



Item: 11.4

INTEGRATED AUDIT AND GOVERNANCE COMMITTEE

MINUTES OF THE MEETING HELD ON MONDAY 14 MAY 2018 AT 9.00AM IN THE BOARDROOM, WILBERFORCE COURT, HULL, HU1 1UY

PRESENT:

Karen Marshall, Lay Member, Hull CCG (Chair) Jason Stamp, Lay Member, Hull CCG

IN ATTENDANCE:

Diane Hallatt, partner at Beachcroft DAC LLP (for items 7.5 and 10.1) Mark Kirkham, Partner, Mazars LPP Mike Napier, Associate Director of Corporate Affairs, Hull CCG Emma Sayner, Chief Finance Officer, Hull CCG Terry Smith, Head of Service for Counter Fraud, AuditOne Danny Storr, Deputy Chief Finance Officer (Finance), Hull CCG lan Wallace, Managing Director, AuditOne Pam Heaford, Personal Assistant, Hull CCG (Minute Taker)

1. APOLOGIES FOR ABSENCE

Robert Bassham, Internal Audit Manager, AuditOne Campbell Dearden, External Audit Manager, Mazars LPP Stuart Fallowfield, Internal Audit Manager, AuditOne Paul Jackson, Lay Member, Hull CCG (Vice Chair) Sarah Smyth, Director of Quality and Clinical Governance/Lead Nurse

It was noted, as a point of record, that it had been necessary to re-arrange this meeting from 8 May 2018 due to the late receipt of the unavoidable apologies of a second Committee member making the meeting inquorate.

2. MINUTES OF THE PREVIOUS MEETING HELD ON 13 MARCH 2018

The minutes of the Integrated Audit and Governance Committee (IAGC) meeting held on 13 March 2018 were submitted for approval. It was agreed that these were a true and accurate record of the meeting.

MINUTES OF THE EXTRAORDINARY MEETING HELD ON 18 APRIL 2018

The minutes of the extraordinary IAGC meeting held on 18 April 2018 were submitted for approval. It was agreed that these were a true and accurate record of the meeting.

Resolved

(a)	The minutes of the IAGC meeting held on 13 March 2018 were taken as a
	true and accurate record and would be signed by the Chair, and
(b)	the minutes of the extraordinary IAGC meeting held on 18 April 2018 were
	taken as a true and accurate record and would be signed by the Chair

3. MATTERS ARISING / ACTION LIST

The Action List from the meeting held on 13 March 2018 was provided for information.

The Chief Finance Officer requested that the following two actions be added from the last meeting which had previously been omitted:

Item 8.1 Financial Report

- Mental Health the forecast reduction in mental health issues for Looked After Children as being half the value of 2016/17 would be checked by the Deputy Chief Finance Officer.
- Potential Risks the Chief Finance Officer would provide a session to members on the Aligned Incentive Contract (AIC) and the Better Care Fund (BCF) at the July IAGC meeting.

Resolved:

(a) The Action List from the meeting held on 13 March 2018 was noted and would be updated accordingly

4. NOTIFICATION OF ANY OTHER BUSINESS

Any proposed item to be taken under Any Other Business must be raised and, subsequently approved, at least 24 hours in advance of the meeting by the Chair.

An update would be provided on the historical pharmaceutical case at item 10.1 and the addendum to the minutes of the IAGC meeting held on 13 March 2018 would be taken at this time.

Resolved:

(a) An update on the historical pharmaceutical case would be provided under Any Other Business.

5. DECLARATIONS OF INTEREST

In relation to any item on the agenda of the meeting, members were reminded of the need to declare:

- (i) any interests which are relevant or material to the CCG;
- (ii) any changes in interest previously declared; or
- (iii) any financial interest (direct or indirect) on any item on the agenda

Any declaration of interest should be brought to the attention of the Chair in advance of the meeting, or as soon as they become apparent in the meeting. For any interest declared, the minutes of the meeting must record:

- (i) the name of the person declaring the interest;
- (ii) the agenda item number to which the interest relates;
- (iii) the nature of the interest;
- (iv) be declared under this section and at the top of the agenda item which it relates to:

Name	Agenda Item No	Nature of Interest /Action
Jason Stamp	All agenda	Direct pecuniary interest as Chair of the
	items	Public and Patient Voice Assurance Group
		for Specialised Commissioning, NHS
		England.
		The declaration was noted – no further
		action was considered necessary.
Jason Stamp	All agenda	General Interest as Chief Executive of
	items	North Bank Forum voluntary sector who
		were currently the host organisation for the
		Social Prescribing Service and also the
		host organisation for Healthwatch Hull.
		The declaration was noted – no further
		action was considered necessary.

Resolved:

(a)	The above declarations of interest were noted – no action was required to
	be taken.

6. EXTERNAL AUDIT

6.1 DRAFT AUDIT COMPLETION REPORT

It was noted that this item would be brought to the extraordinary IAGC meeting to review the audited annual accounts to be held on 24 May 2018 and would form part of the Audit Opinion.

6.2 CCG LETTER OF UNDERSTANDING OF MANAGEMENT PROCESSES AND ARRANGEMENTS FOR AUDIT 2017/18

In response to a request for information made by the auditors, and in compliance with International Auditing Standards. The Partner, Mazars confirmed that he was in receipt of a response from the Chief Finance Officer which outlined NHS Hull CCG's management processes and arrangements in place for the 2017/18 Audit, a copy of which had been circulated for Members' information.

Assurance:

The Board can be assured that the CCG has robust management processes and arrangements in place for the 2017/18 Audit.

Resolved:

(a) The content of the Chief Finance Officer's letter of response in relation to a request for information made by the auditors as part of the 2017/18 Audit which outlined NHS Hull CCG's management processes and arrangements in place for the 2017/18 Audit was noted.

7. INTERNAL AUDIT

7.1 INTERNAL AUDIT PROGRESS REPORT

The Internal Audit Managing Director, AuditOne, presented the above report to inform and update the IAGC on progress made with regard to the 2017/18 Internal Audit Plan since the last meeting.

Final reports issued since the last meeting:

<u>Conflicts of Interest</u> – **substantial assurance** had been provided in relation to the arrangements that the CCG has in place to manage conflicts of interest. An Action Plan had been agreed to address two minor recommendations made as a result of the audit.

Information Governance – this review had been carried out as part of the planned audit work for 2017/18 and had assessed what progress Hull CCG had made in terms of preparing it's IG toolkit return and determine whether Level 2 or above had been achieved. The review considered 7 of the total 28 requirements and assessed the evidence being relied upon to support the self-assessment. The findings of the audit showed that all 7 of the sample requirements at the level claimed by the CCG had been substantiated. It was noted that this was a live document and a number of reminders had been placed in the report.

The Associate Director of Corporate Affairs advised that in relation to the audit of Committee Arrangements – this was an advisory piece and was restricted to when Committees were meeting and there may be instances where this work would run over into next year's plan.

Members were asked to note that, as part of the AuditOne Seminar Programme 2018/19, the next event was planned for 13 June 2018 in Chester-Le-Street.

Assurance:

- (i) The Board can be assured of satisfactory progress and outcomes in delivering the Internal Audit Plan, which continued to represent appropriate coverage as part of the wider assurance framework.
- (ii) The Board can be assured that **substantial assurance** has been provided in relation to the arrangements that the CCG has in place to manage conflicts of interest.

Resolved:

(a)	The results of internal audit activity since the previous meeting were noted, and
(b)	The findings of the audit of Conflicts of Interest and Information Governance were noted

7.2 DRAFT STRATEGIC INTERNAL AUDIT PLAN 2018/19 - 2020/21

The Internal Audit Managing Director, AuditOne, presented the draft Strategic Internal Audit Plan for 2018/19 – 2020/21. The document was a more detailed version of an outline plan which had been submitted to the last meeting and had been brought for final comment and approval.

It was noted that the area of Primary Care Commissioning had been included within the plan with a view to starting to incorporate some elements and raise awareness with the potential for further work in the future.

Assurance:

The Board can be assured that the CCG has an approved strategic Internal Audit Plan in place for the period 2018/19 - 2020/21

Resolved:

(a) IAGC Members formally approved the draft strategic Internal Audit Plan for 2018/19 – 2020/21

7.3 BOARD ASSURANCE FRAMEWORK (BAF) BENCHMARKING REPORT

Members were presented with the BAF Benchmarking Report for information and were advised that this document was a piece of collaborative work carried out on an annual basis to provide insight to enable organisations to understand how key elements of their Assurance Frameworks compared with others.

The insights provided were from a detailed review of 53 CCG Assurance Frameworks across the country.

Members noted the findings of the review which provided assurance in relation to the content of Hull CCG's BAF, along with some areas to learn from.

Resolved:

(a) IAGC Members noted the content of the BAF Benchmarking Report

7.4 COUNTER FRAUD WORKPLAN 2018/19

The Head of Service for Counter Fraud, AuditOne, presented the Counter Fraud Workplan for 2018/19 for Hull CCG which provided the Committee with details of the planned counter fraud activity to be carried out during 2018/19. The draft plan had previously been shared with the Chief Finance Officer.

Members were advised that a collaborative approach was being developed across Hull and Humber CCGs which would provide economies of scale and allow a higher level of pro-active work to be carried out across CCGs, providing consistency where possible and freeing up time to do more specific work. The plan was more detailed and task orientated, providing greater transparency and ownership.

The IAGC would receive regular progress reports for Hull CCG against each standard and task.

AuditOne had introduced a new risk assessment process this year which had fundamentally changed how the service would be delivered. A structure was now in place which comprised of the following members of the Counter Fraud Team:

- Paul Bevan Senior Counter Fraud Manager and CF Lead across all CCGs
- Rebecca Napper Lead Counter Fraud Manager
- Nikki Cooper Local Counter Fraud Specialist
- Martyn Tait Local Counter Fraud Specialist
- Stephen Veitch Local Counter Fraud Specialist

Assurance:

The Board can be assured that the CCG has an agreed Counter Fraud Workplan in place for 2018/19.

Resolved:

(a) IAGC Members noted the Counter Fraud Workplan for 2018/19 which detailed the planned counter fraud activity to be carried out during the year.

7.5 COUNTER FRAUD ANNUAL REPORT 2017/18

The Head of Service for Counter Fraud, AuditOne, presented the Counter Fraud Annual Report for 2017/18 for information. The report provided the Committee with details of counter fraud activity carried out during 2017/18.

The report also included a copy of the CCG's annual self-assessment ratings and members were advised that a more robust system of testing had been introduced to justify ratings and ensure that the ratings submitted were accurate. It was also stated that the benchmarking data would become more meaningful next year.

The Head of Counter Fraud, AuditOne, advised Members that, although not as visible, a huge amount of work had been going on and now that a team and systems were in place, they were in a position to deliver a visible engaged counter fraud service next year.

The Chief Finance Officer fully supported the work that had been done and the counter fraud team in place and stated that, in relation to financial recovery linked to CCGs, there was a need to understand the specifics behind areas of recovery. The Head of Counter Fraud advised that they would be sending out briefings and they would be introducing an alert system which would commence soon.

The Chief Finance Officer also wished to remind IAGC members that Hull CCG was one of the only CCGs to have had a national inspection from Kevin Barnes of NHS Protect, the results from which had been very positive.

The Associate Director of Corporate Affairs advised that there had been a joint approach to the self assessment ratings with a look back over the year using audit as a tool to improve the organisation.

Assurance:

The Board can be assured that there is a team and systems in place to deliver a counter fraud service for the CCG next year.

Robust discussions have taken place with regards to the draft Head of Internal Audit Opinion for the year ending 31 March 2018. Progress had been made and senior CCG officers were to meet urgently with the Managing Director of AuditOne to clarify any remaining queries in this regard.

Resolved:

(a) IAGC Members noted the content of the Counter Fraud Annual Report 2017/18;

(b)	IAGC Members challenged comments made in the draft Head of Internal
	Audit Opinion for the year ending 31 March 2018 which had raised some
	concerns in relation to "significant factors outside the work of internal audit",
	and
(0)	conjur CCC officers were to most urgently with the Managing Director of

(c) senior CCG officers were to meet urgently with the Managing Director of AuditOne to clarify any remaining queries in regard to the draft HolAO.

8. FINANCIAL GOVERNANCE

8.1 FINANCIAL REPORT

The Deputy Chief Finance Officer presented the Financial Report to update the Committee on current financial performance and pressures.

It was reported that the CCG's draft annual accounts for 2017/18 (subject to audit) showed that it had achieved a £3.6m surplus against the in year allocation. This included the release of the 0.5% risk reserve and the return of the benefit associated with Category M drugs (previously retained by NHS England) in order to manage the national financial position of the NHS.

Expenditure had been contained within the 2017/18 running cost allocation of £6.2m.

Financial Performance

The following update had been provided in relation to significant variances:

Spire Healthcare – a greater than planned number of referrals into Spire had resulted in an overspend of £1.7m. The implementation of the MSK triage pathway had resulted in a significant reduction in the number of referrals for orthopaedics towards the end of the year and was expected to have an impact on activity in the next financial year. The reduction in referrals had not compromised Patient Choice. This area would continue to be closely monitored.

Continuing Healthcare – there had been a significant underspend of £3.2m in this area this year which would continue to be closely monitored. Various ways of joint working with the Local Authority were being looked into with a view to making the process more efficient.

Community Based – the most significant area of overspend in this area had related to bespoke packages of care. There had also been overspends on NHS111 and community equipment.

Prescribing – there had been an underspend in this area of £2m which included the return of the benefit realised from the price reduction from Category M drugs which had previously been retained by NHS England.

Primary Care Delegated Commissioning – there had been an underspend of £773k, which was an inherited historical underspend. Regular meetings were taking place with NHS England to understand these budgets and ensure that the impact of the primary care incentive scheme was fully reflected.

Mental Health – there had been an overspend in this area of £648k which related to out of area mental health costs which had seen an increase in numbers over recent months.

The CCG was working closely with the Local Authority looking at the process of how to integrate budgets.

The CCG have had two significant risk sharing arrangements in place throughout the year; one with Hull City Council which related to the BCF and one with Hull & East Yorkshire Hospitals NHS Trust (HEYHT) and East Riding of Yorkshire (ERoY) CCG which related to the AIC. Neither of which had needed to be enacted.

Better Payment Practice Code (BPPC) (30 day target)

It was reported that Hull CCG's performance against the BPPC 30 day target had been over 95%.

Delivery of Quality Innovation Productivity and Prevention (QIPP) targets

The savings made as a result of the delivery of the QIPP programme for 2017/18 were noted.

STP Income and Expenditure Summary – the total STP income and expenditure were noted, which had left the CCG with a net position of £176k.

The Chief Finance Officer informed members that Hull CCG would continue to host the STP for the time being and also made members aware that the STP were required to comply with Hull CCG governance arrangements.

Assurance:

The Board can be assured that the CCG has achieved all financial targets for the year. The overspends had been managed through the use of underspends and the contingency reserve. Steps have been put in place as part of the financial planning and contracting round for 2018/19 in order to minimise these risks going forward.

Resolved:

(a)	The performance for the 2017/18 year and the surplus of £15.3m as at 31	
	March 2018 (subject to audit) were noted, and	
(b)	the achievement of financial targets was noted	

8.2 REVIEW OF LOSSES AND SPECIAL PAYMENTS

The Deputy Chief Finance Officer advised that there were no losses or special payments to report.

Assurance:

The Board can be assured that appropriate systems and processes are in place to discuss and declare any losses and special payments made.

8.3 **CONTRACT VALUES 2018/19**

The Chief Finance Officer provided IAGC members with an update on the contract position for 2018/19 and advised that all major contracts had been agreed for the following values:

Hull & East Yorkshire Hospitals Trust	£189.3m
Yorkshire Ambulance Service NHS Trust	£ 8.8m (999 only)
Spire	£ 6.0m (agreed to close AQN)
City Healthcare Partnership CIC	£ 32.0m

Humber Teaching NHS Foundation Trust £ 35.3m

The Chief Finance Officer advised members that, in relation to the AIC with HEYHT, this would be the second year of risk sharing arrangements which was shared equally between Hull CCG, ERoY CCG and HEYHT. The AIC was one of the biggest advances of its kind both in terms of transformation and clinician engagement and and had attracted a great deal of interest from other organisations wishing to learn from it.

Assurance:

The Board can be assured that the CCG has agreed contracts in place for 2018/19 with all major providers.

Resolved:

(a) IAGC Members noted the agreed position of all major contracts.

8.4 PRIMARY CARE PRESCRIBING REBATE OFFERS FOR NHS HULL CCG

Members were advised that the Planning and Commissioning Committee had considered and endorsed the following Primary Care Rebate Schemes at it's meeting on 6 April 2018 and they had now been submitted for approval by the IAGC:

- GlucoRx medley
- Convatec
- Apidra
- Insuman

The IAGC Chair questioned why the paperwork for two of the schemes stated in the recommendation section "Scheme considered: not fully appropriate" and sought further clarity on this statement before sign off.

The Deputy Chief Finance Officer would clarify this matter with the Medicines Management Team and would update the IAGC Chair accordingly.

Subject to the IAGC Chair being fully informed and assured, she would sign off the Primary Care Rebate Schemes outside of the meeting.

Assurance:

The Board can be assured that the CCG has an agreed process in place to consider and approve any Primary Care Rebate Schemes for the CCG. Subject to the provision of further information and assurance, the IAGC Chair would sign off four Primary Care Rebate Schemes previously considered and endorsed by the Planning and Commissioning Committee.

Resolved:

(a)	IAGC Members noted the Primary Care Rebate Schemes for: GlucoRx
	medley, Convatec, Apidra and Insuman recommended for approval by the
	Planning and Commissioning Committee;
(b)	the IAGC Chair sought further clarity around the paperwork, and
(c)	subject to the provision of further information and assurance, the IAGC Chair
	would sign off the four Primary Care Rebate Schemes outside of the meeting

9. GOVERNANCE

9.1 WAIVING OF PRIME FINANCIAL POLICIES

IAGC Members were updated on the approval of the following tender waivers:

 Implementation of MJOG in Primary Care (Automated Appointment Reminder Service)

Proposed Provider: MJOG Limited

Contract Value: £84,800 (lifetime contract value)

Contract Period: 3 years

Hull City Council: Legal Advice and Representation – Service Level Agreement

Value: £0

SLA Period: 12 months to 31 March 2019

IAGC Members noted and endorsed the approval of the above tender waivers.

Assurance:

The Board can be assured that appropriate processes were being followed in relation to the waiving of prime financial policies. Approved tender waivers relating to the implementation of MJOG in Primary Care and a Service Level Agreement with Hull City Council for legal advice and representation had been endorsed by the IAGC.

Resolved:

(a) The approved tender waivers in relation to the implementation of MJOG in Primary Care and a Service Level Agreement with Hull City Council for legal advice and representation were endorsed.

9.2 CORPORATE RISK REGISTER

The Associate Director of Corporate Affairs presented the latest Corporate Risk Register for consideration and approval.

There were currently 27 risks on the CCG Risk Register. Of the 27 risks, 18 had a current risk rating of high or extreme and were included within the report.

Members were advised that the following new risk had been added to the Risk Register since the previous report:

• Risk 929 – which related to the new operating model for Adult Social Care which was based around supporting people outside of residential care.

IAGC members were requested to approve the removal of Risk 919 which related to the Homecare market in Hull. As this risk was still rated high on the register, members sought clarity around the reason for it's removal, particularly given that the new mitigated risk did not seem to directly address the current risk. The Chair requested that there be a clearer articulation of new risks and how the removal of a risk related to it. The Associate Director of Corporate Affairs would pick this issue up with the Director of Quality and Clinical Governance/Lead Nurse who was not in

attendance at this meeting and it was agreed that, in the interim, Risk 919 would remain on the Risk Register until the next meeting.

The remaining risks had maintained their previous risk rating.

Jason Stamp commented with regards to Risk 861 whether a review of the rating would be advisable in the light of a further two Never Events having been reported.

Assurance:

The Board can be assured that systems and processes are in place to identify and manage risks on the Risk Register. The IAGC are kept updated on any movements, provided with the opportunity to review and comment and approve the removal of any risks from the Risk Register. A new risk (Risk 929) which related to the new operating model for Adult Social Care which was based around supporting people outside of residential care had been added to the Risk Register.

Resolved:

(a)	The continued work to monitor and update the risks on the Risk Register was
	noted;
(b)	the addition of Risk 929 which related to the new operating model for Adult
	Social Care based around supporting people outside of residential care was
	noted;
(c)	that Risk 919 remain on the Risk Register until clarity around the reason for
	it's removal and how it related to a new risk be provided, and
(d)	with regard to Risk 861 Jason Stamp requested that the rating be reviewed in
	the light of two Never Events being reported.

9.3 BOARD ASSURANCE FRAMEWORK

The Associate Director of Corporate Affairs presented the current Board Assurance Framework (BAF) for consideration.

The BAF comprised of a total of 26 risks relating to the 12 strategic objectives of the CCG, of which 19 were rated as high and 7 rated as moderate.

Members were advised that, following a facilitated Board Assurance Framework session by Robert Bassham of AuditOne at the last Board Development Session on 27 April 2018, the Associate Director of Corporate Affairs was in the process of working with each risk owner and a refreshed BAF for 2018/19 would be brought to the next meeting in July, at which time it would be given greater scrutiny by the IAGC.

It was noted that there had not been much movement in overall risks,

Assurance:

The Board can be assured that work was taking place to develop a Board Assurance Framework for 2018/19 which would be brought to the next IAGC meeting in July for consideration.

Resolved:

(a)	Members noted that, following a facilitated BAF Board development session,
	work was taking place with each risk owner, and

(b) a refreshed BAF for 2018/19 would be brought to the next IAGC meeting in July

9.4 DECLARATIONS OF INTEREST FOR COMMITTEE MEMBERS, EMPLOYEES AND RELEVANT OTHERS, BOARD MEMBERS AND COUNCIL OF MEMBERS

The Associate Director of Corporate Affairs presented a report to update the IAGC on the Declarations of Interest for Committee Members, Employees and Relevant Others, Board Members and Council of Members.

The Chair requested that full compliance with Declarations of Interest from Council of Members be ensured moving forward and it was noted that professional interests would also need to be recorded – the Associate Director of Corporate Affairs would feed these comments back to the Corporate Affairs Officer.

Assurance:

The Board can be assured that the CCG has received updated Declarations of Interest for Committee Members, Employees and Relevant Others, Board Members and Council of Members.

Resolved:

(a)	IAGC Members noted the Declarations of Interest for Committee Members,
	Employees and Relevant Others, Board Members and Council of Members,
	and
(b)	the Associate Director of Corporate Affairs to feed back the Chair's
	comments in relation to full compliance with Declarations of Interest from

(b) the Associate Director of Corporate Affairs to feed back the Chair's comments in relation to full compliance with Declarations of Interest from Council of Members moving forward and also the recording of professional interests

9.5 GIFTS AND HOSPITALITY REPORT

The Associate Director of Corporate Affairs presented this report which provided the IAGC with details of declarations of gifts and hospitality made since the last report to the IAGC on 7 March 2017.

Assurance:

The Board can be assured that the CCG maintains a register of all declarations of gifts and hospitality which is regularly reviewed by the IAGC.

Resolved:

(a) Members noted the declarations of gifts and hospitality made since the report to the IAGC on 7 March 2017.

9.6 PROCUREMENT PANEL ASSURANCE UPDATE

The Chief Finance Office presented this report to update the IAGC in respect of procurement activity for NHS Hull CCG during the period April 2017 to March 2018.

It was reported that, during this period, there had not been a great amount of procurement activity, which was combined with a move towards an integrated delivery system with the Local Authority.

The following contracts had been awarded through the Humber Coast and Vale STP:

- Health Needs Analysis In Hospital Workstream
- Legal Services CCGs
- Legal Services Providers

Members were advised that, going forward, there would be some significant pieces of work, e.g. in the areas of:

- APMS Calvert and Newington
- Community Paediatrics

Jason Stamp sought understanding on the process for sign off of procurement decisions with the Local Authority and the Chief Finance Officer advised that, although there was dual working through the Integrated Commissioning Officers Board (ICOB) and Committees in Common (CIC), the final decision making process sits with each organisation.

Assurance:

The Board can be assured that correct procedures and policies are being followed in relation to procurement.

The CCG would continue to use procurement where it was needed and there was a move towards an integrated delivery system with the Local Authority.

Resolved:

(a) the contents of the Procurement Panel Assurance Update Report were considered and noted.

9.7 HEALTH AND WELLBEING GROUP ACTION PLAN

Members had been presented with a report which provided an update on the ongoing activities against the Health and Wellbeing Group action plan.

Jason Stamp requested that the action plan be revisited and the Associate Director of Corporate Affairs agreed to pick this up with the Director of Quality and Clinical Governance/Lead Nurse.

Resolved:

(a) The Associate Director of Corporate Affairs would ask the Director of Quality and Clinical Governance/Lead Nurse to revisit the Health and Wellbeing Group action plan.

9.8 UPDATED POLICY ON THE PROVISION AND USE OF FREE GIFTS, PRIZES AND INCENTIVES

The Associate Director of Corporate Affairs presented a report which notified IAGC Members of the amendments made to the Policy on the Provision and Use of Free Gifts, Prizes and Incentives which had been updated to reflect latest Declarations of Interest guidance. Members were advised that a copy of the full policy was available on request.

Members noted and approved the amendments and requested that in relation to bullet point 9 – the mechanism in place for offering gift/store cards be reviewed to ensure that it did not have an impact on any individual's benefits.

The updated Policy on the Provision and Use of Free Gifts, Prizes and Incentives was approved by the IAGC, subject to the above minor amendment being made.

Assurance:

The Board can be assured that the CCC regularly reviews and updates it's policies and guidance to reflect organisational changes and comply with latest regulations. An updated Policy on the Provision and Use of Free Gifts, Prizes and Incentives had been approved by the IAGC.

Resolved:

(a)	The mechanism in place for offering gift/store cards to be reviewed to ensure
		that it did not have an impact on any individual's benefits, and
(b)	the updated Policy on the Provision and Use of Free Gifts, Prizes and
		Incentives was approved by the IAGC, subject to the above minor
		amendment being made.

- 9.9 HEALTH, SAFETY AND SECURITY GROUP the draft minutes of the Health, Safety and Security Group meeting held on 21 March 2018 were noted. The Chair requested that clear demarcation be made in the minutes in relation to any future security incidents between "our responsibility" and "the wider responsibility".
- **9.10 QUALITY AND PERFORMANCE COMMITTEE MINUTES** The minutes of the meetings held on 20 February 2018 and 20 March 2018 were noted.
- **9.11 PRIMARY CARE JOINT COMMISSIONING COMMITTEE MINUTES** the minutes of the meeting held on 23 February 2018 were noted.
- **9.12 PLANNING AND COMMISSIONING COMMITTEE MINUTES** the minutes of the meeting held on 2 February 2018 and 2 March 2018 were noted.
- 10. GENERAL
- 10.1 ANY OTHER BUSINESS
- **10.1.i HISTORICAL PHARMACEUTICAL CASE/UPDATE REPORT**This item had been redacted due to the ongoing investigation.
- 10.2 DATE AND TIME OF NEXT MEETING

The next full meeting of the IAGC will be held on **Tuesday 10 July 2018**, at 9.00am in the Boardroom at Wilberforce Court.

There will be extraordinary IAGC meeting on **Thursday 24 May 2018** at 1.00pm to review the audited annual accounts.

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	- and	
Signed: _		_

Chair of the Integrated Audit and Governance Committee

Date: 10 July 2018

Abbreviations

1	
AIC	Aligned Incentive Contract
ASM	Audit Strategy Memorandum
BAF	Board Assurance Framework
BCF	Better Care Fund
CHC	Continuing Healthcare
CiC	Committees in Common
Col	Conflicts of Interest
CYP	Children and Young People
DoLS	Deprivation of Liberty Safeguard
EPRR/BCM	Emergency Preparedness Resilience and Response Business
	Continuity Management
ER0Y CCG	East Riding of Yorkshie CCG
Fol	Freedom of Information
GDPR	General Data Protection Regulation
HEYHT	Hull and East Yorkshire Hospitals Trust
HoIAO	Head of Internal Audit Opinion
HS&SG	Health, Safety and Security Group
ICOB	Integrated Commissioning Officers Board
IFP	Integrated Financial Plan
IFR	Individual Funding Requests
LAC	Looked After Children
LCFS	Local Counter Fraud Specialist
LSMS	Local Security Management Specialist
LWAB	Local Workforce Advisory Board
MH & LD	Mental Health and Learning Disabilities
MoU	Memorandum of Understanding
NECS	North of England Commissioning Support
NFI	National Fraud Initiative
NHS-CHC	NHS Continuing Healthcare
PBR	Payment by Results
PCCC	Primary Care Commissioning Committee
PHB	Personal Health Budget
PPD	Prescription Pricing Division
QIPP	Quality Innovation Productivity and Prevention
SEND	Special Educational Needs and Disability
SI	Serious Incident
SOPs	Standard Operating Procedures
STP	Sustainability and Transformation Plan
SRT	Self Review Tool
TCP	Transforming Care Programme
ToR	Terms of Reference
VfM	Value for Money
L	<u>, </u>