



Hambleton, Richmondshire  
and Whitby  
Clinical Commissioning Group

## Hambleton, Richmondshire and Whitby Clinical Commissioning Group

### Audit and Integrated Governance Committee Meeting

#### Confirmed minutes

**Date:** Thursday 30 August 2018

**Time:** 9.30 – 12.30pm

**Location:** Board Room 2, HRW CCG

#### Members:

Name	Initials	Role
Ken Readshaw - Chair	KR	Lay Member, HRW CCG
Jim Hayburn	JH	Interim Chief Finance Officer, HRW CCG
Linda Lloyd	LL	Lay Member for Patient & Public Involvement
Dr George Campbell	GCa	GP Governing Body Member, HRW CCG

#### Required attendees:

Sharron Blackburn	SBB	Deputy Head, Internal Audit
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#### Attendees:

Steve Moss (part)	SM	Counter Fraud Manager, Audit Yorkshire
Angela Edmunds	AED	Deputy Chief Nurse, HRW CCG
Cathy Tobin (minutes)	CT	Committee Secretary, HRW CCG

#### Apologies:

Dr Charles Parker	CP	Clinical Chair, HRW CCG
Stephen Brown	SB	Managing Partner, Leyburn Medical Practice
Alison Levin	AL	Deputy Chief Finance Officer, HRW CCG
Anne Ellis Playfair	AEP	Audit Manager, Internal Audit
Gill Collinson	GCo	Chief Nurse, HRW CCG
Ross Woodley	RW	Audit Manager, Mazars
Mark Kirkham	MK	Partner, Mazars

Item No.	Agenda Item	Actions
1.	<p><b><u>Chair's Welcome &amp; Apologies</u></b></p> <p>KR opened the meeting and welcomed the Committee members.</p> <p>Apologies as above.</p>	
2.	<p><b><u>Declarations of Interest, Gifts &amp; Hospitality</u></b></p> <p>KR reminded committee members of their obligation to declare any interest they may have on any issues arising at AIG committee meeting which might conflict with the business of HRW CCG Clinical Commissioning Group.</p> <p>Declarations declared by members of the Audit and Integrated Governance Committee are listed in the CCG's Register of Interests. The Register is available either via the secretary to the governing body</p>	

	<p>or the CCG website at the following link: <a href="Y:\HRWCCG\HR&amp;W Clinical Commissioning Group\Corporate\Declaration of Interest\HRWCCG Register\2017-18\Register\April 2017\COI Register April 2017 web version.pdf">Y:\HRWCCG\HR&amp;W Clinical Commissioning Group\Corporate\Declaration of Interest\HRWCCG Register\2017-18\Register\April 2017\COI Register April 2017 web version.pdf</a></p> <p><b>Declarations of interest from today's meeting</b></p> <p>No further changes to declarations of interest were declared from members of the Committee present in accordance with the CCG constitution.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above.</li> </ol>	
<p>3.</p>	<p><b><u>Minutes of the last meeting (Thursday 7 June 2018) and matters arising</u></b></p> <p>The minutes of the meetings held on Thursday 7 June 2018 were reviewed for accuracy which the Committee agreed and approved.</p> <p>KR informed the Committee that he had not provided a list of key messages from the meeting to the Governing Body as there had recently been input to the Governing Body from the annual AIG Committee meeting.</p> <p>All other actions were noted as complete and the action log was updated accordingly.</p> <p><b>The Committee</b></p> <ol style="list-style-type: none"> <li>1. Noted the above.</li> </ol>	
<p>4.</p>	<p><b><u>Update and Assurance</u></b></p> <p>JH verbally updated the Committee on the two key risks being; CHC and the new Joint QF &amp; P Committee meeting.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above.</li> </ol>	
<p>5.</p>	<p><b><u>Review Assurance Framework</u></b></p> <p>JH presented the Review Assurance Framework for the Committee to note. KR queried Item 2.2: 'If the CCG cannot afford to buy the services it needs. Quality could be compromised'. KR asked that it be included within the financial position going forward.</p> <p>KR also queried Item 3.2: 'The CCG has insufficient capacity to deliver it's objectives' and raised concern with the reduction in capacity going forward together with the introduction of one Accountable Officer over the three CCGs. KR raised concern that as a result of the organisational change it carries a significant number of risks and therefore suggested</p>	

	<p>additional resource for a plan to be drafted detailing how the future ways of working would benefit HRW CCG. JH agreed to feedback these concerns as part of the consultation process.</p> <p>Item 3.5: There was concern that ‘The constituent GP member practices do not adequately engage with the CCG in it’s workplans and programmes to change services for the better’. KR raised concern about member practices and how it could be mitigated.</p> <p>A discussion took place and GCa suggested that the Commissioning Managers visit practices to help mitigate the risk. JH confirmed he will add into the assurance framework.</p> <p>LL also queried the risk and explained that practices appear to have a lack of knowledge in relation to the step up step down bed service but is in discussion with Shirley Moses and confirmed that it will be taken up at the next practice manager meeting.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above.</li> <li>2. Item 2.2: ‘The CCG cannot afford to buy the services it needs. Quality is compromised’. KR asked that it be included within the financial position going forward.</li> <li>3. Item 3.2: ‘The CCG has insufficient capacity to deliver it’s objectives’. JH will raise these concerns as part of the consultation process and will feedback at the next meeting re capacity to delivery organisational change.</li> <li>4. Item 3.5: ‘The constituent GP member practices do not adequately engage with the CCG in it’s workplans and programmes to change services for the better’. JH confirmed he will add practice visits into the assurance framework.</li> </ol>	
<p><b>6.</b></p>	<p><b><u>Review Risk Statement and Risk Register</u></b></p> <p>JH presented the risk register and highlighted the Friarage Hospital as the biggest risk. JH confirmed that information had been given to the Trust about a public consultation and that there was a lot to be considered and that the Trust were still looking into it.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above.</li> </ol>	
<p><b>7.</b></p>	<p><b><u>Review of Legal / Regulatory Services</u></b></p> <p>JH presented the Legal / Regulatory Services update on behalf of Charlotte Smith.</p> <p>LL stated that some parts of the paper were difficult to understand due to the number of abbreviations which KR agreed and confirmed that future papers would need to be reviewed for abbreviations.</p> <p><b>The Committee:</b></p>	

	1. Noted the contents of the report.	
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<p>8.1</p>	<p><b><u>Policies for approval – Risk Management Policy</u></b></p> <p>JH presented the updated Risk Management Policy which included minor amendments; a mitigated risk score added and amended Head of Finance, Governance and Business Support Services to Deputy Chief Finance Officer.</p> <p>JH sought approval for the amendments and the Committee approved the policy.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above and approved the amendments.</li> </ol>	
<p>8.2 &amp; 8.3</p>	<p><b><u>Policies for approval – Business Continuity Plan (BCP) &amp; Incident Response Plan (IRP)</u></b></p> <p>JD attended to present the annual Business Continuity Plan (BCP) and the Incident Response Plan (IRP) updated documents.</p> <p>JD updated that only minor changes had been made to the current BCP and IRP documents reflecting the latest HRW CCG structure and staff list.</p> <p><u>Exercise and testing</u></p> <p>JD stated that HRW CCG “on call” directors are required to participate in a “live” exercise every three years - Janet Probert and Gill Collinson had participated in such an exercise during December 2017.</p> <p><u>Communication exercise</u></p> <p>JD stated that a communication exercise is required every six months, with the last test exercise being October 2017. JD confirmed that a real event had taken place in February 2018 under which the communications cascade was utilised and therefore a further test exercise was due in October 2018 which was currently being planned with the CCGs AEO and CO.</p> <p>The CCG was also required to undertake a table top exercise every 12mths and were also compliant against this EPRR standard with the last table top exercise (SMT member participation) in November 2017.</p> <p><u>Emergency Prepared Resilience</u></p> <p>JD updated the Committee that the annual national EPRR self-assessment exercise was currently underway for 2018/9 - HRW CCG were assessed as having “substantial compliance” during the 2017/18 exercise.</p> <p>LL highlighted to the Committee that there were no contact numbers included for Jim Hayburn – JD to populate.</p> <p>JD asked the Committee to review, acknowledge and agree the 2018 updated versions of the BCP and IRP documents, which the Committee approved.</p> <p><b>The Committee:</b></p>	

	<ol style="list-style-type: none"> <li>1. Noted the above and approved the updated versions.</li> <li>2. Business Continuity Plan &amp; Incident Response Plan – JD confirmed he will present updates to the Committee on a yearly basis – CT to update the timetable.</li> <li>3. LL highlighted to the Committee that there were no contact numbers included for Jim Hayburn – JD to populate.</li> </ol>	
<p><b>8.4</b></p>	<p><b><u>Policies for approval - Absence Management Policy</u></b></p> <p>JH presented the Absence Management Policy and highlighted one change; the first instance of certified sickness in a rolling year would not count in the stage process.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above and approved the policy.</li> </ol>	
<p><b>9.</b></p>	<p><b><u>Review Public Registers: Contracts Awarded, Register of Interests, Tenders, Waivers and Procurement and Conflict of Interest</u></b></p> <p>JH presented the Gifts &amp; Hospitality and Conflict of Interest registers to the Committee which were approved.</p> <p><u>End of Life (EOL) Tender Waiver</u></p> <p>JH presented the EOL tender waiver for information following the award of the contract and explained that it had already been presented to the Governing Body.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above and approved both the Gifts &amp; Hospitality and Conflict of Interest registers.</li> </ol>	
<p><b>10.</b></p>	<p><b><u>Review Assurance from Embed</u></b></p> <p>JH presented the Review Assurance paper from Embed and explained that he and Paul Donnelly were working on management requirements for the service. JH confirmed that Scarborough and Ryedale CCG will be appointing a new staff member who will work with HRW CCG going forward. JH will continue to update the Committee on the situation.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above.</li> </ol>	
<p><b>11.</b></p>	<p><b><u>IGSG Minutes</u></b></p> <p>JH presented the IGSG minutes from 14 June 2018 for the Committee to note.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the IGSG minutes from 1 May 2018.</li> </ol>	



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12.	<p><b><u>Staff Workforce Report</u></b></p> <p>JH presented the Staff Workforce report for the Committee to note.</p> <p><b>The Committee:</b></p> <p>1. Noted the above.</p>	
13.	<p><b><u>Staff Survey Action Plan</u></b></p> <p>AED presented the Staff Survey action plan and updated that the majority of actions were either green, completed or in progress.</p> <p>AED also confirmed that systems have been implemented to help prevent bullying and harassment in the workplace and that it would be down to individuals and their line managers to address any issues going forward.</p> <p>A discussion took place about the staff survey questions not being bespoke to HRW CCG and AED confirmed that the questions were set nationally.</p> <p><b>The Committee:</b></p> <p>1. Noted the above.</p>	
14.	<p><b><u>Joint Working Arrangements</u></b></p> <p>JH verbally updated on the two joint working arrangements as detailed below:</p> <p><u>North Yorkshire CCGs joining</u></p> <p>JH updated the Committee that a proposal for the public consultation for the one Accountable Officer post to cover the three CCGs had been issued.</p> <p><u>Joint working with S.Tees CCG and the Aligned Incentive Contract</u></p> <p>JH confirmed that the Joint Terms of Reference had been drafted and that a joint plan of works will be drafted between HRW CCG and S.Tees. JH also confirmed that commissioning support would be provided to HRW CCG due to HRW CCG being in special measures.</p> <p><b>The Committee:</b></p> <p>1. Noted the above.</p>	
15a.	<p><b><u>Review of QF &amp; P Terms of Reference</u></b></p> <p>JH presented the QF &amp; P Terms of Reference which the Committee approved.</p> <p><b>The Committee:</b></p> <p>1. Noted the above and approved the QF &amp; P Terms of Reference.</p>	



<p><b>15b.</b></p>	<p><b><u>Joint Finance Committee Terms of Reference</u></b></p> <p>JH presented the Joint Finance Committee Terms of Reference (ToR) and explained that it had been drafted following the implementation of the aligned incentive contract.</p> <p>LL asked if the title could be amended to fully explain what the document was – JH to review.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above.</li> <li>2. Joint Finance Committee Terms of Reference - LL asked if the title could be amended to fully explain what the document was – JH to review.</li> </ol>	
<p><b>16.</b></p>	<p><b><u>Q,F &amp; P Minutes</u></b></p> <p>JH presented the QF &amp; P minutes from the meetings held on 17 May and 28 June 2018.</p> <p>KR worked through both sets of minutes and identified the key messages to the AIG Committee.</p> <p>KR queried the new weekly meeting that highlights QF &amp; P issues and JH confirmed that the topics varied between meetings.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the QF &amp; P minutes from 17 May &amp; 28 June 2018.</li> </ol>	
<p><b>17.</b></p>	<p><b><u>Review of Quality and Safety Minutes</u></b></p> <p>AED presented the minutes from the meeting held on 23 May 2018 for the Committee to note and updated the Committee on the following issues:</p> <p><b><u>MRSA</u></b></p> <p>Currently had one case but was unable to identify it's cause.</p> <p><b><u>Mediquip and Wheelchair process</u></b></p> <p>AED confirmed that the current process was not clear therefore new processes would be put in place.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the Q &amp; S minutes from 23 May 2018.</li> </ol>	
<p><b>18.</b></p>	<p><b><u>Update and Assurance</u></b></p> <p>AED verbally updated the Committee regarding quality updates and assurance and confirmed the following:</p>	

	<ol style="list-style-type: none"> <li>1. As part of Enhanced Health in Care Homes (EHCH) framework, React to Red resources had been distributed to all care homes in the area to help with reducing pressure ulcers.</li> <li>2. Implementation plans are underway for the Red Bag Scheme (Hospital Transfer Pathway) to be circulated. These initiatives demonstrate move to more effective partnership working across health and social care to improve care of vulnerable people.</li> <li>3. Work also complements red 'frailty' folders that have been circulated previously to support individualised care planning and multidisciplinary team approach.</li> </ol> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above update.</li> </ol>	
<p>19.</p>	<p><b><u>Review of Comms and Engagement Dashboard (FOI and Complaints)</u></b></p> <p>AED presented the Comms &amp; Engagement dashboard and confirmed that no further complaints had been received about Mediquip or wheelchairs. However complaints have been received about repeat prescriptions following a leaflet drop by the medicine's management team reiterating that prescriptions can only be issued to the patient / nominated representative.</p> <p>KR queried what the Catterick event was whereby 40 members of the public had attended – AED will investigate and update the Committee.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above update.</li> <li>2. KR queried what the Catterick event was whereby 40 members of the public had attended – AED will investigate and update the Committee.</li> </ol>	
<p>20.</p>	<p><b><u>External Audit – Annual Audit Letter</u></b></p> <p>KR presented the Annual Audit Letter for the Committee to note.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above.</li> </ol>	
<p>21.</p>	<p><b><u>Internal Audit Progress Reports (previously internal audit and periodic reports)</u></b></p> <p>SBB attended the meeting on behalf of Anne Ellis-Playfair who had left and informed the Committee that her replacement 'Kim Betts' was due to start on Thursday 6 September 2018.</p> <p>SBB updated the Committee that work had commenced on the plan and that activity was progressing with the delivery of the majority of the plan on time.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the Internal Audit Progress Report.</li> </ol>	



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<p>22.</p>	<p><b><u>Audit Recommendations Status</u></b></p> <p>SBB presented the Audit Recommendation Status Report which provided a summary of the audit recommendations awaiting implementation and of those completed since the last report.</p> <p>SBB updated the Committee that there were eight outstanding actions that related to the previous PCU functions for which an update had not been received but confirmed she would update the Committee once the updates have been received.</p> <p>KR questioned the assurance process for former PCU functions from other CCGs through the chief nurse mechanism and JH confirmed that it was still work in progress. AED assured JH that it was being discussed as part of the Quality and Safety Committee meeting.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above.</li> <li>2. Previous PCU functions – SBB updated the Committee that there were eight outstanding actions that related to the previous PCU functions for which an update had not been received but confirmed she would update the Committee once the updates have been received.</li> </ol>	
<p>23.</p>	<p><b><u>Internal Audit Charter</u></b></p> <p>SBB presented the Internal Audit Charter to the Committee to note and explained that it had been presented to the Committee the previous year and that no further changes had been made.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above.</li> </ol>	
<p>24.</p>	<p><b><u>Review of Internal and External Audit</u></b></p> <p><u>External and Internal Audit</u></p> <p>KR sought opinion from the Committee members about the services provided by both external and internal audit. Committee members that were present at the meeting confirmed they were happy with the services provided. KR will catch up with Alison Levin on her return from leave.</p> <p><u>Internal Audit</u></p> <p>JH suggested a meeting with himself and KR when Anne Ellis-Playfair's replacement is in post (Kim Betts).</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above.</li> <li>2. External and Internal audit – KR sought opinion from the Committee members about the services provided by both external and internal audit. Committee members that were present at the meeting confirmed they</li> </ol>	

	<p>were happy with the services provided. KR will catch up with Alison Levin on her return from leave.</p> <p>3. Internal Audit - JH suggested a meeting with himself and KR when Anne Ellis-Playfair's replacement is in post (Kim Betts) – CT to set up.</p>	
<p><b>25.</b></p>	<p><b><u>Counter Fraud Progress Report</u></b></p> <p>SM presented the Counter Fraud Progress report and updated as highlighted below:</p> <ul style="list-style-type: none"> <li>▪ The Team have undertaken a number of fraud awareness activities, including the publication of the most recent edition of the anti-crime newsletter and liaison with the Communications and Engagement Team, resulting in the introduction of a counter fraud subsite, which is accessible via the CCG's website: <a href="https://www.hambletonrichmondshireandwhitbyccg.nhs.uk/counter-fraud">https://www.hambletonrichmondshireandwhitbyccg.nhs.uk/counter-fraud</a></li> <li>▪ The Team also held a Counter Fraud 'drop in session' at HRW CCG.</li> <li>▪ SM informed the Committee members of a fraud at another Audit Yorkshire client concerning a successful attempt to change a supplier's bank details and divert a payment to the fraudster's account. As a result of the incident the team circulated an alert to all of Audit Yorkshire's clients.</li> </ul> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above.</li> </ol>	
<p><b>26.</b></p>	<p><b><u>Counter Fraud Review Report</u></b></p> <p>SM updated the Committee with the findings of the August 2018 quality assessment by NHS Counter Fraud Authority as highlighted below:</p> <p>Assessors were happy with the assessment with only one change from partially to fully compliant. The two standards that were marked as partially compliant now require an action plan, which JH will update the Committee on when drafted. SM noted that actions had already been incorporated into the Annual Counter Fraud Plan 2018/19.</p> <p>SM thanked the organisation for their help during the visit.</p> <p>LL suggested that a guidance sheet to help identify counter fraud would be useful.</p> <p><b>The Committee:</b></p> <ol style="list-style-type: none"> <li>1. Noted the above.</li> <li>2. NHS Counter Fraud Authority Quality Assessment action plan - The two standards that were marked as partially compliant now require an action plan - JH will update the Committee when drafted.</li> </ol>	

27.	<p><b><u>Emerging Issues for Discussion</u></b></p> <p>KR informed the Committee that although HRW CCG were in special measures it did not hold any statutory obligations and that NHSE were purely observers to provide support to HRW CCG.</p> <p><b>The Committee:</b></p> <p>1. Noted the above.</p>	
28.	<p><b><u>Key Messages to the Governing Body</u></b></p> <p>KR advised he would produce a list of key messages to be presented at the next Governing Body meeting on Thursday 27 September 2018.</p> <p><u>Key messages from the June meeting as detailed below:</u></p> <p>Annual internal audit plan agreed</p> <p>The following internal audit reports were received</p> <p>Commissioning support and contract management, information governance toolkit, conflicts of interest, budgetary control and key financial controls. All significant assurance</p> <p>CQUIN High assurance</p> <p>Continuing healthcare financial data. Limited assurance.</p> <p><u>Key messages from the August meeting as detailed below:</u></p> <p>Assurance framework reviewed</p> <p>Risk appetite considered. GB risk workshop to be considered</p> <p>Approved risk management policy, absence management policy and public registers</p> <p>Received business continuity plan and incident response plan for assurance</p> <p>Considered North Yorkshire move towards a single accountable officer and asked for a recommendation to be made to NHS England that a resource is provided to work on the proposed organisational and governance changes as soon as possible to reduce risks around loss of capacity and local focus.</p> <p>Approved Joint South Tees / HRW finance committee terms of reference</p> <p>Received the annual audit letter from Mazars. No change from previously reported position.</p> <p>Internal audit report on PCU transition, Significant assurance, but doesn't discuss reporting arrangements to CCGs. Suggestion that this is done via SLAs between the CCGs.</p>	

	<p>Counter fraud. HRW selected for audit by NHS quality and compliance unit. Auditors agreed with our self assessment apart from standard 2.1 (staff fraud awareness). We were upgraded to fully compliant from partially compliant. Thanks to Steve Moss, Jim Hayburn and Carol Johnston</p> <p><b>The Committee:</b></p> <p>1. Noted the above.</p>	
	<p>KR closed the meeting at 11.35am.</p>	
	<p><b>Date and time of the next meeting:</b> Thursday 6 December: 9.30 – 12.30pm, Board Rm 2, HRW CCG.</p>	

**Audit & Integrated Governance**

**ACTION LOG as at Thursday 30 August 2018**

Ref	Meeting date	Item	Description	Member Responsible	Action completed / due to be completed
241	07/09/18	16	<p><b><u>Q,F &amp; P Minutes</u></b></p> <p>Governing Body development sessions to include more detailed explanation of the financial position.</p> <p><b>30/08/18</b> – JH confirmed he will present a detailed explanation of the key risk areas to the next Governing Body meeting.</p>	<p>CP</p> <p>JH</p>	<p>6 December 2018</p>
244	30/08/18	5	<p><b><u>Review Assurance Framework</u></b></p> <p><b>Item 2.2: ‘The CCG cannot afford to buy the services it needs. Quality is compromised’.</b> KR asked that it be included within the financial position going forward.</p> <p><b>Item 3.2: ‘The CCG has insufficient capacity to deliver it’s objectives’.</b> JH will raise these concerns as part of the consultation process and will feedback at the next meeting re capacity to delivery organisational change.</p> <p><b>Item 3.5: ‘The constituent GP member practices do not adequately engage with the CCG in it’s workplans and programmes to change services for the better’.</b> KR raised concern about member practices and how it could be mitigated. A discussion took place and GCa suggested that the Commissioning managers visit practices to help mitigate the risk. JH confirmed he will add practice visits into the assurance framework.</p>	<p>JH</p> <p>JH</p> <p>JH</p>	<p>6 December 2018</p> <p>6 December 2018</p> <p>6 December 2018</p>



245	30/08/18	8.2 & 8.3	<p><b><u>Policies for approval – Business Continuity Plan and Incident Response Plan (BCP)</u></b></p> <p><b>Business Continuity Plan &amp; Incident Response Plan</b> – JD confirmed he will present updates to the Committee on a yearly basis – CT to update the timetable.</p> <p>LL highlighted to the Committee that there were no contact numbers included for Jim Hayburn – JD to populate.</p>	CT JD	6 December 2018 6 December 2018
246	30/08/18	15b	<p><b><u>Joint Finance Committee Terms of Reference</u></b></p> <p>Joint Finance Committee Terms of Reference - LL asked if the title could be amended to fully explain what the document was – JH to review.</p>	JH	6 December 2018
247	30/08/18	19	<p><b><u>Review of Comms and Engagement Dashboard (FOI and Complaints)</u></b></p> <p>KR queried what the Catterick event was whereby 40 members of the public had attended – AED will investigate and update the Committee.</p>	AED	6 December 2018
248	30/08/18	22	<p><b><u>Audit Recommendations Status Report</u></b></p> <p>Previous PCU functions – SBB updated the Committee that there were eight outstanding actions that related to the previous PCU functions for which an update had not been received but confirmed she would update the Committee once the updates have been received.</p>	SBB	6 December 2018
249	30/08/18	24	<p><b><u>Review of Internal and External Audit</u></b></p> <p><b>External and Internal audit</b> – KR sought opinion from the Committee members about the services provided by both external and internal audit. Committee members that were present at the meeting confirmed they were happy with the services provided. KR will catch up with Alison Levin on her return from leave.</p>	KR	6 December 2018

			<b>Internal Audit</b> - JH suggested a meeting with himself and KR when Anne Ellis-Playfair's replacement is in post (Kim Betts) – CT to set up.	CT	6 December 2018
250	30/08/18	26	<p><b><u>Counter Fraud Review Report</u></b></p> <p>NHS Counter Fraud Authority Quality Assessment action plan - The two standards that were marked as partially compliant now require an action plan - JH will update the Committee when drafted.</p>	JH	6 December 2018



237	07/06/18	6	<p><b><u>Review AIG Timetable and Workplan</u></b></p> <p>AEP requested that the Internal Audit Charter be included within the AIG timetable and for it to be presented at the September meeting on a yearly basis – CT to update and issue the timetable.</p>	CT	30 August 2018
238	07/06/18	7	<p><b><u>Review Assurance Framework</u></b></p> <p>RAG rating going forward - KR requested that joint working and increased delegation of primary care responsibilities were included going forward and that an updated document was presented to the next meeting.</p>	AL	30 August 2018
239	07/06/18	8	<p><b><u>Review Risk Statement and Risk Register</u></b></p> <p>AL confirmed that the annual review of the Risk Management Policy will be reviewed and brought back to the next meeting.</p> <p>KR queried whether the risk statement should be reviewed to confirm HRW CCG's focus with their current financial position.</p>	AL	30 August 2018
240	07/06/18	13	<p><b><u>Staff Workforce Report</u></b></p> <p>KR queried when the staff survey action plan would be agreed and it was confirmed that it would be presented to HRW CCG's next team meeting on 21 June and would then be presented to the next AIG meeting.</p>	HD	30 August 2018
242	07/06/18	24	<p><b><u>Counter Fraud Progress Report</u></b></p> <p><b>Counter Fraud Authority visit</b> - Meeting room to be booked for Friday 7 August together with an appointment for the Counter Fraud staff member to meet the new Interim CFO following the visit – CT.</p> <p>SM or JD will attend the August meeting and provide members with a verbal</p>	CT SM / JD	30 August 2018 30 August 2018

			update.		
243	07/06/18	25	<p><b><u>Counter Fraud Annual Report</u></b></p> <p>Counter Fraud Policy – policy to be promoted for staff awareness – CT to follow up with Janet Probert.</p>	CT	30 August 2018