

Title of Meeting:	Governing Body			Agenda Item: 9.1								
Date of Meeting:	22 April 2021			<table border="1"> <tr> <th colspan="2">Session (Tick)</th> </tr> <tr> <td>Public</td> <td>X</td> </tr> <tr> <td>Private</td> <td></td> </tr> <tr> <td>Workshop</td> <td></td> </tr> </table>	Session (Tick)		Public	X	Private		Workshop	
Session (Tick)												
Public	X											
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Workshop												
Paper Title:	Audit Committee Key Messages											
Responsible Governing Body Member Lead Ken Readshaw, Lay Member for Audit & Governance and Audit Committee Chair		Report Author and Job Title Ken Readshaw, Lay Member for Audit & Governance and Chair of the Audit Committee										
Purpose (this paper if for)	<table border="1"> <tr> <th>Decision</th> <th>Discussion</th> <th>Assurance</th> <th>Information</th> </tr> <tr> <td></td> <td></td> <td>X</td> <td></td> </tr> </table>				Decision	Discussion	Assurance	Information			X	
Decision	Discussion	Assurance	Information									
		X										
Has the report (or variation of it) been presented to another Committee / Meeting? If yes, state the Committee / Meeting: No.												
Executive Summary <p>The Audit Committee provides the Governing Body with an independent and objective view of the CCG's financial systems, financial information and compliance with laws, regulations and directions governing the CCG in so far as they relate to finance, risk management systems and emergency planning arrangements.</p> <p>Key Messages from the meeting held on 23 February 2021 are attached at Appendix A. Confirmed Minutes of the meeting held on 24 November 2020 are attached at Appendix B.</p>												
Recommendations <p>The Governing Body is asked to receive the report as assurance.</p>												
Monitoring <p>An assurance report on key topics discussed at the Audit Committee will be brought to each Governing Body meeting.</p>												
Any statutory / regulatory / legal / NHS Constitution implications		The Audit Committee is accountable to the Governing Body and is required to provide key messages and confirmed minutes from all of its meetings.										
Management of Conflicts of Interest		No conflicts of interest have been identified prior to the meeting.										
Communication / Public & Patient Engagement		Key Messages are published with the Governing Body Papers and any additional update is noted in the minutes, which are also published on the CCG's website.										
Financial / resource implications		None identified.										
Significant Risks to Consider		No significant risks to consider.										
Outcome of Impact Assessments completed		Not applicable.										

Ken Readshaw, Lay Member for Audit and Governance and Audit Committee Chair

Audit Committee

Key Messages to North Yorkshire CCG Governing Body From Audit Committee 23 February 2021

Committee met on Tuesday 23 February 2021, using Teams Meeting facility over the internet. The committee was quorate, and there were no new declarations of interest with regards to the agenda.

Minutes of the meeting held on 24 November 2020 were reviewed by the Committee: for accuracy and were approved as a true and accurate record.

Approvals

Information Governance Policies

- a) Social Media Policy
- b) Mobile Working Policy
- c) Internet and e-mail Acceptable Use Policy
- d) Records Management Policy
- e) Information Security Policy

Finance Policies – Pharmacy Rebate Schemes

Anti-Fraud, Bribery and Corruption Policy

Other Matters

The Committee received a verbal Financial Issues Update (by exception) and year end update.

The Committee received a paper of the timetable for year-end accounts work. It is presented to give the committee assurance that the CCG is undertaking the necessary preliminary planning to ensure deadlines are met and a smooth audit ensues..

The Committee received a report on Financial Accounts – Progress Report & Losses. The Committee noted the work undertaken by the Financial Accounts team in addressing inherited legacy issues and changes made to working practices to limit them occurring again.

The Committee received a draft Audit Committee Annual Report 2020/21 which covered the work of the Audit Committee of NHS North Yorkshire CCG for matters relating to the year 2020/21.

The Committee received the draft Annual Review of Effectiveness 2020/21. The outcome of the review will form part of the annual report and annual governance statement.

The Committee received and noted two Single Tender Waivers.

The Committee were presented with reports on the Internal Audit and External Audit Review of Effectiveness 2020/21 survey. Significant assurance was received.

The Committee were provided with IGSG minutes held on 27 January 2021 and received assurance of IG compliance and work against the IG work plan.

The Committee received an update on the Counter Fraud Progress Report which summarised the Counter Fraud work that has taken place since the last Audit Committee.

The Committee received an update on the Internal Audit Annual Plan Progress Report which summarised activity undertaken in relation to the 2020/21 Internal Audit Operational Plan for the period 1 April 2020 to 16 February 2021. Seven reports were received, all with significant or high assurance. This is a notable achievement.

The Committee received an update on Internal Audit Recommendations Status Report. There were no overdue outstanding recommendations.

External Audit provided a summary of the Audit Strategy Memorandum 2020/21 which described the work required in order to deliver an opinion on the 2020/21 accounts and arrangements for value for money.

External Audit presented a summary on the Audit Progress & Technical Update report. The report provided a brief update on the 2020-21 external audit of the CCG as well as an update on the Mental Health Investment Standard assurance work for 2019-20.

The Audit Committee Forward planner was deferred to the next meeting.

Ken Readshaw, Lay Member for Audit and Governance and Audit Committee Chair

NORTH YORKSHIRE CLINICAL COMMISSIONING GROUP

Audit Committee

Tuesday 24 November 2020

14:00 – 16:00

Present	
Ken Readshaw	Lay Member for Audit (Chair)
Jane Hawkard	Chief Finance Officer
Sheenagh Powell	Lay Member for Finance
Dr Chris Ives	GP Governing Body Member
Dr Ian Woods	Secondary Care Doctor (Vice Chair)

In Attendance	
Dr Charles Parker	Clinical Chair
Julie Warren	Director of Corporate Services, Governance & Performance
Sasha Sencier	Senior Governance Manager And Board Secretary to the Governing Body (for items 5.1 – 5.7)
Emma Parker	Corporate Services and EPRR Manager (for items 5.7, 5.8 & 5.9)
Rosie Dickinson	Counter Fraud (for items 6.1)
Kim Betts	Internal Audit Manager, Audit Yorkshire (for items 7.1 & 7.2)
Mark Kirkham	Mazars (for item 8.1)
Catherine Gibson	(Secretariat)

Apologies	
Sue Peckitt	Chief Nurse
Campbell Dearden	Mazars

1.0 Apologies for Absence and Quorum

Apologies were received from: Sue Peckitt, Chief Nurse, Campbell Dearden, Mazars and Alec Cowell, Deputy Director of Financial Services & Reporting

Sasha advised the Chair was experiencing technical issues and therefore Dr Ian Woods, Vice Chair stepped in as Chair.

The Chair confirmed that the meeting is quorate, taking into account any apologies for absence.

Audit Committee:

Noted attendance and apologies and confirmed the meeting is quorate under the requirements set out within the Terms of Reference.

2.0 Declarations of Interest in Relation to the Business of the Meeting

The Chair reminded committee members of their obligation to declare any interest they may have on any issues arising at committee meetings which might conflict with the business of NHS North Yorkshire CCG. It was noted there were no declarations of interest in relation to the business of the meeting.

Audit Committee:

Noted there were no declarations of interest in relation to the business of the meeting.

3.0 Minutes of the meeting held on 17 September 2020

Minutes of the meeting held on 17 September 2020 were reviewed by the Audit Committee: for accuracy; minor amendments were noted including;

Page 8, Item 7.2, fifth paragraph to read; It was confirmed an audit has been undertaken on Governance arrangements, the final report has been issued and high assurance has been given.

Amend Date and Time of next meeting on page 10 to read; Thursday 24 November 2020.

Action:

- **Catherine Gibson to amend the minutes of 17 September 2020 to reflect those changes above.**

Audit Committee:

Approved the minutes, subject to the above amendment.

3.1 Matters arising from the Minutes

The action log was reviewed by the Audit Committee. All outstanding actions were included on the agenda and therefore could be removed.

4.1 Financial Issues Update (by exception)

Jane Hawkard presented a verbal financial summary to the Committee this confirmed:

- The current month 6 YTD position which covered the initial Covid19 financial regime period (April to July) and the extension period to the end of September.
- The funding regime for the Covid vaccination programme is not yet known with information expected soon.
- New allocations received in October and November were significant for primary care and focussed on delivering capacity at last year's levels as well as managing the flu and Covid vaccination programmes.

Audit Committee:

Noted the above and felt assured on the actions being taken.

Ken Readshaw joined the meeting at 09:10 a.m. and took over as Chair.

4.2 Internal and External Auditors – Annual Review of Effectiveness Update

Jane Hawkard presented a summary of the report previously circulated and taken as read. The paper summarised the method proposed for an effectiveness review process.

It was proposed that the effectiveness review for 2020-21 is conducted as a qualitative survey issued to members of the Committee via Survey Monkey. The results will be collated by the Corporate Governance and Assurance Manager and presented back to the Audit Committee in February 2021.

Audit Committee:

Approved the survey questions and process for the effectiveness review.

4.3 Single Tender Waivers

There was nothing to report this month.

Audit Committee:

Noted the above.

5.1 Governing Body Assurance Framework

Sasha Sencier presented a summary of the report previously circulated and taken as read.

The aim of the report is to update the Audit Committee on progress of the development of the NHS North Yorkshire CCG Governing Body Assurance Framework.

Sasha Sencier provided assurance that an effective process (ie the GBAF) has been established in order to manage significant risks that may affect the delivery of the strategic objectives of the organisation and there was nothing exceptional to raise.

It was noted that the Governing Body has approved for the risk appetite to be increased from 12 to 15, thus minor changes will need to be made to the Risk Management Strategy.

Julie Warren stated an enormous amount of work has been done and thanked Sasha Sencier who has been instrumental.

Audit Committee:

Noted the above and felt assured on the actions being taken.

5.2 Legal Updates Report

Julie Warren presented a summary of the report, previously circulated and taken as read.

The aim of the report is to provide the Audit Committee with an update on any legal issues this confirmed:

- Details of the work completed by the Legal Team in respect of Community DoLS and Contentious Court of Protection Applications and sets out the risks to the CCG with regard to non-compliance with the legal framework.
- Responsible Commissioner Update in respect of cases outstanding, outcomes on cases the CCG is still chasing and financial values.
- Responsible Commissioner Update:
 - The table sets out RC cases resolved and outstanding with associated costs
 - Durham Dales, Easington and Sedgefield CCG (DDES) has been chased, they have allocated the case to a nurse and are reviewing, we have recently been approached so know the review is underway.
 - There are 2 further cases that have not been started yet as outlined in the table due to competing priorities.

Audit Committee:

Noted the above and felt assured on the actions being taken.

5.3 Quarterly HR Report (incorporating Stat & Man Training figures)

Julie Warren presented a verbal summary.

It was noted there is a nationwide issue with ESR with an inability to pull any reports off the system. This has been ongoing for a number of weeks and hoping to be resolved soon. Therefore this item has been deferred until February 2021.

Julie Warren reassured the Committee that the Executive Directors receive this report and there are no concerns to be reported.

Audit Committee:

Noted the above and felt assured on the actions being taken.

5.4 NHSE Conflict of Interest Returns – Update

Sasha Sencier presented a verbal update to the Committee.

It was noted a significant amount of work has been completed in this area and continues to be completed. Sasha Sencier expressed huge thanks to Tanja Entwistle, Corporate and Governance Officer who has been instrumental.

The Committee were assured that we have a very high rate of returns from staff and GP Practices and engagement with the practices has been very good. Sasha Sencier now meets with the Head of Procurement and his assisting officer on a monthly basis to keep track of procurement.

The Chair felt it was important we demonstrate everything in terms of transparency and continue doing that for the whole period.

Audit Committee:

Noted the above and felt assured on the actions being taken.

5.5 IG Update and DPO Update report

Emma Parker presented minutes of discussions at the Information Governance Steering Group (IGSG) held on Wednesday 28 October 2020 and provided the following assurance:

- All Asset owners have received the appropriate training. Data Flows to be chased with those yet to respond. Helen Sanderson will risk assess flows once all those have been returned and returned. A full data flow register will be produced.
- Reminder to staff regarding ensuring security and confidentiality whilst working from home to be included in next staff newsletter. Arrangements for communications to staff regarding password protecting documents in next newsletter. The role of SIRO/Caldicott Guardian to be reinforced in next newsletter.

Audit Committee:

Noted the above and felt assured on the actions being taken.

5.6 Annual Committee Effectiveness Review Process

Sasha Sencier presented a verbal summary. This confirmed:

- The effectiveness reviews will be completed by the Board Secretary and Internal Audit and the outcome will form part of the opinion from Internal Audit on the second part of the governance audit.
- This will commence early January and will include a questionnaire to be circulated to Members.
- A report would be brought to the Audit Committee in February 2021.

Audit Committee:

Noted the above and felt assured on the actions being taken.

5.7 Freedom of Information Policy

Emma Parker presented a summary of the policy previously circulated and taken as read.

The policy provided a framework for NHS North Yorkshire Clinical Commissioning Group (CCG) to ensure compliance with the Freedom of Information (FOI) Act and the Environmental Information Regulations (EIR) 2004. Key point to note;

It was noted that the IGSG is responsible for monitoring the CCG's performance in relation to responding to FOI and EIR requests for information and highlighting any concerns to the Audit Committee.

Audit Committee:

Approved the FOI policy and recommended this for approval at the Governing Body.

5.8 Information Governance Policies

Emma Parker explained the front sheet covered all of the policies.

The Chair felt it would be helpful if the Committee could receive a summary on individual items and then the opportunity for any questions to be asked at the end of each one.

a) IG Framework & Strategy

This is to detail the Information Governance Structure within the CCG, including accountability and reporting lines. It details the strategic aims of the CCG and formalises the Terms of Reference for the Information Governance Steering Group, which is responsible for implementing appropriate policies and procedures to ensure that the CCG is aware of the information it holds and that this information is held securely and processed fairly.

Audit Committee Members were asked if they had any questions, concerns or comments regarding the above update.

After reading through the documents Sheenagh Powell felt they were a very comprehensive and excellent suite of policies. A discussion took place around confidentiality in particular sharing of information outside of the organisation where the boundaries are. Jane Hawcard commented all members of staff have a responsibility to ensure they are aware of all information security policies and guidance and comply with them. Staff must be aware of their personal responsibility for the security and confidentiality of information which they use and was fairly confident that our systems are robust.

b) Data Protection & Confidentiality

The policy is to detail the Data Protection Act and Common Law of Confidentiality obligations of the CCG. It has been updated to include the working aspects of the Confidentiality Audit Policy and the Safe Haven Policy. This has been done to keep all aspects of confidentiality in a single policy.

Audit Committee Members were asked if they had any questions, concerns or comments regarding the above update. No questions, concerns or comments were noted.

c) Confidentiality Code of Conduct

The policy gave a quick guide to staff on confidentiality requirements and has been reformatted to meet the NY CCG policy format.

Audit Committee Members were asked if they had any questions, concerns or comments regarding the above update. No questions, concerns or comments were noted.

d) Subject Access Request

The policy detailed the right of individuals to request a copy of information that is held about them by the CCG and legal obligations to be met when dealing with subject access requests, including methods and timescales for responding, and exemptions to supplying the information requested.

Audit Committee Members were asked if they had any questions, concerns or comments regarding the above update. No questions, concerns or comments were noted.

Audit Committee:

Approved the following Policies:

- IG Framework & Strategy
- Data Protection & Confidentiality Policy
- Confidentiality Code of Conduct Policy
- Subject Access Request Policy

5.9 EPRR Desktop Exercises

Emma Parker presented a summary of the report, previously circulated and taken as read.

Under normal circumstances (pre COVID) CCGs are required to demonstrate as part of the Annual EPRR assurance submission to NHSE that they have in place an EPRR exercising and testing programme from which lessons are identified and acted upon. Emma Parker pointed out that Covid is continually testing these plans, procedures and systems and there may still be gaps and lessons to be learned in areas not routinely being tested as part of COVID.

The Chair asked what the timeframe is. Emma Parker pointed to the schedule included in the Plan on page one which indicated the timescale.

Action:

- **Emma Parker will present results of the testing to Audit Committee for assurance in June 2021.**
- **A list of policies to be approved by the committee, together with their review dates.' To be provided by Sasha Sencier for May 2021.**
- **Audit Committee:**
- Noted the report and confirmed it is assured of the testing and assessment processes proposed.

6.1 Counter Fraud Annual Plan

Rosie Dickinson presented the Counter Fraud Progress Report which summarised the counter fraud activity undertaken on behalf of the CCG since the last Audit Committee. The

report also contained updates from the NHS Counter Fraud Authority, and provided a current position against the counter fraud plan.

In addition Rosie Dickinson also shared a copy of the NYCCG Fraud Prevention Notice Impact Assessment alongside the Counter Fraud Progress Report.

Rosie Dickinson highlighted at the September Audit Committee, the NHSCFA “Standards for NHS Commissioners” are in the process of being replaced by the Government Functional Counter Fraud Standards. There is no further update on this process at the moment and expecting to deliver a more detailed update at February 2021 meeting.

Action:

- **Update on the NHSCFA “Standards for NHS Commissioners” will be provided at the February 2021 meeting.** Rosie to submit the impact assessment once signed off by the CFO.

Audit Committee:

Noted the progress report and felt assured on the actions being taken.

7.1 Audit Recommendations Progress Report

Kim Betts presented a summary of the report, previously circulated and taken as read.

The report provided an update of progress against the Internal Audit Recommendations for 2019/20 and 2020/21 (and one from 2018/19) as at 11 November 2020. Recommendations from audits in 2020/21 will be included in this report as they become available.

Kim Betts was pleased to note and recognised that Audit Sponsors and Responsible Officers have undertaken a significant piece of work over the last few months with regards to all outstanding recommendations that remained open at the time the North Yorkshire CCG was created. This has resulted in only 6 recommendations remaining outstanding at this time. It was recognised that all major recommendations have now been dealt with and closed.

The Chair felt it is good that we now have a streamline process and was encouraging to see the reduction in outstanding actions.

Audit Committee:

- Received assurance that Internal Audit Recommendations are being regularly reviewed by the Executive Directors and completed by responsible officers.
- Noted the significant achievement of reducing recommendations to only 6 now outstanding and that all major recommendations have now been dealt with and closed.
- Received assurance from Internal Audit that they are satisfied with progress made.

7.2 Internal Audit Annual Plan Progress Report

Kim Betts presented a summary of the report previously circulated and taken as read.

The report summarised activity undertaken in relation to the 2020/21 Internal Audit Operational Plan for the period 1 April 2020 to 16 November 2020.

The 2020/21 Operational Plan was agreed by the Audit Committee in February 2020.

Amendments to the plan have been requested to be made by management which require subsequent approval by the Audit Committee.

The Chair expressed his congratulations on the report to all those involved, an excellent and noteworthy achievement.

Audit Committee:

Noted progress with the delivery of the 2020/21 Internal Audit Plan and approved the amendments proposed by management.

8.1 Audit Progress & Technical Update

Mazars presented a summary of the report which provided a brief update on the 2020-21 external audit of the CCG as well as an update on the Mental Health Investment Standard assurance work for 2019-20.

It also provided information on a number of national publications which may be of interest to Members.

Mark Kirkham advised Mazars have yet to complete the Audit Plan for next year but he was hopeful to provide an update on that at the next meeting. He also advised there will be changes to the Value for Money audit process this year and is awaiting confirmation.

Audit Committee:

Noted the above and felt assured on the actions being taken.

9.0 Forward Planner

The Committee reviewed the planner and there was nothing of any significance to note.

Audit Committee:

Noted the above.

10.0 Any Other Business

The Chair expressed thanks to Catherine Gibson, Secretariat support for the Committee who for the past couple of weeks was able to push some of her work to the side whilst she stepped in at such short notice to help out at a GP surgery.

A discussion took place around Data Protection – direct patient care. The Committee were advised if there are any specific examples they are concerned about then let us know.

There being no other business the Chair declared the meeting closed.

11.0 Date and Time of Next Meeting

The next meeting will be held on Tuesday 23 February 2021 at 09:30 a.m.

Audit Committee:

Noted the above.

Follow up actions

The actions required as detailed in these minutes are attached at Appendix A.

Appendix A

North Yorkshire Clinical Commissioning Group Actions from the Audit Committee

Meeting Date	Item	Action	Responsibility	Action Completed / Due to be Completed (as applicable)
24 November 2020	5.7 Freedom of Information Policy	Approved the FOI policy and recommended this for approval at the Governing Body.		
24 November 2020	5.9 EPRR Desktop Exercises	Emma Parker will present results of the testing to Audit Committee for assurance in June 2021.	Emma Parker	July 2021
24 November 2020	5.9 Information Governance Policies	A list of policies to be approved by the committee, together with their review dates to be provided by Sasha Sencier for May 2021.	Sasha Sencier	July 2021
24 November 2020	6.1 Counter Fraud Annual Plan	Update on the NHSCFA "Standards for NHS Commissioners" will be provided at the February 2021 meeting.	Rosie Dickinson	February 2021

