

**MINUTES OF AUDIT AND ASSURANCE COMMITTEE MEETING
HELD ON TUESDAY 13 NOVEMBER 2018, AT 09:15hrs
AT SOUTHGATE HOUSE, DEVIZES**

Voting Members Present:

Peter Lucas	PL	Chair, Lay Member for Audit and Governance
Christine Reid	CR	Vice Chair, Lay Member for Patient and Public Involvement
Dr Mark Smithies	MS	Secondary Care Doctor
Dr Catrinel Wright	CW	GP, Interim Chair of West

In Attendance:

Steve Perkins	SP	Chief Financial Officer
Rob Hayday	RH	Associate Director of Performance, Corporate Services and Head of PMO
Susannah Long	SL	Governance and Risk Manager
Rees Batley	RB	Internal Audit, KPMG
Peter Barber	PB	External Audit, Grant Thornton
David Foley	DF	Director, Local Counter Fraud, TIAA
Hayley Cobb	HC	Local Counter Fraud Specialist, TIAA
Sharon Woolley	SW	Board Administrator
John Dudgeon	JD	Head of Information / Data Protection Officer <i>(for item 7 only)</i>
Dee Runciman	DR	STP Apprenticeship Programme Manager <i>(for item 12 only)</i>

Apologies:

Mark Harris	MH	Chief Operating Officer
Katie Whybray	KW	External Audit, Grant Thornton
Linda Prosser	LP	Interim Chief Officer

Item Number	Item	Action
AAC/18/11/01	Welcome and apologies for absence PL welcomed everyone to the meeting, especially welcoming new member Dr Catrinel Wright, who replaced Dr Anna Collings as the GP representative upon the Committee. The above apologies were noted.	
AAC/18/11/02	Declarations of Interest Members were 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. (This included any relevant interests previously declared on the Register of Interests). There were none declared. The meeting was quorate.	
AAC/18/11/03	Minutes from the meeting held on 11 September 2018 The minutes from the meeting held on 11 September 2018 were agreed to be an accurate record.	

AAC/18/11/04	<p>Matters Arising There were no matters arising.</p>	
AAC/18/11/05	<p>Action Tracker The action tracker was reviewed and updated.</p> <p>AAC/18/05/07b - A further update would be requested from Sarah MacLennan by RH. ONGOING</p> <p>AAC/18/07/09 - Workforce issues had been taken into account. The CCG was also currently recruiting to the Workforce Project. CLOSED</p> <p>AAC/18/09/14a - PL reported that he had raised the importance of GPs declaring their interests with Dr Dick Sandford Hill (WCCG Chair), who would be following this up with each Group Chair to ensure all GPs were more diligent about declaring and recording their conflicts of interest. COMPLETED</p>	RH
ITEMS FOR DECISION		
AAC/18/11/06	<p>Audit and Assurance Committee Terms of Reference RH reported that an annual review of the AAC terms of reference had been undertaken, only minor amendments had been made. The attendance of the Chief Operating Officer was still expected in line with the recent portfolio changes.</p> <p>The terms of reference have been future proofed, incorporating the committee changes as part of the agreed Clinical Leadership Model (rotational GP representative) and aligning them to the new model constitution guidance as published by NHS England. The AAC terms of reference were required as an appendix to the constitution as a mandatory committee.</p> <p>The Committee agreed the Audit and Assurance Committee Terms of Reference. These would be presented to the Governing Body in November for approval.</p>	
AAC/18/11/07	<p>Confidentiality and Safe Haven Policy JD explained that the Confidentiality and Safe Haven Policy was in place to ensure the CCG was compliant with the GDPR and Information Governance regulations. As the Data Protection Officer for the CCG, JD would be accountable for any breaches.</p> <p>This policy was part of a suite of information governance related policies to be brought to the Committee for approval. The policy had been agreed by the Information Governance Group. It would be valid until November 2021.</p> <p>The Committee approved the Confidentiality and Safe Haven Policy.</p> <p><i>(9.30hrs – JD left the meeting)</i></p>	
AAC/18/11/08	<p>Capability Policy RH reported that the Capability Policy had been reviewed, with support from Consult HR colleagues. It had received minor revisions to ensure clarity of the process and responsibilities. Learning from recent episodes had tested the policy. It had been shared with the Staff Partnership Forum and Executive Management Team.</p> <p>The Committee approved the Capability Policy.</p>	
AAC/18/11/09	<p>Disciplinary Policy RH presented the Disciplinary Policy, which had been reviewed by Consult HR</p>	

	<p>colleagues. The revisions made to the policy were indicated in the cover sheet and shown in green. The policy was in place to support both parties during the process.</p> <p>The Committee approved the Disciplinary Policy.</p>	
AAC/18/11/10	<p>Other Leave Policy RH advised that the Other Leave Policy was different to the Flexible Working Policy. This policy provided guidance around particular leave requests, such as emergency leave.</p> <p>CR queried the need to reference the wider BaNES, Swindon and Wiltshire footprint in 10.1 of the policy following the recent agreement by the CCGs to work closer together and share an Accountable Officer. It was acknowledged that the policy needed to reference broader than Wiltshire in due course, but at the time of writing, WCCG remained a separate statutory entity. Future decisions may affect policies, which would be amended accordingly and presented again for approval.</p> <p>The Committee approved the Other Leave Policy.</p>	
AAC/18/11/11	<p>Risk Management Strategy SL presented the Risk Management Strategy, which had undergone a major review. Amendments were shown in green. The Strategy also incorporated the two recommendations from the KPMG audit review.</p> <p>MS questioned how those high risks were escalated if they were not within the top 10. SL explained that EMT was involved in the review of the risk register to ensure Executive Managers had overview of the organisations risks. Each risk was discussed to ensure it was scored appropriately, alongside consideration of other risks and impacting factors. With particular reference to Quality risks - the complete Quality risk register was reviewed at each meeting of the Quality and Clinical Governance Committee, which provided an opportunity for further discussion and escalation if required.</p> <p>The Committee agreed the Risk Management Strategy and recommended it for approval by the Governing Body.</p> <p><i>(9.45hrs – Dee Runciman joined the meeting)</i></p>	
ITEMS FOR DISCUSSION		
AAC/18/11/12	<p>STP Apprenticeship Activity Update DR talked through her paper, which provided an update to the Committee on apprenticeship activity across STP partners. The development of the Health Education England funded Trainee Nurse Associate (TNA) partnership had been approved. Those employers who were members of the partnership would receive £7,200 (until 31 Dec 2018) to support candidates and facilitate placements. It was hoped this funding would continue into 2019. Within primary care, 11 TNAs (predominantly in Wiltshire) had been allocated a placement. The partnership link with the Community Education Provider Network was working well.</p> <p>CR queried how many apprenticeship students were Wiltshire based, and how many had completed the programme. DR referred to the final graph in the paper which indicated placements for all partners. The CCG had not yet placed any students. RH advised that the CCG is required to pay £1000/month into the levy pot. The CCG was developing a 'how to' guide for CCG Managers considering recruitment of an apprentice. DR added that a further seven applications had been received for Primary Care placements in Wiltshire. A</p>	

	<p>programme vehicle was required for identifying the need of positions within Wiltshire, which would then be determined by the levy pot.</p> <p>Primary Care Practices were non-levy paying, but they can access up to 90% of the training costs.</p> <p>Members were concerned to learn that as a provider, UWE was not performing and providing the employer support as required. DR advised that UWE had been asked to re-present their enrolment process due to partner dissatisfaction with their service. An alternative method of providing employer support was being looked into. Primary Care Practices may be diverted to alternative provider Oxford Brooks, although they were not currently registered to deliver to no-levy paying organisations. Off the job training was an issue to Practices, to try to backfill staff time. The apprenticeship activity log should be reviewed in line with the workforce issues and list of vulnerable practices.</p> <p>Members requested an update report from DR in March, to include apprenticeship case studies and figures concerning the impact and activity in Wiltshire per locality.</p> <p>ACTION: AAC/18/11/132 - Dee Runciman to attend the March AAC meeting to provide an update on the impact of apprenticeships for Wiltshire. Members requested that the report include case studies and referenced activity specifically for Wiltshire and its localities.</p> <p><i>(10.09hrs – DR left the meeting)</i></p>	<p>Dee Runciman</p>
<p>AAC/18/11/14 <i>(item moved)</i></p>	<p>Workforce Report</p> <p>RH presented the Workforce Report as prepared by the CSU, which covered the period of 1 April 2018 to 30 September 2018.</p> <p>Staff levels at the CCG had now risen above the threshold of 150, impacting on the level of detail required to be reported by the CCG on workforce equality.</p> <p>Referring to the CCGs sickness report, stress and anxiety was the top reason for absence. The CCG had reacted proactively to this finding and launched 'Improved Personal Effectiveness' sessions to support staff resilience. Subsequently, the appraisal and objective setting uptake had declined. MS stated that it was recognised that work place stress related to lack of control over work definition. The increase in absence was evidently linked to the lack of objective setting within teams. A consistent approach was needed and should be enforced by EMT through their teams. Members felt that this needed to be highlighted further to EMT as a concern raised by the Committee. RB advised that an audit review in this area would be carried out as part of next year's internal audit plan.</p> <p>ACTION: AAC/18/11/14 - Workforce Report to be taken to EMT on 26/11/18 and SP to raise the Committee's concerns with Directors, and similarly PL will raise these with Linda Prosser.</p>	<p>RH / SP / PL</p>
<p>AAC/18/11/13</p>	<p>Commissioning Alliance Update</p> <p>SP provided a verbal update to Members concerning the Commissioning Alliance and the three CCGs working more closely. A joint Governing Body meeting had been held between BaNES, Swindon and Wiltshire (BSW) on 4 October 2018 to consider the options appraisal and the four defined options. Each CCG had then held its own Governing Body Private Session to further discuss and debate the options. Option 3 – To maintain the three separate CCGs, but with a single management team and streamlined governance (incorporating the STP functions) – had been agreed by each CCG at the</p>	

	<p>meeting. It was to be presented to the Governing Body in Public for ratification, Wiltshire were holding an Extraordinary Public Session on 13 November.</p> <p>If ratified, recruitment of a shared Accountable Officer (AO) would proceed. The role would incorporate the role of the Senior Responsible Officer for the STP. The AO would design their supporting management structure; the Commissioning Alliance had started to consider the Executive Management tier and to draft job descriptions for those roles that were certain in the structure. It was hoped that AO appointment would be made in January 2019. Committee structure would also be reviewed to enable collaborative working.</p>	
AAC/18/11/15	<p>Review of Risk Register and Board Assurance Framework</p> <p>RH presented the Risk Register, which identified the top 10 risks to be taken to the Governing Body for approval. The summary paper listed the top 20 risks to inform risk movement. As recommended by the Risk Management internal audit report, a trend line had now been incorporated into the report.</p> <p>CR queried the status of risk 6 for the procurement of the Patient Transport Service (A-18/073). Actions stated that the deadline for bids was 31 October 2018. SP updated Members that two bids had been received and evaluation had commenced on 12 November.</p> <p>It was also noted that risk 3 concerning appropriately skilled staff across the sector (C-14/038) had moved up one position, but had not been reviewed since August 2018. RH would ensure this was updated before circulated to the Governing Body.</p> <p>ACTION: AAC/18/11/15 - RH to ensure that the workforce risks were updated upon the Risk Register.</p> <p>The Committee agreed the top ten risks as currently shown in the Risk Register and recommended it for approval by the Governing Body.</p> <p>Board Assurance Framework (BAF)</p> <p>The Committee recommended the BAF for approval by the Governing Body.</p>	RH
AAC/18/11/16	<p>Internal Audit Progress Report and Tracker</p> <p>RB presented the internal audit report. Page two listed the planned reviews and their status. The terms of reference had been agreed for the financial systems, financial reporting and information governance reviews; these would be presented to the January Committee meeting.</p> <p>RB reported that he had met with Lucy Baker and Linda Prosser recently to discuss GP engagement and partnership working streams. It had been agreed to remove partnership working from the plan, to be replaced with a review of PMO arrangements. EMT were considering how to take the review forward.</p> <p>An initial meeting had been held with Lucy Baker concerning the scope of the Children's Continuing Healthcare review. Lucy would be discussing how to take this forward with EMT for the review to be undertaken in April/May 2019.</p> <p>RB advised that Personal Health Budgets would be a focus for next year's plan due to the associated risks around the funding for individuals.</p>	
AAC/18/11/17	<p>External Audit Progress Report</p> <p>PB advised that Grant Thornton were currently planning for the 2018/19 financial statements audit. The plan would be presented to the January Committee meeting. No significant changes were expected for the audit. Initial risk assessment work would begin in December.</p>	

	PB referred Members to page seven of the report to highlight the recent work undertaken by Grant Thornton and NHS Improvement concerning 'Getting the Data Right First Time'.	
AAC/18/11/18	<p>Local Counter Fraud Progress Report DF advised the Committee that there had been a number of team changes within the TIAA Counter Fraud team. DF had been appointed as Director, Tony Hall would now be the CCG's Contract Manager, replacing Andrew Morely who had now left TIAA, and Hayley Cobb would be the Specialist Counter Fraud contact for the CCG.</p> <p>With regards to the report, delivery against the work plan was on course. A review of Personal Health Budgets had been completed and was to be issued for comment. A deep dive of the Conflicts of Interest register was to be undertaken, the concerns around GDPR had been resolved. Analysis of the National Fraud Initiative submissions would be undertaken in January/February.</p>	
AAC/18/11/19	<p>Emerging External Issues SP spoke of the uncertainty of the planning arena. A Financial Outlook 2019/20 paper was to be discussed at the Finance and Performance Committee on 20 November 2018.</p> <p>The cost of delivering services across different geographies against the national tariff was being reviewed, NHS England were to undertake a rebasing exercise of the process. This would bring a four year pace of change.</p>	
ITEMS FOR NOTING		
AAC/18/11/20	<p>Information Governance Group Minutes 3 August 2018 and 20 September 2018 (draft) The Committee noted the minutes from the Information Governance Group meetings held on 3 August 2018 and 20 September 2018.</p>	
AAC/18/11/21	<p>Aged Receivables and Payables Report The Aged Receivables and Payables Report was noted.</p> <p>SP advised that payments on account were being made against the NHS Property Services invoices due to an unsatisfactory service currently being received.</p>	
AAC/18/11/22	<p>Losses and Special Payments Report The Losses and Special Payments Report was noted.</p> <p>SP advised that this paper was to be presented to the Private Session of the Governing Body as part of the approval process.</p>	
AAC/18/11/23	<p>Competitive Tender Waivers There were none to report.</p>	
AAC/18/11/24	<p>Any Other Business There were no items raised.</p>	
	The meeting concluded at 10.55hrs	

**Date of next Audit and Assurance Committee Meeting:
Tuesday 8 January 2019, 09.15-11.00hrs**