

## INTEGRATED AUDIT AND GOVERNANCE COMMITTEE

MEETING HELD ON 8 MARCH 2022

### ASSURANCE REPORT

#### INTRODUCTION

This is the Chair's assurance report to the Clinical Commissioning Group Board following the Integrated Audit and Governance Committee meeting held on 8 March 2022.

#### AUDIT

##### EXTERNAL AUDIT

###### Minute No. 6.1 - EXTERNAL AUDIT UPDATE REPORT

The Board can be assured that, in relation to the CCG audit for 2021/22, initial discussions had commenced in relation to the first stage of the audit which involved updating the planning. The team were in place to carry out the audit and there were no major concerns over the delivery.

##### INTERNAL AUDIT

###### Minute No. 7.1 - INTERNAL AUDIT PROGRESS REPORT

The Board can be assured that work was progressing well against the 2021/22 Internal Audit Plan.

Since the last IAGC meeting in January, the following two final reports had been issued:

- Patient and Public Engagement and Experience – which had received high assurance with no recommendations
- Governance and Risk Management Arrangements – which had also received high assurance with one minor recommendation.

Work was also underway on the remaining Quarter 3 & 4 audits, which would be presented to the next IAGC meeting.

A draft Head of Internal Audit Opinion (HoIAO) had been issued to the Chief Finance Officer which had currently been given a significant overall level of assurance, pending completion of the plan.

###### Minute No. 7.3 - COUNTER FRAUD PROGRESS REPORT

The Board can be assured by the continued counter fraud awareness work taking place and the success of the fraud prevention masterclasses which aimed to make new starters aware, and remind existing staff, of the many different areas of potential fraud risk.

No new fraud referrals had been received since the last meeting.

All work against the Counter Fraud Workplan 2021/22 was now complete.

## **FINANCIAL GOVERNANCE**

### **Minute No. 8.1 - FINANCE REPORT**

The Board can be assured that it was anticipated that the CCG would meet its financial targets by the end of the financial year.

Plans for 2022/23 were in the process of being set.

### **Minute No. 8.1i - DELEGATED PRIMARY CARE OVERPAYMENTS**

The Board can be assured that measures had been put in place to address the issue of recently identified overpayments made to Hull practices by Primary Care Support England (PCSE). Plans had been put in place to recover these overpayments and a further report would be brought to next meeting of the IAGC to provide an update and further assurance in terms of how the recovery had progressed.

### **Minute No. 8.4 - ANNUAL ACCOUNTS PLAN AND TIMETABLE**

The Board can be assured that a detailed plan was in place for the preparation of the CCG's Annual Accounts for 2021/22.

### **Minute No. 8.5 - PRIMARY CARE REBATE SCHEMES**

The Board can be assured that, following endorsement by the Planning and Commissioning Committee, the Integrated and Audit Committee had approved Primary Care Rebate Agreement renewals for Insuman and Apidra and Primary Care Rebate Offers for Methadone Hydrochloride and Buprenorphine.

## **GOVERNANCE**

### **Minute No. 9.1 - TENDER WAIVERS**

The Board are advised that the IAGC had noted the approved tender waivers in respect of System Leadership Development and HCV FeNO Devices in Primary Care.

### **Minute No. 9.2 - CORPORATE RISK REGISTER**

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.

The IAGC had verbally accepted the addition of a new risk onto the register relating to wheelchair services provided by Nottingham Rehab Supplies (NRS) due to the current problems being experienced with this service in relation to long patient waiting times and an increase in complaints.

### **Minute No. 9.3 - BOARD ASSURANCE FRAMEWORK**

The Board can be assured that the agreed approach for the 2022/23 BAF would be to maintain the same strategic objectives and undertake the normal process of refreshing the risks in the light of that but in a slightly slimmed down version, given that we were in transition and therefore the focus of the BAF risks would be on a smooth transfer to the new arrangements.

### **Minute No. 9.4 - ASSURANCE UPDATE IN RELATION TO CLOSE-DOWN AND**

The Board can be assured that the IAGC continued to be updated on the formal systems and process and controls that were in place for both close-down and transition to the new organisation along with the key transition risks and some of the live matters that were being

worked through.

**Minute No. 9.5 - DATA SECURITY AND PROTECTION TOOLKIT 2021/22 UPDATE**

The Board are advised that the deadline for the DSPT submission had been moved to the of June 2022. Any subsequent action plans or remedial actions that come out of the submissions of CCGs would be picked up by the ICB when they were formed.

The approach to the DSPT completion and submission for this year would be very similar as for previous years.

**Minute No. 9.8 - FREEDOM OF INFORMATION REQUESTS Q3 REPORT**

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 October to 31 December 2021 performance had remained extremely strong and there had been no missed requests and the CCG had been fully compliant with the 20-day response deadline.

**Minute No. 9.10.1 - STAFF DOMESTIC ABUSE POLICY**

The Board are advised that the IAGC had approved the Staff Domestic Abuse Policy



**Karen Marshall (Chair)**  
**Integrated Audit and Governance Committee**  
**25 May 2022**