

**Unconfirmed Minutes of the Governing Body Meetings in Common Held in Public
on Wednesday, 9th May 2018, 1.30pm**

Venue: Council Offices. Friarsgate, Eaton Road, Coventry

Present:	
Dr Deryth Stevens	Chair - WNCCG
Dr Sarah Raistrick	Chair - CRCCG
Mr David Allcock	Lay Member for Audit and Governance - WNCCG
Mr Chris Stainforth	Lay Member, Audit and Governance - CRCCG
Ms Liz Gaulton	Director of Public Health, Coventry - CRCCG
Dr Chris Pycock	Secondary Care Doctor - WNCCG
Ms Clare Forkes	Lay Member, Public and Patient Involvement - CRCCG
Dr Inayat Ullah	Practice Network Lead: Nuneaton and Bedworth - WNCCG
Mr Graham Nuttall	Lay Member - Primary Care - WNCCG
Ms Sue Turner	Practice Network Lead: North Warwickshire - WNCCG
Mr Derek Pickard	Lay Member – Patient and Public Involvement - WNCCG
Dr Prashant Kokodkar	Secondary Care Specialist Consultant - CRCCG
Mrs Clare Hollingworth	Chief Finance Officer
Ms Jo Galloway	Chief Nurse
Dr Imogen Stanley	Clinical Lead – WNCCG
Apologies:	
Ms Andrea Green	Chief Officer
Dr John Linnane	Director of Public Health, Warwickshire
Dr Deepika Yadav	Rugby Locality Lead - CRCCG
Dr Peter O'Brien	Clinical Locality Lead, Inspires - CRCCG
Dr Steve Allen	Clinical Director
Mr Ludlow Johnson	Lay Member for Patient and Public Involvement and Equality
Dr Arshad Khan	Clinical Lead - WNCCG
Dr Godwin Igodo	Clinical Lead - WNCCG
In Attendance:	
Mrs Maria Maltby	Deputy Director of Corporate Affairs
Ms Rachel Robinson	Consultant in Public Health Medicine – WNCCG
Mr Stan Orton	Public and Patient Group Representative
Mr Steven Jarman-Davies	Director of Acute Contracting and Performance (From 14:02 until 14:49)
Mrs Julie Seaborne	Governance Officer
Kay Greene	Director of Clinical Services – Mary Ann Evans Hospice

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1. 1.1	<p><u>Standing Items:</u></p> <p>Welcome and Apologies</p> <p>Dr Stevens welcomed those present to the meeting and gave a special welcome to the new Governing Body members:</p> <ul style="list-style-type: none"> • Claire Forkes – Lay Member for Public and Patient Engagement, Coventry and Rugby CCG • Chris Stainforth – Lay Member for Audit and Governance, Coventry and Rugby CCG • Imogen Staveley – Elected Clinical lead, Warwickshire North CCG <p>Dr Stevens also welcomed Dr Sarah Raistrick to her first meeting as Chair of Coventry and Rugby CCG.</p> <p>Dr Stevens advised that Coventry and Rugby Governing Body was not quorate due to apologies and therefore any decisions would need to be confirmed in writing by email outside of the meeting.</p>	
1.2	<p><u>Declarations of Interest:</u></p> <p>Dr Stevens reminded Members of the need to declare their interest in any items requiring a decision and to remove themselves from such decision making. declarations of interest were raised. No declarations were made.</p>	
1.3	<p><u>Minutes of the Last Meeting: 8th March and 29th March 2018</u></p> <p>The minutes of the meetings held on 8 March and 29 March were agreed as a true and accurate record of the meetings subject to a change to the minutes of 8 March of ‘Any Other Business’ to be amended to “Mr Orton reported that he had attended an Extended Access conference in Birmingham”.</p>	
1.4	<p><u>Matters Arising And Action Schedule:</u></p> <p><u>Matters Arising</u> There were no matters arising.</p> <p><u>Action Schedule</u></p> <p><i>Item 46 - Patient Group Forum: Provide an update regarding the re-negotiation of the NHS 111 contract to the Patient Group Forum.</i></p> <ul style="list-style-type: none"> - Tobe carried forward to the next patient group forum meeting due to the last one being cancelled due to bad weather conditions. <p><i>Item 53 - Local Maternity System Transformation Plan - Number of live births: Mr Orton highlighted that Figure 9 on page 22 of the report stated that the change in numbers of live births between 2014 and 2039 would be 8 for North Warwickshire. Ms Robinson to review the figure and provide an update to Members.</i></p> <ul style="list-style-type: none"> - Rachel Robinson confirmed that she had asked the Insight Team to review the figures and the number of new births had been amended. Action closed. 	

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1.5	<p><u>Chair's Report:</u></p> <p>(A) Coventry and Rugby CCG: Dr Raistrick presented the Coventry and Rugby CCG Chair's report. She confirmed that after taking up her post on 1 April 2018, she had started to develop relationships with key stakeholders and members. Dr Raistrick had attended her first meetings of the Coventry Health and Wellbeing Board and the Warwickshire Health and Wellbeing Board. She had also attended two meetings of the Clinical Design Authority along with Jo Galloway (Chief Nurse), clinical leaders of provider organisations, GP representatives and Chairs of local CCGs.</p> <p>In respect of member engagement, Dr Raistrick confirmed that Coventry had made a good step forward to cluster-based working with the appointment of Cluster Lead GPs and facilitators. There had been a meeting with the leads to hear their local priorities and offer support and direction to balance their local plans with CCG priorities and planning.</p> <p>Coventry and Rugby CCG Governing Body Members NOTED the report.</p> <p>(B) Warwickshire North CCG: Dr Stevens presented her report and confirmed that as of 1 April 2018, Warwickshire North CCG was now fully delegated for commissioning of Primary Care GP related services.</p> <p>Dr Stevens reported that the CCG supported GPs and practice staff for education on a monthly basis. In March 2018 a Coventry and Warwickshire wide event relating to cancer had been held. There had been a variety of themes including early diagnosis, prevention, referral pathways, living beyond cancer and end of life care.</p> <p>Warwickshire North CCG Governing Body Members NOTED the report.</p>	
1.6	<p><u>Chief Officer's Report</u></p> <p>In Andrea Green's absence, Mrs Hollingworth presented the Chief Officer's report. Key points included:</p> <ul style="list-style-type: none"> • The CCGs had participated in the end of year assurance review with NHS England on 16 April 2018, the outcome of the reviews would be known by July 2018 once all CCGs had been assessed and the national moderation process completed. • On 12 April 2018, the first workshop was held to evolve local Health and Wellbeing Partnership into a local Place based forum for the population in the boroughs of Nuneaton, Bedworth and North Warwickshire. • Warwickshire North CCG had successfully completed the final stages of delegation of commissioning from NHS England in March 2018 and so commenced commissioning primary medical services as planned from 1 April 2018. <p>Coventry and Rugby CCG and Warwickshire North CCG Governing Body Members NOTED the report.</p>	
2.	<p><u>Strategy and Planning:</u></p>	
2.1	<p><u>Coventry Public Health Report</u></p> <p>Ms Liz Gaulton presented the Coventry Public Health Report which provided the</p>	

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	<p>following:</p> <ol style="list-style-type: none"> 1. An overview of the recently launched integrated healthy lifestyle service. 2. An update on activity relating to the Coventry and Warwickshire Year of Wellbeing; 3. An opportunity for members of the Governing Body to consider how the CCG/s link in to the Year of Wellbeing work.. <p>Coventry and Rugby CCG Governing Body Members NOTED the report.</p> <p><u>Warwickshire Public Health Report</u> Ms Rachel Robinson presented the Warwickshire Public Health report to update the Governing Bodies on the core offer work programme from Public Health Warwickshire with Warwickshire North CCG and the Rugby Borough areas. The report included updates on the following areas:</p> <ul style="list-style-type: none"> • Ready for School Pilot • Drug and Alcohol Service Redesign and Re-commissioning Process • Making Every Contact Count (MECC) Programme • Health Visiting & FNP Service Delivery • National Diabetes Prevention Programme • Warwickshire North Health and Wellbeing Partnership • #onething • Healthwatch • Child Sexual Exploitation (CSE) • Fitter Futures Falls pilot <p>Warwickshire North CCG and Coventry and Rugby CCG Governing Body Members NOTED the report.</p>	
2.3	<p><u>Communications and Engagement Report</u></p> <p>Dr Stevens introduced the Communications and Engagement written report which provided an overview of communications and engagement activity undertaken during February – April 2018.</p> <p>Coventry and Rugby CCG and Warwickshire North CCG Governing Body Members NOTED the report.</p>	
3.	<p><u>Quality, Safety and Performance:</u></p> <p>3.1 <u>Patient Story</u> - Ms Galloway introduced Kay Greene, Director of Clinical Services from Mary Ann Evans Hospice who presented a patient story in respect of the Community Rapid Response Team. This was a pilot project funded and provided by South Warwickshire Foundation Trust and the Mary Ann Evans Hospice. The project includes visiting patients and their families for end of life care in respect of symptom control and management, and also carer reassurance/support.</p> <p>The patient story was well received by Governing Body members and Dr Ullah in particular praised the service which he said was a 'brilliant' service which was very valued.</p>	
3.2	<p><u>Integrated Safety, Quality and Performance Report</u></p> <p>Ms Galloway presented the Safety and Quality section of this report to provide assurance to the Governing Body of the performance of services commissioned by</p>	

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	<p>Coventry and Rugby and Warwickshire North CCGs for the month of February unless otherwise specified. The report also provided an update on quality concerns within commissioned services that are either being investigated or are being monitored against improvement plans. Ms Galloway highlighted the following areas within her report:</p> <p>University Hospital Coventry and Warwickshire:</p> <p><u>Areas on Level 3 the Clinical Governance Framework:</u></p> <p><i>Urgent Clinic Letters sent within 10 days</i> – Despite increased Trust oversight over the last 3 months, overall performance with this standard had not improved. The CCG had issued the Trust with a formal Contract Performance Notice that would require the Trust to provide a formal recovery plan by first week of May 2018.</p> <p><i>Accident and Emergency Department (A&E)</i>- The Trust was not currently meeting the 4 hour target and the CCG had formally requested the Trust conduct a review of Serious Incidents reported over the past twelve months and to provide the CCG with assurance that there were no key themes or trends directly related to the clinical care. The Trust had also been requested to share the outcome of clinical audits carried out. The CCG also had plans to conduct a further unannounced visit.</p> <p>Coventry And Warwickshire Partnership Trust:</p> <p><u>Areas on Level 2 of the Clinical Governance Framework:</u></p> <p><i>CQC Inspection</i> - the final CQC inspection report was published on 8 November 2017 with an overall rating of 'requires improvement'. A warning notice was issued to CWPT in relation to older people's services as it was identified that the Trust's systems and processes did not effectively monitor the physical healthcare of patients and reduce identified risks. CQC revisited this service in November 2017 and the service has subsequently been re-graded from 'inadequate' to 'requires improvement'. The CQC action plan forms a standing item agenda at the CQRM and the CCG is assured that CWPT has robust governance arrangements in place to monitor the action plan.</p> <p>George Eliot Hospital:</p> <p><u>Areas on Level 2 of the Clinical Governance Framework:</u></p> <p><i>Accident & Emergency (A&E)</i> - The Trust was not currently meeting the 4 hour target and had also reported a number of 12 hour trolley breaches. The CCG continued to monitor the quality of care delivery in A&E through the monthly CQRM and monitoring of Serious Incidents (SIs) reported by the Trust; with no incidents of patient harm being reported to date. The Chief Nursing Officer visited the A&E department on 27 February to walk through the patient pathway for adults and children.</p> <p><i>Fragile Services (End of Life Care (EoLC); Paediatrics; Emergency Department; and Rheumatology)</i> - The Trust was experiencing workforce challenges within End of Life Care, Paediatrics, Emergency Department and Rheumatology services. These challenges were routinely discussed at the Trust's Board meeting and Quality Assurance Committee. Ms Galloway reported that it was positive to note at the March 2018 CQRM that the Trust had been successful in recruiting a Consultant for the EoLC service. The Consultant was expected to take up post in August 2018 and a second Consultant position had also been advertised.</p> <p>Mr Jarman-Davies presented the performance section of the report and noted the</p>	

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	<p>following key points:</p> <p><i>Referral to Treatment Times (RTT)</i> - 84.8% of Coventry and Rugby CCG patients had been waiting less than 18 weeks from their GP referral date to be seen or treated by a hospital specialist against a target of 92%. The figure for Warwickshire North CCG was 84.1%.</p> <p><i>Cancer waiting times</i> - Coventry and Rugby CCG achieved all Cancer waits targets. Warwickshire North CCG underachieved against the cancer 62 day wait target from urgent GP referral to first definitive treatment, with performance at 84.4% against a target of 85%. 3 patients at UHCW and 1 patient at George Eliot Hospital had waited more than 104 days from referral to treatment.</p> <p><i>Mixed Sex Accommodation</i> - There were 4 Mixed Sex Accommodation breaches for Coventry and Rugby CCG of which 3 were at the Royal Berkshire NHS Foundation Trust and 1 at Dartford 7 Gravesham NHS Trust. Two Warwickshire North CCG patients breached at GEH.</p> <p><i>Cancelled Operations</i> - 46 patients in quarter three had operations cancelled at UHCW, on or after the day of admission for non-clinical reasons and weren't offered another binding date within 28 days. All cancellations at GEH were offered another bidding date within 28 days. The main reason for the breaches was capacity and the need to schedule urgent/cancer patients further reduced the capacity available.</p> <p><i>Improving Access to Psychological Therapy (IAPT)</i> - Coventry and Rugby CCG achieved against the IAPT 15% access target in December 2018 but Warwickshire North CCG underachieved at 12.9%. Both CCGs achieved against the recovery rate target.</p> <p>Coventry and Rugby CCG and Warwickshire North CCG Governing Body Members NOTED the report.</p>	
4.	<p><u>Financial Performance</u></p> <p>4.1 <u>Finance and Contract Report: Month 12</u></p> <p><u>Coventry and Rugby CCG</u></p> <p>Mrs Hollingworth presented the Coventry and Rugby CCG Month 12 Finance Report which advised Members of the draft financial position of the CCG up to 31 March 2018 (Month 12 – 2017/18), and which remained subject to external audit, and advised of any other financial issues likely to impact in the next financial year.</p> <p>It was noted that Coventry and Rugby CCG originally planned to achieve a £1.1m control total surplus. At Month 10, the CCG revised its year end forecast to a £0.9m deficit to recognise £2.0m of the total £3.1m cost pressure relating to the national shortage of some generic branded drugs (ie. the 'No Cheaper Stock Obtainable' issue). This forecast had been maintained but then adjusted for the two sums released by NHSE to result in an end of year surplus of £2.65m [£1.1m less £2.0m plus £2.95m plus £0.6m]. This was then added to the brought forward surplus of £3.35m from 2016/17 to reach a cumulative surplus of £6.0m.</p> <p>Mrs Hollingworth advised that recurrent in-year QIPP delivery was reported to be 73%. The delivery of Non Recurrent schemes was reported as achieving 154%. This gave a combined achievement of 98% against the savings required for the year. The poor delivery against recurrent QIPP schemes has a negative impact upon the CCG's underlying position.</p>	

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	<p>The recurrent underlying deficit was assessed at £7.8m; this contributed to the significant financial challenge and scale of efficiency savings required in 2018/19</p> <p>Coventry and Rugby CCG Governing Body Members NOTED the pre-Audit position for Month 12.</p> <p><u>Warwickshire North CCG</u> Mrs Hollingworth advised Members of the draft financial position of the CCG up to 31 March 2018 (Month 12 – 2017/18) which was subject to external audit and advised of any other financial issues likely to impact in the next financial year.</p> <p>It was noted that Warwickshire North CCG had originally planned to achieve a £4.3m control total deficit. At Month 10, the CCG revised its year end forecast to a £5.2m deficit to recognise £0.9m of the total £1.3m cost pressure relating to the national shortage of some generic branded drugs (ie. the 'No Cheaper Stock Obtainable' issue). This forecast had been maintained but then adjusted for the two sums released by NHS England to result in an end of year deficit of £3.73m [£4.3m plus £0.9m less £1.17m less £0.3m]. This was then added to the brought forward deficit of £14.25m from 2016/17 to reach a cumulative deficit of £17.98m</p> <p>Mrs Hollingworth advised that there had been an improvement in the CCGs underlying financial position. The recurrent underlying deficit was assessed at £6.32m.</p> <p>It was noted that QIPP achievement for the year was 72%. There was significant in-year slippage against all recurrent QIPP programmes; this was partially offset by an over-delivery against Other/Cost Avoidance schemes ie. the application of non-recurrent flexibilities. Reserves had been utilised as further mitigation against the QIPP under-achievement.</p> <p>The underlying financial position and the consequence for the scale of savings required in 18/19 remained a significant concern on this basis.</p> <p>Mr Stainforth asked about processes for learning in respect of the financial challenges and Mrs Hollingworth confirmed that there had been external consultant support in respect of a cost reduction programme. Lessons learned and key themes had been explored and this including planning schemes earlier and strengthening of reporting processes.</p> <p>Mr Allcock confirmed that this was an incredibly challenging financial year and he congratulated Mrs Hollingworth and her team for their efforts in hitting some significant challenges.</p> <p>Warwickshire North CCG Governing Body Members NOTED the pre-Audit position for Month 12.</p>	
4.1	<p><u>2018/19 Financial Plan Update</u></p> <p>Mrs Hollingworth presented this reports for both CCGs and confirmed that at the last meeting, the Governing Bodies approved the 2018/19 Financial Plans (revenue budget). It was noted that modelled savings had been subject to a thorough assurance process; with the final savings logic clearly documented and signed off by the relevant SRO, a new Standard Operating Procedure was in place; and additional temporary posts had been approved and are being recruited to support in-year QIPP delivery. The following key points were noted for each CCG were:</p> <p><u>Coventry and Rugby CCG</u></p> <ul style="list-style-type: none"> • The CCG had been set a 2018/19 in-year control total of £0m; ie. it was 	

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	<p>required to contain expenditure within its notified revenue resource limit and deliver a break even position.</p> <ul style="list-style-type: none"> The Budget Plan approved in March 2018 required that the CCG identify and deliver in-year QIPP savings of £23.0m in 2018/19. At the point of Budget approval, plans to deliver this level of QIPP were not yet fully assured and £3.0m remained Unidentified. This shortfall had now been addressed. Whilst the potential net in-year risks faced by the CCG had been re-assessed downwards from £17.7m to £13.6m; this remains a significant issue and the CCG must continue to focus throughout the year on identifying and securing further mitigations. Mitigating actions would be agreed and monitored via the CCG's Finance & Performance Committee. <p><u>Warwickshire North CCG</u></p> <ul style="list-style-type: none"> The CCG had been set a 2018/19 in-year control total of £1m deficit. The Budget Plan approved in March 2018 required that the CCG identify and deliver in-year QIPP savings of £11.1m in 2018/19. At the point of Budget approval, plans to deliver this level of QIPP were not yet fully assured and £2.1m remained Unidentified. This shortfall had now been addressed. Whilst the potential net in-year risks faced by the CCG had been re-assessed downwards from £7.8m to £7.7m; this remained a significant issue and the CCG must continue to focus throughout the year on identifying and securing further mitigations. Mitigating actions would be agreed and monitored via the CCG's Finance & Performance Committee. <p>Coventry and Rugby CCG and Warwickshire North CCG Governing Body Members:</p> <ul style="list-style-type: none"> NOTED that work has been completed to quantify and risk assess expected savings QIPPs. NOTED the progress achieved in resolving the balance of unidentified QIPP. NOTED the reduction in the assessed value of potential in-year risks and be advised that mitigating actions will be monitored via the Finance & Performance Committee. 	
4.3	<p><u>Procurement Update</u></p> <p>Mrs Hollingworth provided an overview of the procurement work programme and a progress update for each of the individual projects.</p> <p>The Governing Body noted that the Out of Hospital contract was now live (for both Coventry and Rugby CCG and Warwickshire North CCG)</p> <p>Warwickshire North Governing Body members:</p> <ul style="list-style-type: none"> NOTED and confirmed that they were ASSURED as to the progress of the current procurements NOTED the procurement pipeline and the decisions that will be required over the next few months <p>Coventry and Rugby Governing Body was not quorate due to apologies and therefore it was agreed to request email confirmation of Member's support to approve a direct award of a contract (18mths + 6 mths) to the incumbent provider of the Community Eye Service on the understanding that a reduced notice period of 3 months will be negotiated.</p> <p><i>Post Meeting Note: Members of the Coventry and Rugby CCG Governing Body unanimously supported the direct contract award for the Community Eye Service.</i></p>	

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5	<p><u>Assurance and Governance Framework</u></p> <p>Mrs Maltby presented the updated Assurance Framework at Quarter 4 and emphasised that this was the Governing Bodies key tool for ensuring that key risks to achievement of the CCGs' objectives were being mitigated. Mrs Maltby advised that the Assurance Framework would be reviewed by the Senior Management Team for 2018/19.</p> <p>Coventry and Rugby CCG and Warwickshire North CCG NOTED the Assurance Framework at Quarter 4.</p>	
6.	<p><u>Policies for Ratification</u></p> <p><u>Freestyle Libre Flash Continuous Glucose Monitoring System policy</u></p> <p>Dr Stevens presented this report to propose adoption of policy by the CCGs for the routine use of the Freestyle Libre Flash Continuous Monitoring System subject to patients satisfying criteria detailed within the report.</p> <p>Mr Nuttall reported that this policy had not been considered by the CCGs' Finance and Performance Committees and Mrs Hollingworth confirmed that there had been considerable interest by members of the public and therefore it had been felt appropriate to bring to this meeting rather than wait until the next Governing Body meeting in July 2018.</p> <p>Warwickshire North CCG APPROVED the proposed policy.</p> <p>Coventry and Rugby Governing Body was not quorate due to apologies and therefore it was agreed to request email confirmation of Member's support to approve this policy to enable a written resolution for this decision.</p> <p><i>Post Meeting Note: Members of the Coventry and Rugby CCG Governing Body unanimously supported adoption of the policy for the Freestyle Libre Flash Continuous Glucose Monitoring System.</i></p> <p><u>Policy for Approving Pharmaceutical Industry Rebate Schemes</u></p> <p>Dr Stevens presented this policy and confirmed that the purpose was that retrospective rebates were increasingly being offered by suppliers of products prescribed on FP10 in primary care. This policy provided a framework for managing rebates in a legal and ethical way, and provided transparency and governance to this area of work.</p> <p>Warwickshire North CCG Members APPROVED the policy for implementation.</p> <p>Coventry and Rugby Governing Body was not quorate due to apologies and therefore it was agreed to request email confirmation of Member's support to approve this policy to enable a written resolution for this decision.</p> <p><i>Post Meeting Note: Members of the Coventry and Rugby CCG Governing Body unanimously supported adoption of the policy for Approving Pharmaceutical Industry Rebate Schemes.</i></p>	
7.	<p><u>Committee Reports for Information:</u></p> <p>Coventry and Rugby CCG Governing Body Members NOTED the following</p>	

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	<p>Committee reports:</p> <ul style="list-style-type: none"> • Audit Committee: 6th February 2018; and • Finance and Performance: 26th February 2018. • Primary Care Commissioning Committee Report – Quarter 4 <p>Warwickshire North CCG Governing Body Members NOTED the following Committee reports:</p> <ul style="list-style-type: none"> • Finance and Performance Committee: 22nd February 2018 • Clinical Quality and Governance Committee: 25th January 2018 • Audit Committee: 15th February 2018 • Joint Commissioning Committee Report – Quarter 4 <p>Both Governing Bodies NOTED the following Committees in Common Reports Clinical Quality and Governance Committee in Common: 28th February 2018 Commissioning Finance and Performance Committee in Common: 29th March 2018</p> <p>Both Governing Bodies NOTED the following minutes:</p> <ul style="list-style-type: none"> • Health and Wellbeing Board – Warwickshire: 22nd March 2018 and • Health and Wellbeing Board – Coventry: 5th February 2018. 	
8.	<p><u>Questions From Visitors:</u> Questions from visitors were:</p> <p>In relation to the Integrated Safety, Quality and Performance Report, why some of the Mixed Sex Accommodation figures quoted were not in local areas. Ms Galloway explained that it would be that the local CCG was the responsible commissioner who was commissioning care out of the locality for example if a person had fallen ill while away from home.</p> <p>Why nursing homes mentioned within the report were on escalation. Ms Galloway explained that this where homes which were being monitored more closely by the CCGs due to concerns and actions plans were in place.</p>	
9.	<p><u>Any Other Business:</u> There were no items of any other business reported.</p>	
	<p><u>Date of the Next Meeting Held in Public:</u></p> <p>Date: 12th July 2018 Time: 12pm – 1pm Venue: Heron House, Nuneaton</p>	

Signature:

(Chair CRCCG)

Date:

Signature:

(Chair WNCCG)

Date: