

Date:	8/6/17
Meeting:	Governing Body
Item Number:	Item 7.0
Public/Private:	Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>

Author: <i>(Name, Title)</i>	Sally Czabaniuk, Engagement Manager
GB Lead: <i>(Name, Title)</i>	Janice Keilthy, PPI Lay member
Director approval <i>(Name)</i>	Catherine Wylie, Director of Quality and Nursing

Report Title:	Development of North Lincolnshire CCG Patient and Community Assurance Group (PCAG)
Decisions to be made:	<p>To agree the development of the CCG Patient and Community Assurance Group including:</p> <ul style="list-style-type: none"> • Role and function • Proposed group composition • Recruitment and selection process • Reporting arrangements – governance • Leadership and staff resource • Project timetable • Confirmation that establishment of the PCAG will support the Strategic Plan

Continue to improve the quality of services	<input checked="" type="checkbox"/>	Improve patient experience	<input checked="" type="checkbox"/>
Reduced unwarranted variations in services	<input type="checkbox"/>	Reduce the inequalities gap in North Lincolnshire	<input type="checkbox"/>
Deliver the best outcomes for every patient	<input checked="" type="checkbox"/>	Statutory/Regulatory	<input checked="" type="checkbox"/>

Executive Summary (Question, Options, Recommendations):
<p>The CCG's Public and Stakeholder Engagement Strategy ratified in October 2016 by Governing Body sets out the CCG's intentions around the involvement of patients, public and stakeholders in commissioning healthcare services. The strategy includes an undertaking to explore options for the development of independent assurance of this strategy and our engagement outcomes.</p> <p>The attached paper and appendices sets out proposals for the formal establishment of the NL Patient and Community Assurance Group (PCAG) to provide independent assurance to the CCG Governing Body that effective robust structures, processes and accountabilities are in place for engagement with local people to inform the commissioning decisions of the organisation and that NLCCG appropriately and effectively fulfils the statutory duty for public involvement outlined in the Health and Social care Act (2012) and the NHS Constitution (2013)</p> <p>Documents included</p> <p>Proposal - Development of the North Lincolnshire CCG Patient and Community Assurance Group (PCAG)</p> <p>Appendix 1 – Draft Terms of Reference</p> <p>Appendix 2 – Draft Recruitment information and Expression of Interest form</p>

Equality Impact	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	(Full assessments were carried out in October 2016 of the CCG Engagement Strategy which this proposal seeks to implement)
Sustainability	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Risk	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Legal	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Finance	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

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

Development of North Lincolnshire CCG Patient and Community Assurance Group (PCAG)

1. Introduction

The CCG's Public and Stakeholder Engagement Strategy ratified in October 2016 by Governing Body sets out the CCG's intentions to not only meet its legal duties around involvement and consultation but also to effectively involve patients, public and stakeholders in commissioning healthcare services.

The following priority action is identified in the strategy:

ACTION - Patients and the public must be confident that this strategy provides accessible and meaningful opportunities to contribute to the understanding, design, delivery and on-going review of local health services.

To that end we will explore options for the development of independent assurance of this strategy and our engagement outcomes.

2. Purpose

The purpose of the NL Patient and Community Assurance Group (PCAG) will be will provide independent assurance to the CCG Governing Body that effective robust structures, processes and accountabilities are in place for engagement with local people to inform the commissioning decisions of the organisation and that NLCCG appropriately and effectively fulfils the statutory duty for public involvement outlined in the Health and Social care Act (2012) and the NHS Constitution (2013)

3. Role of the PCAG

- To oversee, challenge and hold the CCG to account around involving local people in their decision making
- To ensure that engagement with the wider community is undertaken using a wide range of methodologies to gather information and views and inform decisions
- To ensure that the CCG puts the patient and patient experience at the heart of quality improvement
- To offer practical support to new projects where community engagement is required
- To listen to, discuss and contribute to proposals/changes that are required; challenging decisions, where appropriate
- To ensure that any proposals and/or decisions regarding services, service change, etc. have had appropriate community involvement in line with best practice

4. Functions

The PCAG will not be an arena for the airing of personal issues or complaints

It is expected that the functions of this group will evolve to meet expectations however; the core functions initially will be to:

- Receive timely engagement plans for commissioning local services and respond accordingly
- Ensure that sufficient information is/was provided to enable appropriate communication and feedback
- Receive evidence that patients and the public have been appropriately involved in decisions affecting the services provided to the population of North Lincolnshire and respond accordingly (Engagement Strategy)
- Receive evidence that patient experience feedback is effectively utilised to drive quality and improvement (Patient Experience Strategy)
- Review and assess patient experience reports and ensure a lesson learnt process is in place
- Ensure patient experience is communicated appropriately to the relevant provider to enable changes to be made
- Evaluate the impact and influence of the engagement and consultation for future activity
- Receive evidence that equality and diversity is promoted during the engagement and consultation process

5. Approach

As well as providing the formal assurance element for the CCG this initiative provides a platform for wider engagement with people about their experiences and views. There is potential for formal meetings to be alternated with outreach engagement sessions at community venues across the area with members of the PCAG supporting discussions on 'hot topics' that are important to patients locally. Information gathered from these sessions 'You Said' will be considered with 'You Did' reported into the subsequent meeting of the PCAG to receive and comment upon accordingly.

We will also look at options for virtual/digital participation to increase accessibility.

Whilst it is important that the Group delivers the assurance the CCG is seeking, this group must be patient-led/focussed and we should avoid being too prescriptive in the early stages with regard to how the group will operate to enable this to evolve and develop as the group grows in competency and confidence.

6. Reporting arrangements

The objective of the PCAG is to provide clear, timely and informed feedback to local health service commissioners on both the plans for involving patients and the public, and the effective delivery and implementation of those plans. The PPI Lead on the Governing Body will chair the meetings and provide a conduit between the CCG and PCAG. Minutes from PCAG meetings will be received by the Governing Body at the next available Board meeting. The group will produce an Annual Activity report to inform the CCG's Annual Report.

7. Frequency of meetings

Meetings will be held monthly initially as the group becomes established; then bi-monthly to fall in line with the corporate governance and business planning calendar.

8. Proposed composition of the PCAG

- Community Members recruited from Embrace - 4 members per Care Network area (max 12)
- Healthwatch North Lincolnshire representative x 1
- Cloverleaf Advocacy representative
- VCSE representation x 3
- Youth Council representative

- PPI Lay Member – Chair (non-Exec Lead)
- Lay member E&D
- CCG Director of Commissioning/CCG Director of Nursing and Quality
- CCG Quality Manager
- CCG Engagement Manager
- CCG Patient Experience Manager (minute taker)

Additional people, either from NLCCG colleagues; a representative of a third party stakeholder or member(s) of the public may attend meetings - by invitation and agreement with the PCAG Chair prior to the meeting.

9. Recruitment and selection (public members)

Information about the opportunity to join the CCG's new PCAG will be circulated widely through the CCG communication networks. The Role Description (see Appendix 2) will outline the responsibilities, skills and experience required and the support provided by the CCG to enable full participation by members. People will be asked to complete an Expression of Interest which will be used to shortlist applicants invited for an informal interview with the Chair and Engagement Manager.

Community members will:

- Have a genuine interest in health and well-being in North Lincolnshire
- Be a member of Embrace and therefore living in or registered with a GP in North Lincolnshire
- Have strong links into community and social networks in North Lincolnshire

- Be able to think strategically to contribute to the change agenda in developing sustainable services for North Lincolnshire
- Have the confidence to challenge and debate with professionals from the CCG and other third parties where appropriate
- Have previous experience and engagement in formal meetings and understand how to listen, communicate and contribute effectively in meetings
- Possess the ability to use basic IT packages – Microsoft office/email (*all meeting papers and communications will be digital by default*)

10. Terms of Office

Appointments will be for a period of three years which an option for a second successive 3 year term of office subject to a dialogue between the CCG and the individual to confirm that both are content for the appointment to continue. The Terms of Reference will reflect that appointments of the first cohort of community member will have staggered terms of office to enable sustainable succession planning.

11. Recruitment (Voluntary, Community and Social Enterprise sector (VCSE))

The VCSE in North Lincolnshire is large and diverse. There is no over-arching VCSE partnership group/forum as a mechanism for public bodies to engage with the sector. The CCG engages with a number of special interest groups and Forums as part of on-going commissioning activity such as the Mental Health Collaborative, the Youth Council and the Carers Advisory Group. Having representation from the VCSE incorporated into the PCAG structure will strengthen links to the sector and support the CCG to identify and link with hard to reach communities. The composition of the PCAG will include representatives from up to 3 local and appropriate VCSE groups, the Youth Council and Healthwatch, who will be expected to feedback to their members/service users/communities.

12. Resource implications

Resources implications include initial staff support to set up and develop the group, provide on-going facilitation and business administration and some non-pay budget for meeting room and hospitality costs/volunteer out of pocket expenses/training materials and IT.

13. Risk

In the increasingly challenging environment of the NHS the CCG is facing difficult decisions about the provision of care. This Group will enable discussion with the public in relation to the risks and complex commissioning discussions.

The establishment and effective use of this structure and process will mitigate the risk of the CCG failing to meet statutory duties to involve.

The NHS Constitution was updated 2013 making it clear that local Clinical Commissioning Groups must ensure that their patients have both the opportunity and support to be more involved in their individual care and in the services available to their community; and must ensure that patient experiences form part of service quality reviews and inform commissioning decisions and contracts.

The establishment of the PCAG will enable the CCG to become more transparent in this regard and support the Strategic Plan by providing an independent review of patient and public involvement plans and outcomes.

14. Timetable

Activity	Date
Exec consideration and decision re proposal for PCAG development	15/05/17
Governing Body decision and ratification	08/06/17
Recruitment and publicity across CCG stakeholder & communications networks	1/7/17 – 31/8/17
Closing date for Expressions of Interest	08/09/17
Review and shortlisting	>15/09/17
Informal interviews	>22/09/17
Appointments confirmed	>28/09/17
Induction, training and group development	>27/10/17
Staff awareness/training	>27/10/17
First meeting	November 2017

Draft Terms of Reference (see Appendix 1)

Role Description and Expression of Interest form (see Appendix 2)

Sally Czabaniuk, Engagement Manager & Janice Keilthy, PPI Lay Member
May 2017

APPENDIX 1

NORTH LINCOLNSHIRE CLINICAL COMMISSIONING GROUP

PATIENT AND COMMUNITY ASSURANCE GROUP TERMS OF REFERENCE

1. INTRODUCTION

North Lincolnshire CCG is the NHS organisation responsible for designing, developing and buying local health services in the North Lincolnshire area.

We want to commission services that are based on the needs and priorities of our community and ensure that our providers deliver high quality patient-centred care. To do this we will work with people in our communities to ensure that the voices of the people living and working here play a very real part in the shaping, planning and improving of our local NHS funded services.

Our Vision for Engagement is to improve the health and wellbeing of the local population, reduce inequalities and commission high quality, safe and sustainable health care by building strong relationships with stakeholders and effective methods of public and patient involvement.

2. PURPOSE

North Lincolnshire Patient and Community Assurance Group (PCAG) will provide independent assurance that patients and the public of North Lincolnshire have the opportunity to contribute to the understanding, design, delivery and on-going review of local health service. The group will provide an independent review of patient and public involvement plans and comment and feedback, as appropriate, on their suitability for the purpose of improving the health and wellbeing of the local population, local communities and individuals.

3. ROLE

- To oversee, challenge and hold the CCG to account around involving local people in their decision making
- To ensure that engagement with the wider community is undertaken using a wide range of methodologies to gather information and views and inform decisions
- To ensure that the CCG puts the patient and patient experience at the heart of quality improvement
- To offer practical support to new projects where community engagement is required
- To listen to, discuss and contribute to proposals/changes that are required; challenging decisions, where appropriate
- To ensure that any proposals and/or decisions regarding services, service change, etc. have had appropriate community involvement in line with best practice

4. MEMBERSHIP

4.1. Community:

Public members - 4 per Care Network area to a maximum of 12
Healthwatch North Lincolnshire representative

Cloverleaf Advocacy Representative
Youth Council representative
Representatives from 3 local and appropriate Third Sector organisations

4.2. CCG:

Chair, who is the CCG Patient and Public Involvement Lay Member of the Board or another nominated North Lincolnshire CCG Board member
CCG Lay member for Equality and Diversity
CCG Director of Commissioning/CCG Director of Nursing and Quality
CCG Engagement Manager
CCG Quality Manager
CCG Patient Experience Manager (minute taker)

4.3. Officers of partner organisations or members of the public may attend the PCAG by invitation and prior agreement with the chair.

4.4. The CPAG may request the attendance of any member of staff or senior/clinical lead from the CCG or outside organisations as and when appropriate.

5. APPOINTMENT OF COMMUNITY MEMBERS

- 5.1.** Appointment of public members is via Expression of Interest and informal interview with the Chair and CCG representatives
- 5.2.** Healthwatch and North Lincolnshire Youth Council will nominate a named representative and one alternate
- 5.3.** Appointment of Third sector representation will be via Express of Interest and informal discussions with the CCG

6. TERMS OF OFFICE

- 6.1.** Appointments will be for a period of three years which an option for a second successive 3 year term of office subject to a dialogue between the CCG and the individual to confirm that both are content for the appointment to continue
- 6.2.** The first public member appointments upon establishment of the group will be staggered to enable sustainable succession planning
- 6.3.** Where a member is absent from more than three consecutive meetings without reasonable excuse the Chair will make contact to discuss the reasons for absence and commitment to the role; this may result in termination of appointment
- 6.4.** Where a member is unable to fully carry out their role due to ill health or personal matters they may be granted an extended leave of absence in agreement with the Chair
- 6.5.** Where a vacancy occurs before completion of the three year term this will be filled through the recruitment and selection process described above
- 6.6.** Where the CCG deems that a PCAG member is not effectively carrying out their role and cannot be supported to remedy that fact, or that they are in breach of the PCAG Code of Conduct - then they will be removed from office with immediate effect

7. QUORUM

7.1. CPAG meetings will be quorate if any six members are present including the Chair and/or the Vice Chair

8. FREQUENCY OF MEETINGS

- 8.1. CPAG will meet monthly for the first 6 months of establishment and thereafter bi-monthly to correspond with the CCG corporate governance and business planning calendar.
- 8.2. Meetings will be planned for the calendar year ahead to encourage full attendance.
- 8.3. Decisions may be taken or comments requested between physical meetings through email, teleconference or other 'virtual' means. Any such decisions and or comments will be recorded and taken to the following meeting for information.

9. REPORTING ARRANGEMENTS

- 9.1. The objective of the PCAG is to provide clear, timely and informed feedback to local health service commissioners on both the plans for involving patients and the public, and the effective delivery and implementation of those plans.
- 9.2. The PPI Lead on the Governing Body will chair the meetings and provide a conduit between the CCG and PCAG.
- 9.3. Minutes from PCAG meetings will be received by the Governing Body at the next available Board meeting.
- 9.4. The group will produce an Annual Activity report to inform the CCG's Annual Report.

10. ADMINISTRATIVE ARRANGEMENTS

- 10.1. Administrative support will be provided to the by the Business Support Team.
- 10.2. The Chair of the PCAG, Executive Lead and the Engagement Lead will draw up the agenda for each meeting.
- 10.3. The agenda and papers will be distributed digitally five working days in advance of the meeting.

11. REMUNERATION

- 11.1. Remuneration out of pocket expenses will be paid in accordance with the CCG Reimbursement Policy and procedure.

12. CONFLICTS OF INTEREST

- 12.1. All members will be required to make a declaration of interest about any items of business to be discussed where they feel their interest might in any way prejudice their contribution.

13. DATE OF TERMS OF REFERENCE RATIFICATION BY GOVERNING BODY

14. DATE OF EFFICACY REVIEW AND FREQUENCY

- 14.1. The Patient and Community Assurance Group will undertake a review annually of its efficacy as a group and how well it meets its Terms of Reference

APPENDIX 2

Make a difference to local NHS services

Join Our Team!

We are looking for enthusiastic local people to join our **new** Patient and Community Assurance Group (PCAG) and help make a real difference to the way local NHS services are developed and improved.

About North Lincolnshire Clinical Commissioning Group

North Lincolnshire Clinical Commissioning Group (NLCCG) is responsible for planning and buying local health services and ensuring that the NHS provides high quality healthcare.

The main role of a CCG is to commission healthcare services on behalf of local people. This means that we work with patients and carers, the public and other organisations like North Lincolnshire Council to decide what services are needed locally. We then develop contracts with local organisations such as hospitals and community groups to provide these services.

We work closely with GP practices, hospital trusts, social services, mental health services, the independent sector and community and voluntary organisations to make sure health and wellbeing services meet the needs of local people.

What is involvement?

We involve local people in helping us to improve local health services. We do this by inviting people to take part in developing, evaluating and monitoring our local health services. This is called Patient and Public Involvement (PPI).

People get involved in lots of different ways by

- Joining Embrace the CCG's Patient Engagement Network
- Participating in our twice-yearly Health Matters public engagement events
- Joining their GP practice Patient Participation Group (PPG)
- And now as members of the new Patient and Community Assurance Group

What will the assurance group do?

The members of the assurance group are volunteers and not paid employees.

The group will help us to make sure that we are properly involving and listening to patients, carers and members of the public when we develop new and existing health services, or in some cases, discontinue services. Specifically the role of the PCAG is:

- To oversee, challenge and hold the CCG to account around involving local people in their decision making.
- To ensure that engagement with the wider community is undertaken to gather information and views and inform decisions
- To ensure that the CCG puts the patient and patient experience at the heart of quality improvement
- To offer practical advice to new projects where community engagement is required

- To listen to, discuss and contribute to proposals/changes that are required; challenging decisions, where appropriate
- To ensure that any proposals and/or decisions regarding services, service change, etc. have had appropriate community involvement

The group is chaired by a lay person with responsibility for PPI who has been appointed to our Board and consists of up to 12 members of the public from across North Lincolnshire; plus three representatives from the Voluntary Sector and two nominated representatives from Healthwatch and the Youth Council respectively.

The assurance group is not an arena for the airing of personal issues or complaints.

What will members do?

The role of members of the assurance group is to play an important part in ensuring that patients, carers and the public are involved in decisions made about healthcare services in North Lincolnshire. The specific duties of the role include;

- Regularly attending meetings which usually last for 2 hours and take place monthly
- Preparing for the meeting by reading the papers provided
- Actively participating in the meetings where members will:
 - Receive information about engagement plans for commissioning local services and comment accordingly
 - Receive evidence that patients and the public have been appropriately involved in decisions affecting the services provided to the population of North Lincolnshire and respond accordingly (Engagement Strategy)
 - Receive evidence that patient experience feedback is effectively utilised to drive quality and improvement (Patient Experience Strategy)
- Bringing their individual experience and knowledge of involving people to the discussion
- Assisting the group to focus its attention on assurance and process
- Taking a broad population perspective in their considerations
- Helping the group focus on the most important issues
- Making clear and specific recommendations

What are the benefits of being an assurance group member?

The assurance group is also a great opportunity for anyone wishing to gain experience of the NHS and how it works.

Training

Members will attend an induction session where they will learn about the role of patient and public involvement and how it plays an important role in developing and delivering local health services.

On-going Support

Members will be supported to develop in their role and will have regular opportunities to discuss their training or development needs.

Expenses

We are committed to ensuring that all patients, carers and members of the public are reimbursed for out-of-pocket expenses. All assurance group members will be entitled to claim reasonable expenses to cover childcare, carer and travel costs (for example bus fare or car mileage to cover fuel costs) in accordance with the CCG's Reimbursement Policy.

What qualities do I need to be a member?

To join the group you must be:

- **A member of Embrace NLCCG Patient Engagement network**
Anyone who is registered with a GP in North Lincolnshire can join Embrace, it is free and Embrace members receive information about opportunities to influence healthcare plans, <http://www.northlincolnshireccg.nhs.uk/get-involved/embrace-patient-network/>
- **Committed to the work of the group**
Members are expected to actively participate in meetings which focus on improving the quality of services. There may be additional meetings with commissioning teams, programme meetings or project groups. The time commitment required will vary depending on the needs of relevant meetings, but is estimated to be about four hours each month which will include time to read and digest meeting papers and reports.
- **Willing to represent a range of different people**
Members of the group will need to have an understanding of the needs and backgrounds of others and be aware that they are representing of a variety of different groups of people; and will have strong links into community and social networks in North Lincolnshire
- **A good communicator**
All members will need strong verbal communication skills. As well as giving their views on a range of subjects members will be expected to listen to the views of other group members and engage in open and honest debate. Ideally members will also have experience of being a patient, service user or carer within a public sector organisation. For example, this could be in the NHS, local authority, or voluntary sector.
- **Knowledge and understanding of patient and public involvement perspectives**
Members will be supported to gain an understanding of the relevance of patient and public involvement on the work of North Lincolnshire Clinical Commissioning Group, and to be able to raise a broader range of considerations beyond their own personal experience.
- **Able to work closely with others**
Assurance group members will be required to develop a close working relationship with one another. This includes the PPI Lay member chairing the group and the North Lincolnshire CCG staff and commissioning teams.
- **Basic knowledge of IT**
All meeting papers are distributed by email and communications between meetings will be by email. Members must be able to use IT equipment and have an email address for this

purpose. Where required the CCG will support the member to access basic IT training plus the loan of IT equipment. The CCG is happy to use a range of communications including text and telephone, but will not routinely send meeting papers by post.

It is also desirable for PCAG members to have:

- Experience of participating in formal meetings and committees where there is a routine expectation for group members to prepare and comment upon meeting papers that may be complex.

How to apply?

Simply complete and return the Expression of Interest form provided with as much detail as possible.

You will be required to declare any interests you may have upon application and/or as they arise. Group members will be expected to follow the Code of Conduct and Confidentiality policies.

We will carefully consider all of the applications we receive. Once we have received your application we will let you know when we plan to hold some informal interviews to discuss the assurance group and what you feel you could bring to the group.

For more information or for an informal discussion please contact:

Janice Keilthy PPI Lay Member

Janice.keilthy@nhs.net

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Sally Czabaniuk, Engagement Manager

Sally.czabaniuk@nhs.net

0300 3000 565

The deadline for applications for the Patient and Community Assurance Group is **September 8th, 2017**

Applications should be submitted by email to: Nlccg.embrace@nhs.net

Express of Interest – Patient and Community Assurance Group

Tell us a little about yourself		
Name:	Mrs/Mr/Ms/Miss	
Address:	Postcode:	
Telephone:	Home:	Mobile:
Email address:		
GP Practice		

Have you been or are you involved in any patient or service user groups?		
	No <input type="checkbox"/>	Yes <input type="checkbox"/>
If yes, please provide details:.....		

Please provide a brief summary of any relevant skills and experience you could bring to our group (max 400 words)
<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>

Declaration of Interest
<p>Please use this section to declare any interests you may have which are relevant to the North Lincolnshire CCG Assurance Group (Any interests declared will not necessarily impact on your ability to participate in the group.</p> <p>“Interests” include, but are not limited to:</p> <ul style="list-style-type: none"> • Directorships/Non-Executive Directors in private companies/PLC providing or potentially providing services to or commissioning with the NHS • Ownership, part ownership of companies/consultancies likely to do business with the NHS • Shareholdings in businesses likely to do business with the NHS • A position of trust in a charity/voluntary organisation in health or social care • A position on a forum or group either within or external to the NHS • Any organisation or commercial interest contracting for NHS services <p>Please detail any relevant interests (please feel free to continue on a separate sheet):</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>

Please sign and date to confirm all of the above details are correct.

Signature.....
 Date.....