance and Risk Sub Group of the Integrated Commissioning Board (ICB) is being established which will also review any issues.</p> <p>3.4.6 Members were advised that following feedback from the Auditors the Assurance Framework will now also be presented to the Primary Care Commissioning Committee and Quality and Safeguarding Committee.</p> <p>3.4.7 The Governing Body agreed to note the content of the report.</p>	
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18/05/18/3.5.1	Finance 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 this provides an update to members and that final sign off has been delegated from the Governing Body to the Audit Committee.	
	3.5.1.3 A meeting took place with external audit who highlighted some formatting errors which will be resolved and some queries relating to the Remuneration Report, in particular GP pension contributions.	
	3.5.2 It was emphasised that the CCG has achieved its financial control total.	
3.5.3 Thanks were noted to the Chief Finance Officer and her team for the significant amount of work that has taken place for the annual accounts.		
3.5.4 The Governing Body agreed to note the content of the report.		

18/05/18/3.5.2	QIPP Report	
	Declaration of Interest: Yes, Dr B Alam, Dr I Ghafoor, Dr S Sharma, Dr A York and Dr C Duffy declared an interest due to their clinical roles.	
	Action Taken: As this is not a decision item it was agreed that no further action was required.	
	3.5.2.1 The content of the report was outlined and the key areas summarised.	
	3.5.2.2 It was highlighted that from 1 April 2018 a pooled budget is in place. From the pooled budget there is £17.4 million gap in health and social care funding.	
	3.5.2.3 Savings of £12.4 million have been identified to reduce the gap leaving a £3.6 million of savings to be identified by the CCG and £1.4 million of savings to be identified by Rochdale Borough Council (RBC).	

	<p>3.5.2.4 There is a Risk Share Agreement in place between RBC and the CCG.</p> <p>3.5.2.5 The importance of QIPP was emphasised and it was noted that there is a national piece of work to support areas with identifying further savings. GM is signed up to this and will be receiving support as part of wave 4.</p> <p>3.5.2.6 The Governing Body agreed to note the content of the report and the verbal update provided.</p>	
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18/05/18/3.6.1	Deputy Chief Officer / Exec Nurse Functions Report 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 highlighted that from 1 April 2018 the responsibility of Primary Care transferred to the Joint Director of Integrated Commissioning. Following the resignation of the Head of Primary Care the recruitment post for a replacement has started.</p> <p>3.6.1.3 The Safeguarding and Practice Assurance Team at RBC now reports directly to the Deputy Chief Officer / Exec Nurse as does the Equality and Inclusion Business Partner.</p> <p>3.6.1.4 Interviews will take place week commencing 21 May 2018 for the role of Head of Quality and Safeguarding / Deputy Exec Nurse.</p> <p>3.6.1.5 It was highlighted that there are ongoing issues regarding the move of the Continuing Healthcare (CHC) Team to Rochdale. Discussions continue to take place.</p> <p>3.6.1.6 Members were asked for any comments or questions.</p> <p>3.6.1.7 It was noted that this is a very useful report.</p> <p>3.6.1.8 The Governing Body agreed to note the content of the report.</p>	

18/05/18/3.6.2i	Annual Report	
	Declaration of Interest: None	
	<p>3.6.2i.1 The content of the report was outlined.</p> <p>3.6.2i.2 Thanks was noted to the team for the significant amount of work that has taken place.</p> <p>3.6.2i.3 Members were asked for any comments or questions on the report prior to it being submitted to the Audit Committee on Tuesday 22 May 2018.</p> <p>3.6.2i.4 It was highlighted that this has been reviewed by the auditors who have only raised queries in relation to</p>	

	remuneration which is being addressed.	
	3.6.2i.5 The Governing Body agreed to note the content of the report.	

18/05/18/3.6.2ii	Annual Governance Statement	
	Declaration of Interest: None	
	<p>3.6.2ii.1 The content of the report was outlined.</p> <p>3.6.2ii.2 Thanks was noted to the team for the significant amount of work that has taken place.</p> <p>3.6.2ii.3 Members were asked for any comments or questions on the report prior to it being submitted to the Audit Committee on Tuesday 22 May 2018.</p> <p>3.6.2ii.4 No further discussions took place.</p> <p>3.6.2ii.5 The Governing Body agreed to note the content of the report.</p>	

18/05/18/3.6.3	Child Obesity Action Plan	
	Declaration of Interest: None	
	<p>3.6.3.1 Members were asked to direct any comments or questions on the Plan to the Director of Public Health.</p> <p>3.6.3.2 The Governing Body agreed to note the content of the report.</p>	

18/05/18/3.6.4	Health and Wellbeing Board (HWBB) update formalised proposal	
	Declaration of Interest: None	
	<p>3.6.4.1 Item deferred.</p>	

18/05/18/3.6.5	Neighbourhood Asset Review	
	Declaration of Interest: None	
	<p>3.6.5.1 The content of the report was summarised.</p> <p>3.6.5.2 A review is taking place across GM of estates which is expected to be completed by September 2018. This will allow a single database to be established and maintained on all assets.</p> <p>3.6.5.3 Members were asked for any Comments or questions.</p> <p>3.6.5.4 Following a question it was confirmed that assurance has been provided that the database will be maintained and updated as required.</p>	

	3.6.5.5 The Governing Body agreed to note the content of the report.	
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18/05/18/3.6.6	Children’s Services Waiting List Update	
	Declaration of Interest: Yes, Dr C Duffy due to his connections with Pennine Acute Hospitals Trust (PAHT).	
	Action Taken: As this is not a decision item it was agreed that no further action was required.	
	<p>3.6.6.1 The content of the report was summarised.</p> <p>3.6.6.2 It was highlighted that previously there have been two areas of concern identified, Occupational Health and Autism Assessments.</p> <p>3.6.6.3 Confirmation has now been received that there are no children waiting more than 18 weeks for an Occupational Health appointment and that the average wait for an appointment is between 5 and 6 weeks. It was noted that evidence of capacity and demand has been requested from the provider but has not yet been received.</p> <p>3.6.6.4 The Bubble programme for children under 5 with Autism is working well and the assessments for children over 5 is on track to deliver and reduce waiting lists.</p> <p>3.6.6.5 Members were asked for any comments or questions.</p> <p>3.6.6.6 It was highlighted that a contract performance notice was issued to the provider to challenge their performance.</p> <p>3.6.6.7 Members recognised the significant amount of work that has taken place.</p> <p>3.6.6.8 The Governing Body agreed to note the content of the report.</p>	

18/05/18/3.6.7	Long Term Conditions (LTC) Test Bed Programme Update	
	Declaration of Interest: Yes	
	Denise Dawson due to her role as Long Term Conditions Project Manager	
	Dr B Alam, Dr I Ghafoor, Dr S Sharma, Dr A York and Dr C Duffy declared an interest due to their clinical roles.	
	Action Taken: As this is not a decision item it was agreed that no further action was required.	
	<p>3.6.7.1 The content of the report was summarised.</p> <p>3.6.7.2 It was highlighted that it was intended that the programme be extended for a further 3 months from June 2018 to September 2018, however due to the withdrawal of MSD this has not been possible.</p> <p>3.6.7.3 Funding is available for Wave 2, and an application has been submitted to NHS England.</p>	

	3.6.7.4 The Governing Body agreed to note the content of the report.	
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18/05/18/3.6.8	Workforce Race Equality Standard (WRES) Expert Programme Update	
	Declaration of Interest: None	
	<p>3.6.8.1 The content of the report was summarised. The CCG has a duty as a commissioner to ensure contractual requirements are fulfilled and also as an employer.</p> <p>3.6.8.2 It was highlighted that HMR CCG are the only CCG in GM that has a member of staff on the Expert Programme.</p> <p>3.6.8.3 The Governing Body champion for WRES is the Deputy Chief Officer / Exec Nurse.</p> <p>3.6.8.4 A further update will be taken to the Wider Leadership Team.</p> <p>3.6.8.5 Members were also advised that the Equality and Inclusion Business Partner will be contacting members of staff producing reports for Governing Body to ensure that the information regarding Equality Impact Assessments is completed correctly.</p> <p>3.6.8.6 The Governing Body agreed to note the content of the report.</p>	

4 – GOVERNING BODY SUB-COMMITTEE REPORTS

18/05/18/4.1	Audit Committee <i>(from 24 April 2018 meeting)</i>	
	Declaration of Interest: None	
	<p>4.1.1 The content of the report was summarised.</p> <p>4.1.2 Following an internal review it was felt that an audit on Primary Care was not necessary and that Primary Care will be included within the wider integration review by the Auditors. However, since the meeting national guidance has been received that indicates that an audit may need to take place.</p> <p>4.1.3 Assurance was provided by the Joint Director of Integrated Commissioning regarding Urgent Care and it was noted that significant improvements have taken place. A further update will be provided at the July Audit Committee.</p> <p>4.1.4 Members were asked for any comments or questions. No further discussions took place.</p> <p>4.1.5 The Governing Body agreed to note the content of the report.</p>	

18/05/18/4.2	Quality and Safeguarding Committee	
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	<i>(from 8 May 2018 meeting)</i>	
	Declaration of Interest: None	
	<p>4.2.1 A verbal update was provided.</p> <p>4.2.2 It was noted that the majority of the discussions have already been highlighted.</p> <p>4.2.3 A report will be shared following the meeting summarising the discussions at the meeting on 8 May 2018.</p> <p>4.1.6 The Governing Body agreed to note the verbal update provided.</p>	KH

18/05/18/4.3i	Heywood and Middleton CCG Locality Reports	
	<i>(from 10 April and 8 May 2018 meeting)</i>	
	Declaration of Interest: None	
	<p>4.3i.1 The content of the report was outlined.</p> <p>4.3i.2 Members were asked for any comments or updates, no further discussions took place.</p> <p>4.3i.3 The Governing Body agreed to note the verbal update provided.</p>	

18/05/18/4.3ii	Rochdale CCG Locality Reports	
	<i>(from 10 April and 8 May 2018 meeting)</i>	
	Declaration of Interest: None	
	<p>4.3ii.1 The content of the report was outlined and it was noted that the discussions at the Rochdale Locality Engagement Group (LEG) mirror those at the Heywood and Middleton LEG and included the following.</p> <p>4.3ii.2 Practices were informed that Dragon Voice Recognition software had vastly cut down some surgery's admin time. Some members explained this software had been somewhat tedious in the past but explained they may re-visit it after receiving positive feedback.</p> <p>4.3ii.3 In depth discussions took place regarding prescribing for minor ailments, and it was noted that feedback will be provided at the Integrated Commissioning Board where further discussions will take place.</p> <p>4.3ii.4 It was highlighted that following the meeting discussions took place with the Chair regarding the future format of the meetings. It was agreed that this will become more focussed on the Clinical and Professional Advisory Panel (CPAP).</p> <p>4.3ii.4 The Governing Body agreed to note the content of the report and the verbal update provided.</p>	

18/05/18/4.4	Patient and Public Engagement Committee (PPEC)	
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	<i>(from 9 April 2018 meeting)</i>	
	Declaration of Interest: None	
	<p>4.4.1 A verbal update was provided and it was noted that the minutes from the 9 April 2018 meeting will be shared at the next Governing Body.</p> <p>4.4.2 Work continues to take place to identify a representative for the Older Peoples Partnership.</p> <p>4.4.3 A report was received regarding the emerging communities commissioned by Voices for All, and a second round of engagement is commencing.</p> <p>4.4.4 A quiz was reviewed which is intended for the AGM on 15 June 2018, and it was confirmed that the Third Sector will have a stand.</p> <p>4.4.5 The Communications and Engagement Strategy which has previously been agreed at the Committee is being reviewed to ensure that it aligns with the Local Authority Strategy.</p> <p>4.4.6 It was highlighted to members that Healthwatch Rochdale has been advised that the User Carer Forum are now being charged for the room that they use for their meetings. It was agreed that this be raised at the next PPEC.</p> <p>4.4.7 The Governing Body agreed to note the verbal update provided.</p>	<p>DD</p> <p>DD</p>

18/05/18/4.5	Long Term Condition Test Bed Programme Board <i>(from meeting on 9 May 2018)</i>	
	Declaration of Interest: None	
	<p>4.5.1 A verbal update was provided.</p> <p>4.5.2 It was noted that the Deputy Chief Officer / Exec Nurse chaired the meeting on behalf of the Chief Officer.</p> <p>4.5.3 The minutes will be shared at the next meeting once ratified at the final meeting on 6 June 2018.</p> <p>4.5.4 It was confirmed that communication has taken place with all GP practices and necessary individuals.</p> <p>4.5.5 The Governing Body agreed to note the content of the report.</p>	SW

18/05/18/4.6	Integrated Commissioning Board <i>(from 13 March and 10 April 2018 meeting)</i>	
	Declaration of Interest: None	
	<p>4.6.1 The content of the report was summarised.</p> <p>4.6.2 Members were asked for any comments or questions.</p>	

	<p>4.6.3 Following a question it was confirmed that no notification has been received regarding any changes in portfolios following the elections. The membership will therefore remain the same.</p> <p>4.6.4 The Governing Body agreed to note the content of the report.</p>	
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18/05/18/4.7	System Transformation Committee (STC) <i>(from 6 April 2018 and 4 May 2018)</i>	
	Declaration of Interest: None	
	<p>4.7.1 The content of the report was summarised.</p> <p>4.7.2 It was noted that the April meeting took place as the Clinical and Professional Advisory Panel (CPAP). The May meeting took place as STC as the governance arrangements had not been finalised.</p> <p>4.7.3 Discussions took place regarding Consultant Connect. Work is taking place to establish this service with PAHT Consultants, rather than private ones.</p> <p>4.7.4 Further discussions will take place at Clinical Leads to identify key areas.</p> <p>4.7.5 The Governing Body agreed to note the content of the report.</p>	

5 – COMMUNICATIONS

18/05/18/5.1	Update from Secondary Care Clinician	
	Declaration of Interest: None	
	<p>5.1.1 Members were advised that on this occasion there was no update from the Secondary Care Clinician.</p> <p>5.1.2 The Governing Body agreed to note the verbal update provided.</p>	

18/05/18/5.2	Update from Healthwatch Rochdale (HWR)	
	Declaration of Interest: None	
	<p>5.2.1 A verbal update was provided.</p> <p>5.2.2 Healthwatch Rochdale has been successful in the tender application to deliver the Healthwatch contract for Rochdale for a further 3 years with a possible two year extension. This provides an opportunity to embed a 5 year strategy to outline Healthwatch Rochdale’s vision, objectives and goals over the period.</p> <p>5.2.3 The Board of directors have been re-elected for their term in office. This included Jane Jackson continuing her role as Chairman and Ben Greenwood continuing his role a Vice</p>	

	<p>Chairman. Recruitment in areas of Legal Engagement will commence in June 2018.</p> <p>5.2.4 The Healthwatch Rochdale Maternity Project Report has been published which reviewed patient's experience using Northern Care Alliance maternity services (Healthwatch Rochdale Maternity Project Report).</p> <p>5.2.5 Healthwatch Rochdale worked in partnership with local Sure Start Centres and spoke to 242 females who predominately gave birth in either the Royal Oldham Hospital or North Manchester General Hospital within the last two years.</p> <p>5.2.6 Recommendations to help improve patients experience were made regarding patient choice, equality and diversity, information and guidance, waiting times, staffing levels and cleanliness.</p> <p>5.2.7 The Northern Care Alliance welcomed the opportunity to hear what patients have said and have developed an action plan in response to the report findings to ensure patients have a consistently good experience of care.</p> <p>5.2.8 The Enter and View Report for The Village Medical Centre has also been published (Enter and View Report for the Village Medical Centre). To summarise Patients spoke positively regarding staff members and the quality of appointments with 100% of respondents saying they were happy with the staff and saying they felt listened to during their appointment.</p> <p>5.2.9 However, 63% of respondents were unaware the practice had a Patient Participation Group that they could be involved in. Healthwatch Rochdale made 4 recommendations in relation to this visit which are evidenced in the report.</p> <p>5.2.10 Healthwatch Rochdale has also been involved in a piece of work in collaboration with the 10 Greater Manchester Healthwatches to find out what patients think about the introduction of an electronic referral system between pharmacy teams - such as hospital, community, general practice and mental health - across Greater Manchester and if patients support the principle of sharing information in this way.</p> <p>5.2.11 A report is currently being produced by the Local Professional Network (LPN) which will be publicly available on completion and will highlight how patient feedback is able to shape commissioning decision.</p> <p>5.2.12 Healthwatch Rochdale's work plan has been drafted following the public consultation and the key focus of the organisations work will be:</p> <ul style="list-style-type: none"> • To begin a programme of Enter and View visits to nine care homes across the Borough to help identify areas for improvement and development. • To gather further intelligence and patient feedback around Children's and Adolescent Mental Health Services (CAMHS) in the Borough through on the ground community engagement. <p>5.2.13 The Governing Body agreed to note the verbal update</p>	
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18/05/18/5.3	Update from Lay Members	
	Declaration of Interest: None	
	<p>5.3.1 Members were advised that on this occasion there was no update from the Lay Members.</p> <p>5.3.2 The Governing Body agreed to note that there is no update.</p>	

18/05/18/5.4	Update from Director of Public Health	
	Declaration of Interest: None	
	5.4.1 Item deferred due to apologies.	

18/05/18/5.5	Update from Council Member	
	Declaration of Interest: None	
	5.5.1 Item deferred due to apologies.	

6 – ANY OTHER URGENT BUSINESS

18/05/18/6.1	AOB - Data Protection Officer	
	Declaration of Interest: None	
	<p>6.1.1 Members were advised that the Data Protection Officer for the CCG has been confirmed as the Deputy Chief Officer / Exec Nurse. The Chief Finance Officer is now the Deputy Data Protection Officer.</p> <p>6.1.2 As a consequence of this the Deputy Chief Officer is now also the Deputy SIRO.</p> <p>6.1.3 The Governing Body agreed to note the verbal update.</p>	

7 – REPORTS PROVIDED FOR INFORMATION ONLY
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18/05/18/7.1	GM Association Governance Group <i>(from 3 April and 1 May 2018 meetings)</i>	
	7.1.1 Members were asked for any comments or questions on the report.	
	7.1.2 No further discussions took place.	
7.1.3 The Governing Body agreed to note the content of the report.		

18/05/18/7.2	Children and Young People's Partnership (CYPP) <i>(from 15 March 2018 meeting)</i>	
	7.3.1 Item deferred.	

18/05/18/7.3	Long Term Conditions Test Bed Programme Board <i>(Ratified minutes from 7 February 2018 meeting)</i>	
	7.3.1 Members were asked for any comments or questions on the report.	
	7.3.2 No further discussions took place.	
	7.3.3 The Governing Body agreed to note the content of the report.	

18/05/18/7.4	Health and Wellbeing Board <i>(from 27 March 2018 meeting)</i>	
	7.5.1 Members were asked for any comments or questions on the report.	
	7.5.2 No further discussions took place.	
	7.5.3 The Governing Body agreed to note the content of the report.	

DATE AND TIME OF NEXT MEETING	
Friday 20 July 2018 10:30 – 12:30 Number One Riverside, Smith Street, Rochdale	