

**MINUTES OF WILTSHIRE AUDIT AND ASSURANCE COMMITTEE MEETING
HELD ON TUESDAY, 12 NOVEMBER 2013 AT 09:30
AT SOUTHGATE HOUSE, DEVIZES**

Present:

Peter Lucas	PL	Chair, Lay Member
Christine Reid	CR	Vice Chair, Lay Member
Dr Mark Smithies	MS	Secondary Care Doctor
Mary Monnington	MM	Registered Nurse Member

In Attendance:

Simon Truelove	STr	Chief Financial Officer
Dr Jonathan Rayner	JR	GP Vice Chair, NEW
David Noyes	DJN	Director of Planning and Performance and Corporate Services
Roger Ringham	RR	Security Management Specialist
Tracey Spragg	TS	Counter Fraud
Paul Dalton	PD	Internal audit, PwC
Tara Westcott	TW	External audit – KPMG
Susannah Long	SL	Governance and Risk Manager
Diana Hargreaves	DJH	Board Administrator
Jo Cullen (<i>for AOB item</i>)	JC	Interim Group Director, WWYKD

Apologies:

Jonathan Brown	JB	External audit – KPMG
Lynn Pamment	LP	Internal audit, PwC
Steve Perkins	SP	Deputy CFO

AAC/13/11/01	WELCOME AND APOLOGIES FOR ABSENCE PL welcomed everyone to the meeting, noting apologies as above.	ACTION
AAC/13/11/02	DECLARATIONS OF INTERESTS Members are reminded of their obligation to declare any interest they may have on any issues arising at the meeting which might conflict with the business of Wiltshire CCG. There were no declarations of interests made.	
AAC/13/11/03	PREVIOUS MINUTES – 10 SEPTEMBER 2013 P2 13/09/06 lines 5-6 should read: ‘Deloitte UK will be issuing a letter/report detailing this plan of work for CSU audits.’ The minutes of the previous AAC meeting held on 10 September were agreed as an accurate record with the amendment noted above.	

AAC/13/11/04	MATTERS ARISING None.	
AAC/13/11/05	<p>ACTION TRACKER</p> <p>AAC/13/07/09 TS mentioned in her update that there was a counter fraud e-learning package available for induction and training.</p> <p>AAC/13/07/18 STr provided the Committee with clarity on the breakdown of payments for the Community Transformation team explaining that the costs of the contracts were balanced out between Wiltshire Council and the CCG. Decisions would need to be taken on what further work the CCG would require and a proposal about the future extension of the Community Transformation Programme would be brought to the January AAC meeting.</p> <p>AAC/13/09/09 DJN explained to CR that there had been an email exchange with HR-G about sharing the Communication workplan and they would pick this up outside this meeting.</p> <p>It was decided to present only the completed actions from the previous month to the Committee going forward.</p>	<p>STr</p> <p>DJH</p>
AAC/13/11/06	<p>INFORMATION GOVERNANCE (IG) POLICIES</p> <p>STr introduced the paper which provided assurances that the CCG had the required policies and processes in place.</p> <p>SL continued explaining that the four policies supported the IG toolkit, had been written by the CSU with the guidance available to them and had been adapted to fit our organisation.</p> <p>Members commented variously:</p> <ul style="list-style-type: none"> • The EIAs were very good templates • What training will be available to staff and how will the policies be promulgated? All staff to undertake the online IG training and some staff would be required to undertake special training modules and more advanced IG training. Compliance with completion would be monitored and reported to the Governing Body through the workforce report • Compliance with the policies would be tested as part of the IG toolkit which was looked at annually • The remit of the IG group would be to performance manage and monitor the outcome and implementation of policy • IG group should offer WC guidance on sharing information • Multiple organisations and providers were still coming to grips with where they should send and share information. 	

	<p>The CCG needed to gain assurance from commissioning colleagues, as we move towards integration and joint working, that they respect confidentiality and were abiding by the policies. STr would be meeting MR on Friday and would enquire as to how the Council managed risk and what training was provided to ensure that staff were aware of their responsibilities around IG</p> <ul style="list-style-type: none"> • NHS England's responsibility around IG was to issue directives about legislation to GP practices and expected them to be compliant. Each practice was responsible for their own IG and the Practice Managers would be required to organise training to ensure compliance. • Risk of breaches within general practice would be more likely to be electronic rather than paper-based <p>The Committee received and approved the policies.</p>	STr
AAC/13/11/07	<p>INFORMATION GOVERNANCE (IG) GROUP Terms of Reference (TOR)</p> <p>STr introduced the paper with the Terms of Reference for the IG group. In recognition of the changing world as integrated working becomes more commonplace, it was decided to extend point 4.1 to read:</p> <p>4.1 To work with other partners to ensure that an appropriate comprehensive information governance framework and systems are in place throughout the organisation in line with national standards.</p> <p>The Committee received and agreed the IG Group TOR.</p>	SL
AAC/13/11/08	<p>INTERNAL AUDIT PROGRESS REPORT</p> <p>PD introduced the report pointing out that p2 set out the progress of work to date. The Review of Compliance checklist cannot be carried out until the guidance has been issued at the end of November.</p> <p>The Committee had no questions or comments.</p> <p>The Committee received the report.</p>	
AAC/13/11/09	<p>INTERNAL AUDIT PROCUREMENT REPORT</p> <p>PD presented the report highlighting the summary of findings on p2 which showed that the CCG's procurement practices were considered to be an area of high risk. The procurement policy should be explicitly defined and management information that can be obtained from the CSU should be used more effectively.</p> <p>The Committee heard that, with the integration between health and social care, there would be difficult discussions and decisions to be made on procurement options of services, including issues such as length of contracts.</p>	

	<p>The CSU will be writing the procurement policy and STr will adapt for the CCG. Members expressed the need to ensure the CCG gets the policy right to reduce the risk of challenge. It was also deemed important to ensure value for money in all goods and services that the CCG procured and that staff had the appropriate training.</p> <p>The target dates by which PwC would be addressing the issues will prove challenging.</p> <p>The Committee received and discussed the report.</p>	
AC/13/11/10	<p>INTERNAL AUDIT SLA REPORT PD – introduced the report.</p> <p>The Committee had no questions or comments.</p> <p>The Committee received the report.</p>	
AAC/13/11/11	<p>LOCAL COUNTER FRAUD REPORT TS introduced the progress report detailing the activity to date and explained that historical data around fraud risks cannot be accessed at the moment and the referral data shown in the report was taken from actual referrals/investigations at Wiltshire PCT between 2011–2013.</p> <p>TS continued by saying that CCGs' responsibility for fraud had reduced and therefore the fraud risk had also reduced as a result. However the CCG would need to consider the risk of prescription fraud which could have a detrimental effect on the prescribing budget.</p> <p>The Committee heard that, as a commissioning organisation, the CCG had a responsibility to ensure that provider organisations had appropriate counter fraud cover in place.</p> <p>JR suggested that the risks going forward would be clinical and reputational - high volume but low value and that practices should be made aware of the potential risks. There was a particular risk around Specials affecting the prescribing budget as there was no tariff and practices were charging very different rates for the same medicines. TS will be meeting with the Medicines Management team to investigate this issue and looking at the data on all specials over £1k to see how often it happens.</p> <p>The Committee received and discussed the report.</p>	
AAC/13/11/12	<p>FRAUD AND BRIBERY POLICY TS introduced the report which replaced the existing Counter Fraud Policy and incorporated a new Anti-Bribery Policy as a combined</p>	

	<p>policy.</p> <p>The Committee agreed that fraud was identified through whistle-blowing and there would be a section on whistle-blowing in the new CCG induction handbook. Best practice suggested that there should be a non-executive/member of staff as whistle-blower lead rather than an Executive Director. PL and DJN to discuss outside this meeting.</p> <p>TS to send the e-learning package to SL for consideration as to CCG take-up.</p> <p>The Committee received and discussed the report.</p>	<p>PL/DJN</p> <p>TS</p>
<p>AAC/13/11/13</p>	<p>SECURITY MANAGEMENT SERVICES UPDATE</p> <p>RR introduced the report pointing out the key issues of concern that had been identified following discussions with the CSU:</p> <ul style="list-style-type: none"> • Incident reporting • Management of incidents • Staff training • Risk assessments • Competent person <p>DJN thanked RR for his report and was aware of these concerns, adding that the agreement with the CSU was in place because the CCG did not have that level of expertise within the organisation and acknowledged that that CCG was not currently where it should be with regard to H&S.</p> <p>RR informed the Committee that the CSU was using an Excel spreadsheet to record incidents but hoped to bring in a Datix e-system by the end of December 2013. Members cautioned that the Datix system, whilst a good system, was very expensive to run and that data input was the key to its success.</p> <p>RR was asked how he linked in with PropCo around the security of the CCG reception area now that there were 3 different organisations in the building. RR replied that the management of security had been sub-contracted by PropCo to GWH and RR intended to liaise with GWH to ensure that appropriate arrangements were in place, including escalation.</p> <p>RR was currently undertaking a review of providers to make sure they were satisfying the requirements of the Prevent programme and would report back to the Committee on his findings.</p> <p>The Committee received and discussed the report.</p>	<p>RR</p> <p>RR</p>
<p>AAC/13/11/14</p>	<p>EXTERNAL AUDIT TECHNICAL UPDATE</p> <p>TW presented the report providing an update on key technical issues since the last meeting in September.</p>	

	<p>There was a still an issue with CCGs' opening balances and a report on the status of opening balances' positions was being prepared for the Audit Commission. STr reported that Wiltshire CCG was on top of this in terms of current guidance, despite the ongoing confusion with legacy balances, adding that not having CSU finance colleagues in the building was proving to be a challenge.</p> <p>TW informed Members that the DoH had consulted on a change of date for the CCG audited accounts sign-off, brought forward from 5/6 June to 31 May and KPMG were pushing hard to keep to the current date.</p> <p>MM requested that the 0.8% of incidents reported, as the percentage left after the other incidents' percentages were combined, be highlighted in future patient safety reports.</p> <p>The Committee received and discussed the report.</p>	<p>KPMG</p> <p>KPMG</p>
<p>AAC/13/11/15</p>	<p>REVIEW ASSURANCE FRAMEWORK AND RISK REGISTER SL presented the BAF stating that risks D.03 and F.02 from the Community Risk Register had been incorporated and that narrative had been added where progress had been made against the other risks.</p> <p>B.02 STr reported that moves had been made nationally to extend the Section 251 agreement to October 2015 and the CCG was awaiting confirmation which would enhance the situation enabling CCGs to review patient identifiable information. This would be reported to the Governing Body meeting at the end of November if confirmation had come through by then.</p> <p>C.01 CR asked SL to check whether the Communication and Engagement Strategy had been approved at the July Governing Body meeting.</p> <p>SL continued by introducing the RR stating that there was now significant engagement and asked the Committee to propose the Top 10 risks to go forward to the Governing Body. Following debate, Members agreed on the Top 10.</p> <p>SL was thanked for her work on this.</p> <p>The Committee received and discussed the report.</p>	<p>SL</p>
<p>AAC/13/11/16</p>	<p>UPDATE ON FUTURE OF CSCSU DJN introduced the report explaining that the CSU performance had improved in most areas after significant investment of resource. The Executive team recommendation was that there was insufficient evidence to terminate the contract and that the SLA should be extended until April 2016 with a re-negotiation of the service specification, KPIs and prices.</p>	

	<p>Members raised concerns including:</p> <ul style="list-style-type: none"> • The time taken up with negotiating with the CSU and doing their job for them • Having to bring in Attain as the CSU were unable to deliver on strategic development • Current SLA expires in September 2014 – too early to make a decision as more progress on performance was needed to be seen • De-stabilisation of CSU if other CCGs pull out. Most CCGs were taking the extension and re-negotiated spec option. <p>The CSU's contribution to paying for Attain would be a negotiation point. STr is meeting with the new Finance Director of the CSCSU (Nick Robinson) tomorrow to be clear on the process of what the CCG were receiving and paying for. STr will provide a brief to the Committee after the meeting.</p> <p>The Committee received and discussed the report.</p>	STr
AAC/13/11/17	<p>INFORMATION GOVERNANCE GROUP MINUTES – 22/10/13</p> <p>The Committee received and noted the minutes.</p>	
AAC/13/11/18	<p>AGED DEBTORS AND CREDITORS REPORT</p> <p>STr presented the report.</p> <p>The Committee had no questions or comments.</p> <p>The Committee received the report.</p>	
AAC/13/11/19	<p>LOSSES AND SPECIAL PAYMENTS REPORT</p> <p>None to report.</p>	
AAC/13/11/20	<p>COMPETITIVE TENDER WAIVERS</p> <p>None to report.</p>	
AAC/13/11/21	<p>INTERNAL AUDIT TRACKING REPORT</p> <p>Nothing to report.</p>	
AAC/13/11/22	<p>ANY OTHER BUSINESS</p> <ul style="list-style-type: none"> • Report on managing risk within WWYKD <p>JC attended the meeting for this item; however, it became apparent that there was confusion about exactly what the Members expected from the item. PL/STr agreed to come up with clarity about what</p>	PL/STr

	<p>was required from the Groups' attendance at future meetings. It was also decided to have the item at the start of the meeting.</p> <p>There was no further business discussed and the meeting closed at 12:00hrs.</p>	
	<p>Date of next meeting – 14 January 2014 09:30 – 11:30hrs</p>	