

INTEGRATED AUDIT AND GOVERNANCE COMMITTEE

MINUTES OF THE MEETING HELD ON 8 JULY 2019 AT 9.00AM IN THE BOARDROOM, WILBERFORCE COURT, HULL, HU1 1UY

PRESENT:

K Marshall, NHS Hull CCG (Lay Member) (Chair)
J Stamp, NHS Hull CCG (Lay Member)

IN ATTENDANCE:

P Heaford, NHS Hull CCG (Personal Assistant) - *Minute Taker*
S Kendall, Audit Manager, AuditOne
M Kirkham, Mazars LPP (Partner)
M Napier, NHS Hull CCG (Associate Director of Corporate Affairs)
E Sayner, NHS Hull CCG (Chief Finance Officer)
D Storr, NHS Hull CCG (Deputy Chief Finance Officer-Finance) (*up to item 9.3*)
S Smyth (Director of Quality and Clinical Governance/Lead Nurse) (*from item 8.3*)

1. APOLOGIES FOR ABSENCE

Apologies for absence had been received from Nicola Hallas, Mazars.

2. MINUTES OF THE PREVIOUS MEETING HELD ON 14 MAY 2019

The minutes of the Integrated Audit and Governance Committee (IAGC) meeting held on 19 May 2019 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 23 MAY 2019

The minutes of the extraordinary IAGC meeting held on 23 May 2019 were submitted for approval. It was agreed that these were a true and accurate record of the meeting.

Resolved:

(a)	Members of the Integrated Audit and Governance Committee approved the minutes of the meeting held on 14 May 2019 as a true and accurate record and these would be signed by the Chair, and
(b)	Members of the Integrated Audit and Governance Committee approved the minutes of the extraordinary meeting held on 23 May 2019 as a true and accurate record and these would be signed by the Chair

3. MATTERS ARISING / ACTION LIST

The Action List from the meeting held on 14 May 2019 was presented for information and the following update was provided:

In relation to Minute No. 9.4 (of the meeting held on 14 May 2019) – further guidance to be provided on types of financial declarations of interest to include premises and estate – The associate Director of Corporate Affairs advised that

further training around declarations of interest would include an element of live examples.

Resolved:

(a)	The Action List from the meeting held on 14 May 2019 and the update provided was noted.
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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.

Resolved:

(a)	There were no items of Any Other Business to be taken at this meeting.
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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 and Action taken
J Stamp	9.7	Declared a Direct Financial Interest due to the fact that he worked with Specialised Commissioning nationally. The declaration was noted – no further action was considered necessary.

Resolved:

(a)	The above declaration of interest was noted and no further actions was considered necessary.
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6. EXTERNAL AUDIT

6.1 ANNUAL AUDIT LETTER HULL CCG 2018/19

Mark Kirkham, Mazars, presented the Annual Audit Letter (AAL) for Hull CCG for the year ending 31 March 2019. IAGC Members were advised that, following the submission of the Audit Completion Report (ACR) to the extraordinary meeting of

the IAGC held on 23 May 2019 which set out the findings and key issues arising from the 2018/19 audit at Hull CCG, the AAL provided a summary of the key messages which had previously been conveyed and formed the final document of the 2018/19 audit process.

Members noted the content of the Annual Audit Letter 2018/19 and would recommend that the CCG Board formally approved this document at its next meeting on 26 July 2019 for publication on the CCG website.

Assurance:

The Board can be assured that the contents of the NHS Hull CCG Annual Audit Letter 2018/19, which summarised the findings and key issues arising from the 2018/19 audit at Hull CCG, had provided an unqualified opinion on the financial statements and had not identified any issues to report.

The IAGC recommended that the CCG Board formally approved the NHS Hull CCG Annual Audit Letter 2018/19 for publication.

Resolved:

(a)	The contents of the NHS Hull CCG Annual Audit Letter 2018/19 were considered, and
(b)	the IAGC recommended that the CCG Board formally approved the NHS Hull CCG Annual Audit Letter 2018/19 for publication on the CCG website

7. INTERNAL AUDIT

7.1 INTERNAL AUDIT PROGRESS REPORT

Sue Kendall, AuditOne, presented the Internal Audit Progress Report to inform the Integrated Audit and Governance Committee on progress made with regard to the 2018/19 Internal Audit Plan and the following update was provided:

- **Medicines Management** – an audit of Medicines Management had been finalised which had provided **substantial assurance**, with one minor recommendation.
- **Partnership Working – Local Authority Integration** – this audit was currently on-going and more information was being gathered.

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, from an audit of Medicines Management, that **substantial assurance** had been provided with only one minor recommendation.

Resolved:

(a)	Integrated Audit and Governance Committee Members noted the progress
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	against the 2018/19 Internal Audit Plan, and
(b)	Integrated Audit and Governance Committee Members noted that the final report in relation to an audit of Medicines Management had provided substantial assurance .

7.2 INTERNAL AUDIT PLAN 2019/20

Sue Kendall, AuditOne, presented the proposed Hull CCG Operational Internal Audit Plan for the year 2019/2020 for approval.

Members were reminded that, during the last year, there had been a Consortia change and an increase in the day rate. The number of days for the CCG had been set at 89 days (as opposed to 110 days for the previous year). To achieve this reduction in days a couple of audits had been removed from the plan; however members were assured that additional elements could be incorporated into the mandated audits and wider work if needed to address these areas.

It was agreed that the plan was reflective of where we were as an organisation and it was noted that the plan could be flexed if extra work was required in year.

IAGC Members approved the Internal Audit Plan for 2019/2020.

Assurance:

The Board can be assured that the CCG has an approved Internal Audit Plan in place for 2019/2020.

Resolved:

(a)	IAGC Members considered and approved the Internal Audit Plan for 2019/2020.
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7.3 INTERNAL AUDIT ANNUAL REPORT 2018/19

Sue Kendall, AuditOne, presented the Internal Audit Annual Report 2018/19 for review and approval.

The Annual Report provided a summary of the 2018/19 audit activity and included the final Head of Internal Audit Opinion for the year which had provided an overall opinion of **substantial assurance**.

IAGC Members noted and formally approved the Internal Audit Annual Report for 2018/19.

Assurance:

The Board can be assured that the Internal Audit Annual Report for 2018/19, which included the final Head of Internal Audit Opinion for the year, had provided an overall opinion of **substantial assurance**.

Resolved:

(a)	Integrated Audit and Governance Committee members noted and approved the Internal Audit Annual Report for 2018/19.
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8. FINANCIAL GOVERNANCE

8.1 FINANCIAL REPORT

The Deputy Chief Finance Officer presented the Financial Report for consideration, which provided the summary financial performance for the period 1 April 2018 to 31 May 2019 and the CCG's forecast year end position for 31 March 2020.

Members were advised that the CCG was currently forecasting to achieve a balanced position against the in-year allocation. There was therefore no impact on the CCG's historic surplus of £15.335m which was in line with the 2019/20 financial plan submitted to NHS England.

This year's running cost allocation was £6.196m and the current forecast was that expenditure would be contained within this financial envelope.

Financial Performance

Members were advised that, at this early stage of the year, the CCG's forecast was based on the assumption that expenditure would be in line with the budget. Variances at Month 2 were relatively insignificant and in some cases related to under or over accruals from the 2017/18 financial year.

It was noted that budgets had been adjusted for significant recurrent pressures / underspends in the previous financial year, however some of these adjustments were still to be released from reserves.

In order to manage the financial position and achieve the balance required by NHS England, the CCG had accessed the contingency reserve that was set aside in the financial plan as well as potential slippage on reserves.

The CCG was party to the following two significant risk sharing arrangements:

- The Better Care Fund with Hull City Council, and
- The Aligned Incentive Contract with Hull University Teaching Hospitals NHS Trust (HUTHT) and East Riding of Yorkshire CCG (ERYCCG)

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

It was reported that Hull CCG's performance against the BPPC 30 day target to 31 May 2019 was 97.41% on value and 97.78% on number for non NHS invoices and 99.60% and 98.43% on the value and number of non NHS invoices respectively.

Delivery of Quality Innovation Productivity and Prevention (QIPP) targets

The QIPP programme for 2019/20 was noted. The information had been presented in a format which was in line with NHSE reporting.

Health and Care Partnership Income and Expenditure Budgets

Members were advised that, since writing the report, these budgets had now been agreed and invoices would be going out. The Health and Care Partnership would be hosting significant amounts of central resource to be spent across the area and members were assured that Hull would receive a fair and proportionate share of the allocation.

Debtors and Creditors

There was one creditor over 6 months old and over £5,000 for £612k which related to Community Health Partnerships.

There were three outstanding debtors over 6 months old and over £5,000, the largest of these was for £67.8k which related to NLaG for STP recharges. The Chief Finance Officer would escalate this matter if required. The other two debtors related to a former GP who was repaying via scheduled payments and an issue with Hull City Council which had now been resolved.

Assurance:

The Board can be assured that the CCG is currently forecasting to achieve a balanced position against the in-year allocation. There is therefore no impact on the CCG's historic surplus of £15.335m which is in line with the 2019/20 financial plan submitted to NHS England.

Resolved:

(a)	Integrated Audit and Governance Committee Members noted the performance for the year to 31 May 2019 and noted the forecast of a balanced in year position, and
(b)	Integrated Audit and Governance Committee Members noted the achievement/forecast of financial targets.

8.2 LOSSES AND SPECIAL PAYMENTS

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

The Director of Quality and Clinical Governance joined the meeting.

8.3 UPDATE ON THE INTEGRATED FINANCIAL PLAN

The Deputy Chief Finance Officer presented a report to update the committee on the latest position with regard to the Integrated Financial Plan (IFP) with Hull City Council and the following areas were highlighted.

Members were advised that, although Hull CCG and Hull City Council were separate statutory organisations, both had an understanding of each other's decision making process and spends and had been developing a joint governance process to run alongside the governance structures of the individual organisations.

A number of schemes were currently being worked that would combine resources and were aimed at improving services.

There was a need to quantify benefits and achievements and, in addition to the IFP, a joint financial report would be produced this year which would highlight the risks and opportunities of the partners as well as highlight the work that was being undertaken to manage these.

The Finance teams would also be developing an Integrated Prioritisation Framework to help formalise a joint approach to investment and disinvestment. The financial planning and governance arrangements would sit alongside and the intention of the Integrated Prioritisation Framework would be to make this process easier to follow and ensure that decisions made were in line with an Integrated Health and Social Care Strategy.

The Chief Finance Officer stated that, with regard to Social Care, going forward this would enable us to give a CCG perspective.

IAGC Members would be kept updated on progress.

Assurance:

The Board can be assured that the CCG is working closely with Hull City Council on the continued development of an Integrated Financial Plan, along with the production of a joint finance report and development of an Integrated Prioritisation Framework.

Resolved:

(a)	Integrated Audit and Governance Committee Members noted the latest position with regard to the Integrated Financial Plan with Hull City Council.
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8.4 PRIMARY CARE PRESCRIBING REBATE OFFER NHS HULL CCG

The following Primary Care Prescribing Rebate offers, previously considered by the Planning and Commissioning Committee, were submitted to the IAGC for approval:

- Edoxaban
- Beclometasone Dipropionate Inhaler

The Edoxaban offer was considered first, for which it was noted that the approximate rebate value per 12 months was only £1,585.50. The Chair questioned the benefit of such a small financial saving and needed to understand the wider context and background to the decision made by the Planning and Commissioning Committee.

IAGC Members did not feel they could approve the Edoxaban offer without further detail around the discussion and rationale. There was also a need to understand the rebate process and a copy of the Primary Care Prescribing Rebate Offer Policy would be requested.

It was agreed that a decision on both Primary Care Prescribing Rebate offers would be deferred until more supporting information had been provided.

Resolved:

(a)	A decision on both Rebate Offers had been deferred;
(b)	the Medicines Optimisation Pharmacist would be asked to provide more detail around the background to the Edoxaban offer outside of the meeting,
(b)	a copy of the Primary Care Prescribing Rebate Offer Policy would be sought to provide understanding of the rebate process, and
(b)	pending the above assurance, the Rebate Offers would be approved virtually outside of the meeting

8.5 ASSURANCE ENGAGEMENT OF THE MENTAL HEALTH INVESTMENT STANDARD

The Deputy Chief Finance Officer presented a report to inform the committee of the work that was going to be performed by Mazars on the CCG's compliance with the Mental Health Investment Standard.

IAGC members noted the content of the report.

Resolved:

(a)	Integrated Audit and Governance Committee Members noted the work that was going to be performed by Mazars on the CCG's compliance with the Mental Health Investment Standard.
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9. GOVERNANCE

9.1 WAIVING OF PRIME FINANCIAL POLICIES

There were no tender waivers to report to this meeting.

9.2 CORPORATE RISK REGISTER

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

There were currently 26 risks on the CCG Risk Register. Of the 26 risks, 18 had a current risk rating of high or extreme and were included within the report.

The following comments were made:

Risk 839 and Risk 898

- Key controls - dates to be updated
- Details of gaps in controls - are the key controls correct?

Risk 911 - Humber FT – risk score to be reviewed (higher?)

Risk 915 – Primary Care – risk score to be reviewed (higher?)

Risk 902 – Resilient workforce in Primary Care

- Details of gaps in controls – are the key controls correct?
- Risk score to be reviewed (higher?)

Risk 922 – The Aligned Incentive Contract – risk and rating to be reviewed

Risk 923 - Business Continuity Planning – narrative to reflect risk rating

Risk 928 – risk rating to be reviewed

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.

Resolved:

(a)	The continued work to monitor and update the risks on the Risk Register was noted;
(b)	Members requested that the risk score of a number of risks be reviewed.

The Chief Finance Officer left the meeting

9.3 BOARD ASSURANCE FRAMEWORK (BAF) 2019/20

IAGC members were advised that the Board Assurance Framework (BAF) 2019/20 was being finalised and the Associate Director of Corporate Affairs would share the

BAF virtually as soon as it was complete, prior to detailed consideration at the September IAGC meeting.

Resolved:

(a)	The Associate Director of Corporate Affairs would share the Board Assurance Framework for 2019/20 virtually once finalised, and
(c)	the BAF for 2019/20 would be brought back to the next IAGC meeting in September for detailed consideration.

9.4 FREEDOM OF INFORMATION REQUESTS Q4 REPORT

The Associate Director of Corporate Affairs presented the Freedom of Information (FOI) Q4 Report for consideration, which provided an update on the current position of FOI requests made to NHS Hull CCG from January 2019 to March 2019.

The report provided details of FOI requests received during Q4, along with a summary of requestors. There had been no missed requests during this period and the CCG had been fully compliant with the 20 day response deadline.

Members were advised that there had been one Subject Access Request (SAR) during this period which had gone through the correct procedures and was being processed.

Assurance:

The Board can be assured that the CCG has a process in place to respond to all Freedom of Information requests received. During the period 1 January 2019 to March 2019 there had been no missed requests and the CCG had been fully compliant with the 20 day response deadline.

Resolved:

(a)	IAGC members noted the contents of the Freedom of Information Requests Q4 Report
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9.5 CLAIMS REPORT

The Associate Director of Corporate Affairs advised that there had been no claims to report.

9.6 EMERGENCY PREPAREDNESS, RESPONSE AND RESILIENCE/BUSINESS CONTINUITY (EPRR/BCM) ANNUAL REPORT 2018/19

Members noted the contents of the Annual Report for 2018/19 which provided an oversight of the activities undertaken within the CCG in relation to Emergency Preparedness, Response and Resilience / Business Continuity from April 2018 to March 2019.

The joint EPRR/BCM group, comprising of representation from NHS Hull Clinical Commissioning Group (Hull CCG), NHS East Riding of Yorkshire Clinical Commissioning Group (ERY CCG) and North Lincolnshire Clinical Commissioning Group (NL CCG), continued to meet on a regular basis and ensured that plans, where appropriate, were aligned across Hull, the East Riding and North Lincolnshire.

Members were advised that a live exercise was due to be undertaken and this would require careful planning.

Integrated Audit and Governance Committee members approved the Emergency Preparedness, Response and Resilience / Business Continuity Annual Report 2018/19.

Assurance:

The Board can be assured by the activities undertaken within the CCG and plans in place in relation to Emergency Preparedness, Response and Resilience / Business Continuity, which were aligned across Hull, the East Riding and North Lincolnshire.

Resolved:

(a)	Integrated Audit and Governance Committee members approved the Emergency Preparedness, Response and Resilience / Business Continuity Annual Report for 2018/19.
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9.7 INDIVIDUAL FUNDING REQUEST (IFR) ANNUAL REPORT 2018/19

Jason Stamp declared a Direct Financial Interest in relation to item 9.7 due to the fact that he worked with Specialised Commissioning nationally. The declaration was noted – no further action was considered necessary.

The Chair advised that she had returned the first version of the IFR Annual Report 2018/19 to North of England Commissioning Support (NECS) and had requested that some changes be made to the content. She advised that the second version of the annual report, which had been circulated to committee members for consideration, was still not in an acceptable format and was lacking some key information.

It was proposed that, moving forward, NECS would need to timetable the preparation of the IFR Annual Report for Hull CCG in good time and the following internal steps were suggested:

The annual report would need to be presented for review/consideration in the following order:

1. IFR Panel
2. Planning and Commission Committee
3. Integrated Audit and Governance Committee
4. CCG Board

It was further felt that the report did not reflect the rigour of the IFR Panel, whose purpose was to review requests against the Clinical Policies. It was the role of the Planning and Commissioning Committee to review the Clinical Policies.

The Chair advised that she would be raising these issues the next day at the IFR Panel (9 July 2019).

The Chair would request a review of the workplan and would also look at the process.

Resolved:

(a)	The Chair would raise the issues around the content of the Annual Report at the IFR Panel on 9 July 2019, and
(b)	a revised IFR Annual Report 2018/19 would be brought back to the next meeting of the IAGC in September.

9.8 NHS HULL CCG HEALTH, SAFETY AND SECURITY ANNUAL REPORT 2018/19

The Health, Safety and Security Annual Report 2018/19 was presented for information and to assure the IAGC of the measures that were in place to manage Health, Safety and Security compliance.

Assurance:

The Board can be assured that the CCG continues to fulfil its statutory duties in relation to Health, Safety and Security compliance.

Resolved:

(a)	The contents of the Health, Safety and Security Annual Report 2018/19 were noted, and
(b)	the measures in place to manage Health, Safety and Security compliance were noted

9.9 CORPORATE GOVERNANCE POLICIES

The Associate Director of Corporate Affairs presented a report to notify IAGC Members of the amendments made to the following Corporate Governance Policies:

- Development and Management of Organisational Policies, Procedures and Guidelines
- Identification Badge Policy and Procedure

There had been no significant changes to previous versions of the policies which had required an update to include housekeeping elements and organisational changes.

Members were advised that full copies of the policies were available on request.

IAGC Members approved the updated Corporate Governance Policies. The updated policies would be shared with all staff and published on the CCG website.

Assurance:

The Board can be assured that the CCG regularly reviews and updates its Corporate Governance Policies. IAGC Members approved the updated policies for the Development and Management of Organisational Policies, Procedures and Guidelines and the Identification Badge Policy and Procedure.

The updated policies would be shared with all staff and published on the CCG website.

Resolved:

(a)	The following updated Corporate Governance Polices were approved by the IAGC: <ul style="list-style-type: none">• Development and Management of Organisational Policies, Procedures and Guidelines, and• Identification Badge Policy and Procedure
(b)	The approved updated policies would be shared with all staff and published on the CCG website.

9.10 IAGC CHAIR'S ANNUAL REPORT 2018/19

The Chair presented her Annual Report for the period 1 April 2018 to 31 March 2019 for consideration and endorsement.

The Chair's Annual Report covered the work of the IAGC throughout the 2018/19 financial year

IAGC members endorsed the Chair's Annual Report 2018/19 for submission to the CCG Board on 26 July 2019.

Resolved:

(a)	The Chair's Annual Report 2018/19 was endorsed by the IAGC, and
(b)	the IAGC Chair's Annual Report 2018/19 would be submitted to the CCG Board meeting on 26 July 2019.

9.11 REVIEW OF IAGC TERMS OF REFERENCE

Members were advised that the IAGC terms of reference were reviewed annually to ensure that they continued to meet the requirements of the Committee.

Minor amendments had been made to the terms of reference which comprised mainly of general housekeeping and formatting changes which had been made under tracked changes for ease of reference and, in addition, the following comment was made by the IAGC:

- Under 11.9 Risk – consideration would need to be given as to whether to retain the sentence relating to Research Governance under this heading or to move this to elsewhere in the ToR. The Associate Director of Corporate Affairs would look at this outside of the meeting.

Resolved:

(a)	The IAGC reviewed the highlighted changes to the terms of reference;
(b)	the IAGC terms of reference were agreed, subject to the incorporation of further comments from the IAGC, and
(c)	the amended IAGC terms of reference would be submitted to the CCG Board for approval

9.12 REVIEW OF IAGC WORKPLAN 2019/20

The draft IAGC Workplan for 2019/20 was submitted for consideration and approval.

It was requested that the Research and Development Annual Report be brought to the IAGC for information and this would be added to the Workplan for 2019/20.

There were no further comments made or further amendments proposed to the IAGC Workplan for 2019/20 which was subsequently approved.

Resolved:

(a)	IAGC members: reviewed the draft IAGC Workplan for 2019/20;
(b)	requested that the Research and Development Annual Report be added to the Workplan for 2019/20, and
(b)	subject to the incorporation of the above, approved the IAGC Workplan for 2019/20.

9.13 TERMS OF REFERENCE

Board Committee Terms of Reference

The terms of reference for the formal Committees of the CCG Board were subject to annual review. This had been undertaken by the individual committees and the subsequent revised ToRs were submitted to the Integrated Audit and Governance Committee for consideration. Amendments had been made under tracked changes for ease of reference and, in addition, the following comments had been made by the IAGC:

- **Planning and Commissioning Committee ToR**
 - Under 1.3 'Links and Interdependencies,' link with IFR needed to be added
 - Under 3 'Authority', Pathway Review Group to be added
 - Under 7 'Quoracy', the Lay Member deputy must be another Lay Member
 - Under 11.2iii 'System Development and Implementation', Rebate Schemes to be included
 - Under 'Membership - In attendance (as and when required)'– this should read nominated **suitable** deputies may be appointed subject to approval by the Clinical chair and there would need to be a uniform approach to, and expectation of, all deputies.
- **Primary Care Commissioning Committee ToR**
 - Under 3.4 – this should read – Approving **and supporting** the **development** of Primary Care Networks in line with NHS England guidance
- **Quality and Performance Committee ToR**
 - Under 7 'Quoracy' – this should read Chair or Vice Chair
 - Under 'Membership' – David Heseltine to be added
- **Remuneration Committee ToR**

Other than minor housekeeping changes, there were no further amendments to these terms of reference
- **Committees in Common ToR**

It was agreed to defer these terms of reference until the results of the Internal Audit work were available. The Committees In Common ToR would be brought back to the next meeting of the IAGC in September

Other relevant groups/sub committees

Terms of Reference:

- **Primary Care Quality and Performance Sub Committee ToR**
 - Quoracy did not reflect that the CCG was now fully delegated. Specific reference to NHS England members to be removed, i.e. quoracy to be three members.
 - Healthwatch to be added to attendees
- **Health, Safety and Security Group Tor**

These ToR had previously been through the IAGC and there were no further comments.
- **Information Governance Steering Terms of Reference Group ToR**

There were no further comments made on these ToR
- **Joint Emergency Preparedness Resilience and Response (EPRR) / Business Continuity Management (BCM) Group ToR**

Quoracy :

 - consistency across committees
 - to reflect link to Lay Member

Assurance:

The Board can be assured that the terms of reference for all formal Committees had been subject to an annual review by the individual Committees to ensure that they continued to meet the needs of the respective Committees which were then submitted to the IAGC for consideration and final oversight.

The IAGC would recommend that the Board approve the amended Committee terms of reference.

Resolved:

(a)	The IAGC reviewed the highlighted changes to the Committee terms of reference;
(b)	the Committee terms of reference were agreed, subject to the incorporation of some further comments from the IAGC;
(c)	the amended Committee terms of reference would be submitted to the CCG Board for approval;
(d)	the Committees in Common terms of reference had been deferred until the next meeting, pending the results of the Internal Audit work, and
(e)	the terms of reference for other relevant groups and sub-committees were also considered and some minor amendments were proposed which would be taken back through the respective Chairs.

9.14 PLANNING AND COMMISSIONING COMMITTEE MINUTES - the minutes from the meetings held on 5 April 2019 and 3 May 2019 were noted.

9.15 PRIMARY CARE COMMISSIONING COMMITTEE MINUTES – the approved minutes of the meeting held on 27 April 2019 would be brought to the next meeting.

- 9.16 QUALITY AND PERFORMANCE COMMITTEE MINUTES** – the minutes from the meetings held on 30 April 2019 and 21 May 2019 were noted.
- 9.17 PRIMARY CARE QUALITY AND PERFORMANCE SUB-COMMITTEE MINUTES** – the minutes of the meeting held on 20 March 2019 were noted.
- 9.18 HEALTH, SAFETY AND SECURITY GROUP MINUTES** – the approved minutes of the meeting held on 26 June 2019 would be brought to the next meeting.
- 9.19 INFORMATION GOVERNANCE STEERING GROUP ACTION NOTES** – the action notes from the meeting held on 24 April 2019 were noted.
- 9.20 JOINT EMERGENCY PREPAREDNESS RESILIENCE AND RESPONSE / BUSINESS CONTINUITY MANAGEMENT (EPRR/BCM) GROUP ACTION NOTES** – the action notes from the meeting held on 10 April 2019 were noted.
- 9.21 COMMITTEES IN COMMON MINUTES** – the minutes from the meetings held on 27 February 2019 and 17 April 2019 were noted.

10. GENERAL

10.1 ANY OTHER BUSINESS

There were no items of any other business to report.

10.2 DATE AND TIME OF NEXT MEETING

The next meeting of the IAGC will be held on **Tuesday 10 September 2019** at 9.00am in the Boardroom at Wilberforce Court.

Signed:



Chair of the Integrated Audit and Governance Committee

Date: 10 September 2019

Abbreviations

AAL	Annual Audit Letter
ACR	Audit Completion Report
AGS	Annual Governance Statement
AIC	Aligned Incentive Contract
BAF	Board Assurance Framework
BCF	Better Care Fund
CHC	Continuing Healthcare
CHCP	City Healthcare Partnership CIC
CiC	Committees in Common
CoI	Conflicts of Interest
CYP	Children and Young People
DoLS	Deprivation of Liberty Safeguard
EPRR/BCM	Emergency Preparedness Resilience and Response Business Continuity Management
ERY CCG	East Riding of Yorkshire CCG
FoI	Freedom of Information
GDPR	General Data Protection Regulation
HoIAO	Head of Internal Audit Opinion
HS&SG	Health, Safety and Security Group
HUTHT	Hull University Teaching Hospitals NHS Trust
ICC	Integrated Care Centre
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
NAO	National Audit Office
NECS	North of England Commissioning Support
NFI	National Fraud Initiative
NHSE	NHS England
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
SAR	Subject Access Request
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