

Meeting: Governing Body			
Meeting Date	27 September 2017	Action	Approve
Item No.	3	Confidential	No
Title	Minutes and Action Log		
Presented By	Dr Kiran Patel, CCG Chair		
Author	Mrs Lisa Featherstone, Deputy Director of Business Delivery		
Clinical Lead	Dr Kiran Patel, CCG Chair		

Executive Summary
<p>The minutes are presented as an accurate reflection of the previous meeting of the Governing Body, reflecting the discussion, decisions and actions agreed.</p> <p>Updates against the actions have been provided for information.</p>
Recommendations
<p>It is recommended that the Governing Body:</p> <ul style="list-style-type: none"> • Approve the minutes as an accurate record; and • Note the updates provided against the actions

Links to CCG Strategic Objectives	
To empower patients so that they want to, and do, take responsibility for their own healthcare. This includes prevention, self-care and navigation of the system.	<input type="checkbox"/>
To deliver system wide transformation in priority areas through innovation	<input type="checkbox"/>
To develop Primary Care to become excellent and high performing commissioners	<input type="checkbox"/>
To work with the Local Authority to establish a single commissioning organisation	<input type="checkbox"/>
To maintain and further develop robust and effective working relationships with all stakeholders and partners to drive integrated commissioning.	<input type="checkbox"/>
To deliver long term financial sustainability in partnership with all stakeholders through innovative investment which will benefit the whole Bury economy.	<input type="checkbox"/>
To develop the Locality Care Organisation to a level of maturity such that it can consistently deliver high quality services in line with Commissioner's intentions.	<input type="checkbox"/>
Supports NHS Bury CCG Governance arrangements	<input checked="" type="checkbox"/>
Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:	No
GBAF – n/a	

Implications						
Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any financial Implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Has an Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Is an Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any associated risks?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Failure to have up to date policies in place could impact on the reputation of the CCG through legal challenge and poor practice.						

Governance and Reporting		
Meeting	Date	Outcome

Title	Minutes of the Governing Body 26/07/17 – Meeting in Public		
Author	Lisa Featherstone		
Version	0.2		
Target Audience	Wider CCG and General Public		
Date Created	27 July 2017		
Date of Issue			
To be Agreed			
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Description	Minutes of the Governing Body 26/07/17 – Meeting in Public		
Document History:			
Date	Version	Author	Notes
14/08/17	0.1	L Featherstone	Initial Draft
15/08/17	0.2	L Featherstone	Reviewed by the Chair of the Meeting
Approved:			
Signature:			
		 Mr P Bury

Governing Body Meeting in Public

MINUTES OF MEETING

26 July 2017

Chair – Mr P Bury, Lay Member and Deputy GB Chair

ATTENDANCE

Governing Body Members

Mr Peter Bury, Lay Member for Quality and Performance (meeting chair)
Mr Howard Hughes, Clinical Director
Mrs Lesley Jones, Director of Public Health (From Item 6)
Dr Ajay Kotegaonkar, West Sector Lead
Mr David McCann, Lay Member for Patient and Public Involvement
Mr Stuart North, Chief Officer
Ms Margaret O'Dwyer, Director of Commissioning and Business Delivery
Dr Jeff Schryer, Clinical Director
Mr Mike Woodhead, Interim Chief Finance Officer
Mrs Maxine Lomax, Head of Safeguarding (Deputising for Mrs C Jackson with voting rights)

Others in attendance

Mrs Lisa Featherstone, Deputy Director of Business Delivery
Ms Lesley Jones, Director of Public Health
Mr Paul Horrocks, Communication Advisor
Mrs Caroline Dearden, CCG Communications Manager

1 Member of the Public (Health Watch)
2 Member of Staff
1 Member of the Press (Bury Times)

MEETING NARRATIVE & OUTCOMES

1	Welcome, Apologies And Quoracy
1.1	<p>Mr Bury welcomed those present to the meeting and noted apologies had been received from:</p> <ul style="list-style-type: none">• Mrs Fiona Boyd, Governing Body Registered Nurse• Dr Kiran Patel, Chair• Dr Fazel Butt, East Sector Lead• Mr Amarbaj Chandock, Secondary Care Consultant to the Governing Body• Dr Wiz El-Jouzi, North Sector Lead• Dr Cathy Fines, Clinical Director• Mrs Catherine Jackson, Executive Nurse• Mr Chris Wild, Lay Member
1.2	<p>Mr Bury advised that the quoracy requirements had not been satisfied, however in accordance with the CCG's constitution, at paragraph 6.10.6, the meeting will proceed</p>

and all decisions made will be in good faith and will remain valid, As this is outside the scheme of delegation, the Audit Committee would be notified in accordance with the Standing Orders.

Mr Bury advised the Governing Body that many of the items presented were for discussion and not decision, however the Workforce Race Equality Standard (WRES) does require approval for publication on the CCG's website.

ID	Type	The Governing Body:	Owner
D/07/01	Decision	Agreed to proceed with the meeting in good faith.	

2	Declarations Of Interest		
2.1	Mr Bury reminded Governing Body members of their obligation to declare any interest they may have on any issues arising from agenda items which might conflict with the business of NHS Bury Clinical Commissioning Group.		
2.2	Declarations made by members of the Governing Body are listed in the CCG's Register of Interests which is presented under this agenda and also available from the CCG's Corporate Office or via the CCG website.		
2.3	<p>Declarations of interest from today's meeting</p> <p>There were no further declarations made from those already recorded in the register in relation to the agenda items for discussion and decision.</p>		
2.4	<p>Declarations of Interest from the previous meeting</p> <p>There were no further declarations made in respect to the business of the previous meeting.</p>		
ID	Type	The Governing Body:	Owner
D/07/02	Decision	noted the published register of interests.	

3	Minutes Of The Last Meeting And Action Log		
3.1	<ul style="list-style-type: none"> minutes <p>The minutes of the Governing Body meeting held on 24 May 2017 were considered and subject to the following amendment as proposed by Ms O'Dwyer were agreed as a correct record:</p>		
3.2	<p>The minute in respect to Item 12 Review of CCG Objectives should be amend to reflect: <i>This item was deferred to the next Governing Body meeting due to time constraints which would restrict full consideration</i></p>		
3.3	<p>Ms O'Dwyer also requested the item be considered under the Chief Officer's report at this meeting of the Governing Body as sign-off of these is critical to the development of the Governing Body Assurance Framework. This was supported by the Governing Body.</p>		
3.4	<p>There were no matters arising from the minutes of the previous meeting.</p>		
3.5	<ul style="list-style-type: none"> action log <p>An update was provided in respect to the open action, and the Governing Body was advised that Dr Patel had referred the issue to the Local Authority. It was agreed the action would be closed.</p>		

ID	Type	The Governing Body:	Owner
D/07/03	Decision	approved the minutes of the meetings held on 24 May 2017 as a true and correct record subject to the amendment noted	
D/07/04	Decision	Closed all open actions on the action log.	

4	Chief Officer's Update
4.1	<ul style="list-style-type: none"> • CCG Improvement and Assessment Framework 2016/17 <p>Mr North opened his update with reference to the 2016/17 performance assessment rating of the CCGs which have now been published. Mr North confirmed that Bury had been assessed as GOOD and in the letter received from Jon Rouse, GMHSCP, outlined 14 areas of strength and 3 opportunities for development, which is a very positive reflection of the hard work that has been delivered throughout the year.</p>
4.2	<p>In addition to the overall assessment, Mr North further advised that three clinical areas had been assessed by independent panels and the CCG was awarded the following ratings, which again was testament to the effective and robust clinical leadership of the organisation:</p> <ul style="list-style-type: none"> • Cancer (GOOD) • Mental Health (GOOD); and • Dementia Services (OUTSTANDING).
4.3	<p>He further remarked upon the fact that Dementia score reflected well not only on the innovative approach being implemented within General Practice, as led by Dr Schryer, but also provides a strong example of joint working across the system, specifically with the Local Authority and the establishment of Bury as a Dementia Friendly Town.</p>
4.4	<p>Ms O'Dwyer advised that 3 more clinical priority areas would be benchmarked nationally and the outcome reported once available.</p> <ul style="list-style-type: none"> • CCG Governance <p>Mr North reported that the CCG had ratified a Flexible Working Policy as part of its HR work programme.</p> <ul style="list-style-type: none"> • 360^o Feedback <p>Mr North highlighted the feedback received through the annual 360 survey and assured the Governing Body that an in-depth review is being undertaken through respective committees to ensure an action plan is developed and that lessons learned can support further improvement</p> <ul style="list-style-type: none"> • Strategic Objectives <p>Mr North referred to the earlier point and advised that the Strategic Objectives had been presented for formal ratification at the last meeting, however due to time constraints, were deferred.</p> <p>Ms O'Dwyer reminded the Governing Body that these objectives had been shaped by the by the Governing Body through the development session in April 2017 and refined thereafter prior to presentation at the last meeting.</p> <p>Reflecting on previous feedback from Internal Audits, Ms O'Dwyer reminded the Governing body that it is important that all reports presented and items considered by</p>

the governing Body should map to at least one of the strategic objectives. This practice should also be embedded across the wider CCG governance arrangements.

The Governing Body supported the ratification of the strategic objectives.

ID	Type	The Governing Body:	Owner
D/07/05	Decision	noted the update provided.	
D/07/06	Decision	Ratified the CCG's Strategic Objectives	

5	Committee Chair Reports
5.1	<ul style="list-style-type: none"> • Clinical Cabinet <p>Mr Hughes presented his report on the proceedings of Clinical Cabinet meeting held in June 2017 and directed the Governing Body's attention to:</p> <ul style="list-style-type: none"> • the Palliative and End of Life Care MacMillan project; • evaluation of the Big White Wall; and • clinical engagement on GM EUR policies.
5.2	Mr McCann reflected that the Patient Cabinet had supported the Big White Wall project when it was initially implemented and queried the reasons for underperformance.
5.3	Dr Schryer advised that the proposal had consisted of two parts, the therapy which has not been utilised and also the confidential space, which although use has increased, this was still not at the levels expected. A watching brief has been kept on the project, and the marketing strategy reviewed, with the age range of the offer being widened beyond the 16-25year cohort originally seen as the target population for an interactive service.
5.4	Mr McCann explored whether a younger cohort might make greater use of the service, with the prevalence of stress, anxiety and mental health issues on the rise with the younger generations which was also supported and voiced by Bury's Youth Cabinet. Dr Schryer advised that contractual constraints prohibit access from younger patients.
5.5	Dr Kotegaonkar shared a view that potentially the initial marketing of the service to GPs had not been a resounding success and suggested there were opportunities to relaunch, particularly with a view to providing alternative support for patients currently receiving medication. This was supported by the Governing Body.
5.6	<ul style="list-style-type: none"> • Patient Cabinet <p>Mr McCann presented the Patient Cabinet report and advised the June meeting had been attended by Karen Richardson, Deputy Director of Commissioning and Howard Hughes, Clinical Director, which had been most welcomed, and enabled a forward thinking approach to engagement of patient cabinet volunteers in future workstream developments.</p>
5.7	<p>Reflecting on the overall work programme for the Patient cabinet, Mr McCann advised the Governing body that:</p> <ul style="list-style-type: none"> • work is continuing to support practices will better engagement through active patient participation groups; • Urgent Care remains on the agenda as a standing item; • repeat prescribing is an area that patient cabinet volunteers will be looking to explore in the near future.

5.8	Mr Horrocks asked whether there was any confidence that patient stories will get resurrected to support the CCG in understanding the qualitative impact of its decisions, however Mr McCann advised that although this is was discussed regularly, very few quality stories are received.
5.9	Dr Schryer suggested that seeking patient stories from general Practice might be another avenue to explore and offered his support which was accepted.
5.10	Ms O'Dwyer also suggested liaising with HMR CCG who have good processes in place and may be able to offer some additional insight.
5.11	<ul style="list-style-type: none"> • Primary Care Commissioning Committee Mr Bury provided a verbal update to the Governing Body on the Primary care Commission Committee meeting which had taken place immediately prior to the Governing Body.
5.12	The significant discussion point for the Governing Body to note related to the Uplands development and the additional financial investment required due to a number of matters. <i>(Mrs Lomax left and rejoined the meeting at this point of discussion)</i>
5.13	Reporting that the original options will need to be reconsidered resulting in a delay to the overall project, and update is expected to be presented to the Primary care Commissioning Committee and Governing Body as soon as they become available.
5.14	Mr Bury also advised that the PCCC had considered the GP Patient Satisfaction Survey results which were incredibly positive with Bury above the national average scores in many areas, which reflects on the strengths of member practices within the locality.
5.15	Mr Bury also described the focus on risk at the PCC meeting where a number of risks had been agreed for closure and advised the Primary Care Strategy mobilisation was also discussed <i>(Mr Woodhead left and rejoined the meeting at this point of discussion)</i> <i>(Ms Jones joined the meeting)</i>

ID	Type	The Governing Body:	Owner
D/07/07	Decision	noted the Clinical Cabinet report presented.	
A/07/01	Action	Relaunch of BWW to General Practice to be considered as part of delivery strategy	JS
D/07/07	Decision	Noted the Patient Cabinet report presented.	
A/07/02	Action	Patient story opportunities to be explored with General Practice	JS
D/05/08	Decision	Noted the Primary care Commissioning update provided.	

6	Quality And Performance Committee Report
6.1	Mr Bury presented the report from July and directed the attention of the Governing Body to the committee's approach to reviewing performance and in particular risks which have been on the Quality and Performance Committee Risk Register for a period of time. Reflecting of the feedback from the Audit Committee, the Committee has

incorporated a process of deep dive and review, including recalibration where appropriate, on an agreed schedule. This process, which has now been followed at the last two meetings, provides a level of assurance which can be passed onto the Governing Body.

(the items were taken out of order with the agenda)

- **Performance Report**

- 6.2 Ms O'Dwyer referenced the wheelchair assessment target, which is new for this year and advised that the baseline position in April 2017 was only 42% against a target of 92% by March 2018, however there has been a significant improvement and performance is now reported at 71%.
- 6.3 Reflecting on the earlier discussion in respect to the GOOD assessment rating for cancer as a clinical area, Ms O'Dwyer advised there is still much work to be undertaken to optimise patient experience specifically in relation to access. One particular challenge within Bury is the high number of Bury patients cancelling or not attending appointments on the 2 week pathway, which does impact both on experience, outcome and performance measures.
- 6.4 Ms O'Dwyer also raised the matter of Delayed Transfers of Care and shared that the spotlight is currently on Bury due to poor performance and there is a need for us to truly understand the activity, data and issues pertaining to this metric, which is a significant piece of work. The governing body were advised that GM are also undertaking work in relation to patient choice, trusted assessor and discharge to assess, which will provide the standard which localities will work within.
- 6.5 Positive performance was reported in relation to 12 hour trolley waits, which are now seeing a downward trend in occurrence and the aim is for zero reported waits by end August 2017. The impact of an integrated discharge team was discussed and its ability to be effective across multiple sites was also discussed, recognizing that whilst this approach works well for patients on the Fairfield Site, there are a number of patients who attend North Manchester General Hospital who would also benefit from this approach.
- **Quality Dashboard**
- 6.6 Mrs Lomax invited questions from the Governing body on the Quality dashboard presented.
- 6.7 Dr Schryer reflected on the number of investigated reported relating to neglect and what the interventions are that would prevent this from happening. It was clarified that the numbers relate only to those placements where the CCG fully fund the patient and confirmed that arrangements are in place, through the quality and safeguarding team to provide the necessary support, including quality visits and training to raise awareness amongst general practice staff.
- 6.8 Mr North commented on the disparity between patient choice being active at point of discharge to nursing home placements and Bury holding the strongest position for quality of Nursing Home and suggested this needs to be explored further.
- **Safeguarding Dashboard**
- 6.9 Mrs Lomax presented the safeguarding Dashboard and advised the Governing Body that safeguarding training is now above the compliance requirements.

ID	Type	The Governing Body:	Owner
D/07/09	Decision	noted the Quality and Performance Committee update provided.	
D/07/10	Decision	Received the Quality Report.	
D/07/11	Decision	Received the Performance Dashboard.	
D/07/12	Decision	Received the safeguarding Dashboard.	

7	Finance, Contracting And Procurement Committee Report		
7.1	Mr McCann provided a verbal update to the Governing Body in the absence of Mr Wild and advised that at month 3 of the financial year, recognising only one month of reliable secondary care activity and data is available, the CCG remains on track against its financial targets, however it should be noted that QIPP delivery remains a challenge with mitigations currently being explored.		
7.2	Mr Woodhead advised of two areas of potential risk in the system in relation to PCFT and PAHT		
7.3	Mr McCann also advised that the Committee had been advised of the delay to approval of the CCG's transformation Bid, pending further clarity being sought from the CCG by the Transformation Fund Oversight Group (TFOG) but were supportive of the revised proposal that has been worked up which reflects a new figure of c£23m, of which £3million will be funded by the locality. Mr McCann advised that the Finance Contracting and Procurement Committee had been explicit when supporting the re-submission, that the locally required c£3m must be funded by both the CCG and Local Authority, and requested Governing Body support on this position in future discussions.		
7.4	Mr North advised that the outcome of the revised submission was not known, however the locality remains optimistic and an answer is expected in the next few weeks. The Governing body was assured that it is expected that resource will be identified on an equitable basis, which may follow an 'invest to save' approach where any funds invested will be returned to the respective parties.		
7.5	Mr Woodhead remarked that due diligence discussions with the Local Authority specific to this funding were underway and was asked by Ms Jones on the timescale for pooled budgets to be in place. Mr Woodhead confirmed that all budgets which can be legally pooled are on track for March 2018 and the remaining budgets will be aligned where they cannot be pooled within the same timeframe.		
7.6	The Governing Body supported the approach stipulated by the Finance, Contracting and Performance Committee.		
7.7	Referring back to the work undertaken at the Finance, Contracting and Procurement Committee, Mr McCann advised that consideration had been given to the AQP procurements which had reflected poor patient engagement. Mr North, recognising the local financial challenges that have existed in Bury for a number of years, shared that NHSE are currently undertaking a consultation on prescribing for clinical need, which Bury implemented 12 months ago, and whilst at times the decisions to be made are difficult, this provides assurance that Bury are making the right decisions.		
ID	Type	The Governing Body:	Owner
D/07/13	Decision	Received the update provided	

D/07/14	Decision	Supported the principle of equitable funding between the CCG, LA and other providers as required.	
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8	Audit Committee Report		
8.1	Mr McCann presented the report from the Audit Committee Chair in respect to its meeting in June 2017 and highlighted the Audit Committee request for all risks to be reviewed on a 12 monthly cycle, in addition to scheduled management reviews to ensure the risks remain valid.		
8.2	The Governing body was also advised that the Audit Committee had considered: <ul style="list-style-type: none"> the Terms of Reference for the effectiveness of engagement in developing the Locality Plan; the impact and lessons learned from the national cyber-attack; and the formal approval and sign-off of the annual accounts by External Audit. 		
8.3	Mr North advised the Governing Body that he was reassured by the focus on Cyber Risk and whilst operationally the impact on the CCG had not been as great as other NHS Bodies, partly due to the efficient and prompt response from all colleagues across the footprint, this is an area of risk where increased exposure is only to be expected.		
8.4	Ms O'Dwyer asked for the Audit Committee to ensure that patient and public engagement is also included within the MIAA Internal Audit of the Locality Plan.		
8.5	<ul style="list-style-type: none"> Corporate Risk Register Ms O'Dwyer presented the Corporate Risk Register and reminded the Governing body that this report only includes those risks that are assessed at a Level 15 or above. <p>Explaining that there are currently five risks at this level, the Audit Committee had received updates from the respect workstreams and sub-committees of the Governing Body and were assured as follows:</p> <ul style="list-style-type: none"> Maternity risk : all controls are appropriate; Serious Incidents : risk considered proportionate and mitigations are being led by the Executive Nurse; A&E : remains a national issue, however locally the improvement trajectory has been achieved for Q1 but risk remains Financial Controls : risk in relation to PAHT and PCFT as reported earlier were not anticipated and the QIPP challenge means the risk remains at this level for now. 		

ID	Type	The Governing Body:	Owner
D/07/15	Decision	noted the update provided.	
D/07/16	Decision	received the Corporate Risk Register	
A/07/03	Action	MIAA locality plan audit to include patient and public engagement	DMc

9	PUBLIC QUESTIONS		
9.1	Mr Bury confirmed that no questions had been submitted in advance of the meeting and invited questions from the public gallery in relation to the business discussed.		
9.2	Barbara Barlow, Chair of Healthwatch, suggested that it could be useful for a further discussion with officers of the CCG in respect to Delayed Transfer of Care as her organisation was receiving adverse feedback and was currently exploring potential		

9.3	engagement opportunities with the public on this.		
	The Governing body supported this and invited Ms Barlow to meet with the Director of Commissioning and Business Delivery.		
ID	Type	The Governing Body:	Owner
A/07/04	Action	Delayed transfers of care to be discussed between the CCG and Healthwatch	MOD

10	Transformation Funding Update And CCG Implementation		
10.1	Mr North referred to the updated provided earlier in the meeting and advised that implementation will be discussed at a forthcoming Board to Board meeting between the One Commissioner Board and the Locality Care Board, with an update reported to the Governing Body in due course.		
ID	Type	The Governing Body:	Owner
D/07/17	Decision	noted the earlier discussion	
A/07/05	Action	Agenda transformation funding update and CCG implementation at a future Governing Body meeting	LF

11	Information Governance Annual Report		
11.1	Mr Woodhead presented the Annual Report and highlighting that appropriate named officers are in place, supported by a comprehensive training package and that compliance with the IG toolkit had been assessed as part of the annual Internal Audit Programme, all of which should provide assurance to the Governing Body.		
11.2	Reflecting on the forward plan, the Governing body was advised that the Information Governance policies will be reviewed through appropriate governance arrangements in November 2017.		
11.3	Mr Woodhead also advised on national changes planned which would represent the most significant change in this agenda in the last 20 years and would significantly boost the rights of data subjects. Dr Kotegaonka reflected that patients opting out of sharing data presented some challenges in out of hours care in primary care and that he was unsure that patients understood the clinical risks when they made their decisions. Mr North felt that work was required on a Greater Manchester basis in this area.		
ID	Type	The Governing Body:	Owner
D/07/18	Decision	Received the Information Governance Annual Report	

12	WORKFORCE RACE EQUALITY STANDARD (WRES)		
12.1	Ms O'Dwyer presented the report for ratification on the recommendation of the Quality and Performance Committee in order that it may be published in accordance with nationally required deadlines. Advising that the CCG workforce is more ethnically diverse than the population it served, Ms O'Dwyer explained the importance of the report for both employers and their population.		
12.2	Dr Schryer reflected that he would expect to see progression of actions through the Quality and Performance Committee for future reporting to the Governing Body.		

ID	Type	The Governing Body:	Owner
A/07/15	Decision	Approved the WREs as presented and supported publication to the CCG website	
A/07/06	Action	Progress against the WRES to be reported to the Quality and Performance Committee	LF

13	Closing Matters/Forward Plan
13.1	There we no closing matters and the meeting ended at 16:30

Governing Body Action Log – Meeting in Public

Status Rating - In Progress - Completed - Not Yet Due - Overdue

Title	Action	Lead	Status	Due Date	Update
A/07/01	Relaunch of BWW to General Practice to be considered as part of delivery strategy	Clinical Director (Mental Health)		27-Sept2017	Work has been undertaken with BWW and the Communication Team to promote the service.
A/07/02	Patient story opportunities to be explored with General Practice	Clinical Director (Primary Care)		27-Sept-2017	Patients willing to provide a patient story in respect to Diabetes and Mental Health have been identified to provide patient stories, however further work is required in respect of the CCGs consent process from an Information Governance perspective.
A/07/05	MIAA locality plan audit to include patient and public engagement	Lay Member (PPI)		01-Sept-17	The requirement to ensure appropriate reflection of patient engagement in the Terms of Reference was reported to the Internal Auditors at the Audit Committee meeting on 1 st September 2017
A/07/06	Delayed transfers of care to be discussed between the CCG and Healthwatch	Director of Commissioning		30-Oct-17	Update to be provided through operational activity
A/07/07	Agenda transformation funding update and CCG implementation at a future Governing Body meeting	Committee Administrator		27-Sept-17	Added to the Governing Body forward plan
A/07/05	Progress against the WRES to be reported to the Quality and Performance Committee	Committee Administrator		27-Sept-17	The WRES is a standing agenda item on the Quality and Performance Committee and is presented quarterly.