MEETING DATE:	10 April 2014	NHS
AGENDA ITEM NUMBER:	Item 7.13	North Lincolnshire Clinical Commissioning Group
AUTHOR:	Therese Paskell	Chilical Commissioning Group
JOB TITLE:	Chief Financial Officer	REPORT TO THE CLINICAL COMMISSIONING GROUP
DEPARTMENT:	Finance and Business Support	GOVERNING BODY

## CCG AUDIT GROUP MINUTES 14 NOVEMBER 2013

PURPOSE/ACTION	To Receive and Note
REQUIRED:	
CONSULTATION AND/OR	Ratified at the last CCG Audit Group
INVOLVEMENT PROCESS:	
FREEDOM OF	Public
INFORMATION:	

1. PURPOSE OF THE REPORT:	
To advise the CCG Governing Body of the work of the Audit Group	
2. STRATEGIC OBJECTIVES SUPPORTED BY THIS REPORT:	
Continue to improve the quality of services	Х
Reduce unwarranted variations in services	
Deliver the best outcomes for every patient	
Improve patient experience	
Reduce the inequalities gap in North Lincolnshire	
3. IMPACT ON RISK ASSURANCE FRAMEWORK:	
Yes x No	
Provides assurance to the Governing Body of independent review by the Audit Group. Demonstrates a prac approach by the Audit Group to meet the needs and risks of the organisation which will form part of the T Legacy documentation.	
4. IMPACT ON THE ENVIRONMENT – SUSTAINABILITY:	
Yes No X	

5. LEGAL IMPLICATIONS:				
	Yes	х	No	
The Audit Groups remit includes reviewing/ensuring PCT liabilities are fully	captured	as part	of the Acc	counts. I
addition the Audit Groups remit includes independent review of the CCGs leads	egislative	e complia	nce and s	upportin
processes.				
6. RESOURCE IMPLICATIONS:				
	Yes	х	No	
		•	•	
Draft Budgets for next year include GP input to the Audit Group.				
A cost benefit analysis of the Audit Group will be planned in as part of next y	ear's wo	rk plan.		
7. EQUALITY IMPACT ASSESSMENT:				
	Yes		No	х
Not required as is not a policy/procedure or guidance				
8. PROPOSED PUBLIC & PATIENT INVOLVEMENT AND COMMUNICATIONS	<u> </u>			
	Yes		No	х
		•	•	
Minutes were ratified by the last Audit Group and will also be copied to CON	l.			
9. RECOMMENDATIONS:				
The CCG Governing Body is asked to: -				
Receive and Note the CCG Audit Group minutes				

MEETING:	NHS North Lincolnshire
MEETING DATE:	Thursday 14 <sup>th</sup> November 2013
VENUE:	The Boardroom, Health Place, Brigg
TIME:	10:00 – 13:00



NHS NL CCG Audit Group

PRESENT:			
NAME	TITLE	SERVICE/AGENCY	
Paul Evans (PE)	Lay member (Chair)	NHS North Lincolnshire CCG	
Therese Paskell (TP)	Chief Financial Officer and Business Support	NHS North Lincolnshire CCG	
Ian Reekie (IR) (left at 12.15)	Lay Member	NHS North Lincolnshire CCG	
Benita Jones (BJo)	Director of Audit Services	ECAC	
Paul Webster (PW)		ECAC	
Shaun Fleming (SF) (item 8.2)	Counter Fraud Manager	ECAC	
John Pougher (JPo) (left	Assistant Senior Officer- Quality & Assurance,	NHS North Lincolnshire CCG	
meeting at 11.30am)			
Jackie Rae (JR)	Manager, Public Sector Audit, KPMG	KPMG	
John Prentice (JPr)	Director KPMG	KPMG	
Tehmina Mubarika (TM)	GP	Ancora Medical Practice	
Jon Cooke (JC) (left at 12.45)	Business Service Director	NY&H CSU	
Bill Lovell (BL) ( item 13)	Assistant Senior Officer	NHS North Lincolnshire CCG	
Barry Jackson (BJa)	Information Governance, Security &	NY&H CSU	
(items 6.1 – 6.6)	Compliance Manager		
Gary Metcalfe (GM) (item 10)	Procurement Lead	NY&H CSU	
Debbie Lewis-Bird (DL-B)	PA to CCG (for the notes)	NHS North Lincolnshire CCG	

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	
1. APOLOGIES		
Satpal Shekhawat, Catherine Wylie		
2. DECLARATIONS OF INTEREST		
The Chair has invited those with any Declarations of Interest to make them		
known to the meeting		
There were no Declarations of interest		
3. NOTES FROM THE AUDIT GROUP MEETING		
The minutes of the meeting held on 5 <sup>th</sup> September 2013 were recorded as an		
accurate record with the following amendment		
Page 7, item 9 referring to the scale fee set by the Audit Commission. The £66K		
is the gross fee and The Audit Commission will be sending the 10% rebate in		
January 2014.		
4. MATTERS ARISING FROM THE MINUTES		
PE introduced two new members to the Audit Group, Paul Webster who has		
replaced Andy Growns and John Prentice who has replaced Paul Lundy.		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for	
	completion or update)	
Action Log – 5 <sup>th</sup> September 2013		
Item 5, page 2 Data Service for Commissioners Regional Offices (DSCRO) is now operational but as set out in recent correspondence and IG Updates the Accredited Safe Haven (ASH) process is not yet complete and we are still operating on an extended s251 but with no further guidance.  It is not clear how the budgets and practice based activity can be analysed in the new system by the CCG using Personal Confidential Data (PCD) as its unclear what the legal justification could be, although pseudonymised data could be a solution.		
Item 8.1, page 6 Payroll SLA has been signed and sent to CSU for a counter signature		
The following actions are still outstanding on the action log, all other actions are completed or covered on the agenda		
Item 7, page 5 – A further action plan has been requested from NLaG to provide assurance that the recommendations are being addressed. This was picked up at a contract meeting on Thursday 12th September 2013. TF to follow up recommendations at Contract Boards.	DL-B to chase for update from TF	Done – update on action log
Item 11, page 10 – Discussion to take place outside meeting and a draft written report to be drawn up involving Comms team re Practice Based Pharmacist Service. This is still outstanding and there is no current update. There is a need for assurance that the areas of potential risk have been covered.	JC to ask JL to send an update	On action log
PE re-iterated the fact that actions need to be followed up in a timelier manner and that any actions or updates required need to be sent to DL-B as soon as possible.	All	
5. PROGRESS UPDATE ON CSU FINANCIAL SERVICES TO REVIEW PERFORMANC	E ISSUES RAISED AT LAS	T MEETING
TP and JC gave an update on the CSU financial briefing after concerns from the last meeting that standards were not being met. The report has been jointly drawn up between TP and JC and they are happy that this reflects their joint view.		
The CSU financial briefing is to advise the Audit Group of the progress made and action plans going forward and to give assurance that relevant action is being taken.		
PE felt that the briefing is still lacking what the KPIs are and the achievements against them or what the measurables are. JC informed the group that KPIs are being monitored and reported regularly and the CSU are delivering the service that they are contracted to do. JC read out the examples of the KPIs that relate to this service. By April it is planned to do a full review of specifications which will be much more robust. TP said that although the KPIs are measured they are at a high level and would therefore not provide the detailed assurance required e.g. around accuracy of monthly reporting.		
The full period of the SLA is 18 months until next September but there is an		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for	
opportunity to refresh later in the year. This has not been looked at in year because at an operational level we are looking at all of the factors that do deliver the enhanced service needed. These discussions would need to take place this year in order to be operational from April 2014.  TP chairs a national technical group with the HMFA to look at end to end specifications and KPIs with other similar CCGs to NL.  This is still currently at the forefront of what is being developed nationally. JC felt that it was important to recognise the effort that is put in on a daily basis between the CCG and the CSU to improve services.  Deloitte assurances were covered in the presentation at item 7. PE felt discomfort not knowing what specific assurances are in place; the action plan to be attached to the minutes on a regular basis to ensure that the group is aware of progress and a copy of the deloittes assurance circulated as soon as available.  Action: JC to circulate deloittes assurance and send copies of action plan and revised SLA/KPIs to future meeting(s)  IR raised concerns at section 2.9 around risk re capacity for financial modelling of the options for the transformation of the local health and care system. TP advised that the concern was more in backfilling the routine duties and impact. TP informed that procured support for HLHF from the CSU to cover this with help from Attain, partner with CSU was in place and working effectively. Backfill staff are also now in place to deliver normal service which was reassuring.  PE recognises that TP and JC are keeping the group informed and that things are getting better.	Action: JC	On action log
6. QUALITY GROUP AND GOVERNANCE BRIEFING		
BJA gave an update on the work currently being undertaken by the CSU IG team to maintain IGT level 2 compliance. All updates are contained in the one report with embedded documents within. There were two IG update reports for October for information for the Audit Group.  The report is intended to provide assurance that all IG aspects are being addressed appropriately. However the internal audit report has not yet been sent.		
Questions were raised around the compliance levels and how would level 3 be reached. Level 0 and 1 are not acceptable levels whereas level 2 and 3 are acceptable compliance levels. Most requirements are met at level 2 in the first year. To receive the enhanced level 3 is usually around the 2 <sup>nd</sup> year, have you been audited, double checked and reviewed it which it is unlikely in the first year.  6.2 Information risk management policy At present there is no requirement to develop a distinct policy as the information is already covered in other policies developed.		
The SIROs have asked that it is clear about what over arching policies,		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for	
information risk come under and to adapt those policies accordingly, therefore BJa has been asked to meet or liaise with other teams in the CSU to update these policies and then to be re-circulated to relevant groups for sign off that then incorporate these elements for clarity.	completion or update)	
<b>6.3 Process for reporting information incidents</b> The same point applies to information incidents, a clear process/procedure to be identified linked to existing policies around incidents.		
<b>6.4 Information asset risk register (IAR)</b> The work done at the start of the year was a data capture exercise with an immediate risk assessment. Additional fields have now been added into the now more formalised register to populate the IAR and staff are being contacted by the IG to complete these.		
6.5 Information asset owners (IAO) The CCGs IAOs are primarily in the CSU except for safeguarding under Catherine Wylie with support from John Pougher Further training is needed around roles and responsibilities of IAOs and IACs		
BJa reported that risks that are over a certain level then go onto the internal risk registers and the ones that impact on the CCG will be passed through the Quality Group and onto the CCG risk register. It is important to have a single risk register or IG register.  BJa to liaise with Dawn Taylor and other CSU colleagues and feedback to the next Audit Group in January to ensure this is in place	Action: BJa	Feedback January meeting
BJo felt it appropriate to raise the issue that there is no detail included around IG Toolkit. PW informed the group that the draft report is due to be released. Recently work has been around the processes involved and high level examination of what evidence is on the CCGs IG tool and found that it was well populated but the evidence was quite weak in terms of some of it was out of date and all this needs refreshing, therefore a large amount of work needs doing between now and submission and regular reporting has been asked for between the CSU and the CCG		
JC has given assurance that in terms of reporting, the CSU IG Toolkit Action Plan will be fully refreshed on a monthly basis with the offer of a one to one follow up meeting with the SIRO in each organisation to talk through progress against delivery		
TP as SIRO has to be assured that with CSU on behalf of CCG there are policies and processes in place and that this is being regularly monitored. Catherine Wylie as lead Director supported by John Pougher as information governance lead will ensure there is an action plan in response to any audit recommendations on the toolkit.		
PE felt that this group does not have the competence to go into detail but there is a need to have assurance from the Governance Director/lead and SIRO that the Action Plan is robust in addressing Audit Report recommendations Progress on audit recommendations to be covered at next meeting.		
6.6 Risk Register		

SUMMARY OF DISCUSSION	DECISION/ACTION	
	(including timescale for completion or update)	
JPo presented the BAF. The risks on the BAF and risk register are regular reviewed by the Executive Team.		
The BAF focuses on strategic risks whilst the risk register focuses on operational risks. Following the CCG Governing Body Workshop held on 12 <sup>th</sup> September 2013, changes have been made to reflect a revised assessment of strategic risks		
In the 8.2, section 4 Internal Audit Report on the agenda is correct in the way that we need to develop the register in terms of its descriptions and to ensure we remain fit for purpose. JPo felt that this paper is a template that Dawn Taylor and the CSU need to work to in order to continue to improve and develop the risk register.		
JP gave assurance that the BAF and risk register are regularly reviewed by the Quality Group and goes to the Governing Body periodically and monthly to the execs meeting supported by Dawn Taylor.		
<ul> <li>The top 5 risks were as follows:</li> <li>Failure to improve levels of Patient Safety, Clinical Excellence or Patient experience resulting in unnecessary harm</li> <li>Lack of assurance from NHS111 service that robust clinical governance arrangements are in place</li> <li>Failure to work and engage with key partners and stakeholders, posing a threat to the delivery of strategic objectives</li> <li>The CCG could face financial challenges, therefore potentially not achieving statutory financial obligations</li> <li>Failure to agree an acceptable/affordable option for sustainable services in a timely manner which meets the needs of the population</li> </ul>		
IR queried section A01 – the gaps and control section, 'options not yet agreed for engagement leading to consultation. To agree use of integrated fund with LA' IR felt that this should be singled out as a new strategic risk because failure to achieve agreement with the LA on the allocation of the Integration Transformation Fund that does not address reducing health demand could be strategically disastrous.		
The Audit Group asked officers to review that the BAF is being properly monitored and updated and supported by the CSU. It is agreed that there is a board and exec level review of the BAF and that there is active involvement in moving it forward, however the point raised in A01 is relevant and that JPo should feedback the concerns of the Audit Group to the CSU.  Action: JPo to feedback to Dawn Taylor	Action JPo	Completed update on action log
7. UPDATE ON WORK BY DELOITTES WITH CSU RE CCG ASSURANCES		
JC gave a presentation and update on the work by Deloittes with the CSU re CCG assurances. Unfortunately there was no report available as the work was taking longer than anticipated, however it was agreed with TP that a presentation would be sufficient for this meeting. Please see attached presentation slides and note that these findings are in draft form.		
JC stated that the report is expected next week and as soon as this is available		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	
the Action Plan and findings will be shared with the CCGs by the end of November 2013.		
Action: DLB to add to Januarys agenda	Action: DL-B	Done
Next steps in terms of Deloittes is that they will start to come back and relook at areas for the final assessment from January and as the assurances are received back between March and April, as much information as possible will be shared to the CCG. The final report will be delivered during April to fit in with the year end assurances.		
If any member of the group does have any questions relating to the draft presentation then please forward direct to JC  Delloittes		
8. INTERNAL AUDIT		
<b>8.1 Internal Audit revised plan and profile</b> BJo gave an update on the amended Internal Audit revised plan and profile. The purpose of the report is to update the Audit Group on the changes that have been made.		
<ul> <li>These changes include:</li> <li>To bring forward CHC which was in the plan for year 3 in line with previous Audit Group recommendations (in response to the Annual Governance Report from KPMG).</li> </ul>		
<ul> <li>To remove time from the IT reviews and disaster recovery (given the level of involvement of and expected assurances from the CSU) and to reassign the time to other areas (including workshops, additional time required for Commissioning/CHC and to fund a possible review of the governance arrangements around the Integration Transformation Fund)</li> <li>To align the Plan structure to the summary control schedule routinely reported to the Audit Group</li> </ul>		
To reflect the changed Audit Manager details to Paul Webster from Kendra Marley		
On page 11 under 'Core Audit Plan Outputs, Continuing Healthcare elements requires a 'tick'		
Action: BJo to amend accordingly	Action: BJo	amended
The Audit Group are asked to note and agree the revised 2013/14 Internal Audit plan – <b>noted and agreed</b>		
8.2 Internal Audit and Counter Fraud Progress  BJo gave an update on Internal Audit progress. The purpose of the report is to inform and update the Audit Group on progress being made against the Internal Audit and Counter Fraud plans and other added value activity for the CCG from the East Coast Audit Consortium (ECAC).		
The first part of the plan refers to appendix 1 indicating progress. In advance of the finalised reports a table has been drawn up to highlight the issues arising		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	
from the reviews on conflicts of interest and assurance mapping.	completion of update)	
Assurance mapping – The intention was to set a context for the internal audit plan for the CCG and the CSUs auditors and in addition to identify the other 3 <sup>rd</sup> party assurances.		
The key actions which have been identified for the CCG are:		
Pursue the identified gaps regarding CSU assurance to ensure appropriate mitigation		
<ul> <li>Review the output from the CSUs recent audit and consider the implications on the CCG and its planned assurances</li> <li>Continue to refine the assurance mapping document (to be circulated) as arrangements are developed</li> </ul>		
<ul> <li>Undertake specific work around evaluation of non CSU 3<sup>rd</sup> party assurances taking into account those presented by TP at the last audit group for example</li> </ul>		
The IG Toolkit has already been covered alongside BJa update		
Conflicts of Interest – Significant assurance is being given on conflicts of interest, however observations have been made. This was based upon a review of documentation; comments made in the report are around greater consistency in the process of recording but more importantly recognises that it's about understanding what those potential conflicts are in order to make a declaration. This work to be supplemented with a workshop session which has been provisionally arranged for March 2014. BJo raised concerns that benchmarking information gathered on the number of declarations was relatively low for NLCCG. This will be covered in the full report.		
The Audit Group agreed that other Board members should be invited to the workshop in March  Action: TP/DL-B to invite other members	Action: TP/DL-B	14 <sup>th</sup> March 2014
Audit Group Effectiveness Review to be covered at the next meeting in January. ECAC to send out a survey in advance to make best use of time.  Action: The Audit Group are asked to reflect and send comments to BJo on suggested outline before Christmas	Action: ALL	no comments received
Action: The Audit Group are asked to send any suggestions/agreement to the survey to BJo before Christmas	Action: ALL	on either
SF updated the group verbally on the Counter Fraud progress investigation log. Two cases still ongoing, one for timesheet/invoice fraud and false representation/failure to disclose information. There is currently no change to the 1 <sup>st</sup> investigation, there will be no criminal charges brought as there was no contractual arrangements in place. The 2 <sup>nd</sup> investigation is now at the point where it can be taken forward.		
SF highlighted the Fraud Watch Autumn 2013 newsletter.		
The Audit Group are given assurance of satisfactory progress and outcomes in delivering the audit and counter fraud plans and which continues to represent		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	
appropriate coverage as part of the wider assurance framework.	, and the second	
The Audit Group are asked to note the report - <b>noted</b>		
9. EXTERNAL AUDIT		
JPr gave a verbal update on External Audit. The planning process has started and the plan will be brought to the Audit Group in January.  Action: DLB to put on the agenda for Januarys meeting		
Assurance mapping will fit into the overall process and JR will liaise with PW on this in terms of how this fits into the plan. JR has undertaken a mapping process on who the key people are going to be to ensure that responsibilities are filled and ensure clear direction who the contacts are and who will liaise with other bodies.		
The new person who is working on the audit is Sherie Newboult who is experienced with Commissioner audits.		
10. DRAFT PROCUREMENT STRATEGY		
GM gave an update on the draft Procurement Policy. The purpose of the report is to set out the governance arrangements surrounding procurement procedures applicable to the CCG.		
The proposal is that the draft procurement policy goes to the Governing Body in December therefore if any group members have any comments to send direct to GM by the end of November.  Action: all	Action: ALL	Completed
The one caveat is that there is currently a fundamental review of European procurement law being undertaken with significant changes due to be adopted by the UK Government by September 2014. These changes will necessitate a revision to this policy during 2014.		
Reference to SFIs – these need to be amended to ;prime financial policies in the CCG's constitution'  Action: GM to amend	Action: GM	Completed
New guidance from Monitor needs incorporating around guidance/referrals. Further documentation is expected within the next few weeks which will be incorporated prior to the Governing Body. If this information is not available prior to this a policy statement will be attached.		
Further guidance on the practical implications of conflicts of interest to be incorporated into the framework.  Action: GM to action	Action: GM	Completed
The Audit Group are asked to agree the draft policy to go to the CCG Governing Body in December 2013 subject to the above- agreed		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	
14 CONTINUUM CARE CHAMAARV		
The Audit Group had requested a report from CHC around outstanding liabilities, number of cases and the average cost at the beginning of the year and the movement in year. As there was no representation from CHC/CSU at the meeting, TP talked to the CSU paper. Nick Stephenson (NS) had provided a table as requested. CHC and finance in CSU are currently part way through a validation/ data cleansing exercise and assurance has been given that this will be complete by the end of November.  They have identified outstanding cases at the end column which is not everything that they will find, this is just progress so far. The provisions appear to be adequate and they should have completed the exercise by the end of November.		
Assurance has been given that some of the clinical cases have been resolved; some of the funding elements are still being addressed for the very old cases which may still be in dispute with LAs.  Mel Bradbury, the Budget Manager for CHC has agreed to resolve any of these old cases immediately.  Action: TP to follow-up with the CSU to resolve any outstanding payment issues with LA	Action: TP	Completed
Since the report, CHC have now fully recruited to all posts bar one in order to catch up with claims.		
IR raised concerns around receiving assurance about what the position is. We have been reliant on re-assurance which has not been re-assuring and that there is a set of figures that are meaningless of where we should be at present. The table is confusing. CHC is a major area of expenditure which is consistently overspent and as an Audit Group, need some significant assurance and not to be reliant on re-assurance.		
The figures shown in the table need to demonstrate if there is a risk to the CCG.		
TP highlighted that the in year financial position against budget was separately reported in the finance report to the CCG Engine Room and Governing Body and not covered in the table about prior year liabilities. Any concerns around management of that in year position could be referred back to the CCG Engine Room by the Audit Group. The table is about liabilities against the provision which we know are not being converted to full cases in the volumes we		
expected, which is reassuring.		Covered on Action
Action: JC to feedback the concerns/frustrations of the Audit Group	Action: JC	Log
Action: CHC to provide a more comprehensive report/table for the meeting in January including explanation of changes and actions being taken	Action: NS	Jan Audit Group
12. PCT LEGACY UPDATE INCLUDING TRANSFER OF BALANCES		
<ul> <li>TP gave a verbal update on legacy.</li> <li>Ledger is closed on the old PCT system</li> <li>Large amount of invoice received which Bill Lovell (BL) has now dealt with to go onto the new CCG system</li> </ul>		

SUMMARY OF DISCUSSION	DECISION/ACTION (including timescale for completion or update)	
<ul> <li>Balances to go on the successor body accounts</li> <li>Queries are being dealt with as they arrive</li> <li>There are still some outstanding accruals. The issue nationally was if the ones they had inherited are not enough for the bills that they then receive, how will this be funded, will they come back to the previous bodies of which would be the Area Team and the CCG</li> </ul>		
13. UPDATE ON UNDERLYING FINANCIAL POLICIES		
BL gave a presentation on financial polices as attached explaining methodology and link with CCGs constitution/prime financial policies. BL has given assurance that the financial policies are currently being updated. Some financial policies are still currently being drafted. The Accounting (technical) policies will all be in place prior to the final accounts. Some will be done on a 'as and when' basis with interaction with HR, the priorities being lease cars and travel.  Action: BL to bring as many financial policies as able to the January meeting	Action: BL	Covered on agenda
Financial Policies Presentation		
14. FOR INFORMATION ONLY		
<ul> <li>Aged Debt         <ul> <li>(North Lincolnshire CCG has no aged debt outstanding over £5k and over 3 months old and no debts have been written off)</li> <li>Discussions took place around information received for aged debt and the Audit Group agreed that for future meetings the information required would be</li></ul></li></ul>	Action: DL-B	Done
A further update will be available at the next meeting		
15. ANY OTHER BUSINESS		
None		
16. ITEMS TO BE REFERRED TO OTHER SUB-COMMITTEES		
None None		

## **Action Log**

DECISIONS TAKEN		
Item	The Audit Group are asked to note and agree the Internal Audit Revised Plan – noted and agreed	
8.1		
Item	The Audit Group are asked to note the Internal Audit and Counter Fraud Progress Report - <b>noted</b>	
8.2		
Item	The Audit Group are asked to agree the draft Procurement Policy to go to the CCG Governing Body in	
10	December 2013 – agreed further to comments made by end of November	

	ACTIONS OUTSTANDING FROM PREVIOUS MINUTES	BY WHO	UPDATE
Item 4,	Outstanding from 5 <sup>th</sup> September action log - further action	TF to provide	A more detailed
page 2	plan has been requested from NLaG to provide assurance that the recommendations are being addressed.	update	AP is expected for December
	the recommendations are being addressed.		Contract Board
			and will be
			brought to Jan
			Audit Group
Item 4	Outstanding from 5 <sup>th</sup> September action log - Draft Report re	JC to pick up	JC has requested
page 2	Practice Based Pharmacy	with Jackie	the draft report
		Lyons	
	ACTIONS FROM CURRENT MINUTES	BY WHO	UPDATE
Item 5,	JC to circulate Deloittes assurance and send copies of action	1C	Awaiting release
page 3	plan and revised SLA/KPIs to future meetings		from Area team
Item	BJa to liaise with Dawn Taylor and other CSU colleagues and	BJa	BJa to feedback at
6.5	feedback to the next Audit Group in January to ensure that		January Audit
Page 4	risks onto the CCG risk registers and those that impact on the		Group
	CCG will are passed through Quality Group		
Item	JPo to feedback to Dawn Taylor, the concerns expressed by the	JPo	JPo discussed with
6.6.	Audit Group around item A01 on the risk register, gaps and		Dawn Taylor
Page 5	control section, 'options not yet agreed for engagement leading		who will review
	to consultation. To agree use of integrated fund with LA' - this		with the senior

	ACTIONS OUTSTANDING FROM PREVIOUS MINUTES	BY WHO	UPDATE
	should be singled out as a new strategic risk		team to incorporate the ITF risk within the BAF if and as the Senior Team feel appropriate
Item 7 page 6	DL-B to add Deloittes Action Plan to agenda for next meeting	DL-B	On agenda
Item 8.1 page 6	BJo to amend the Internal Audit Plan section on page 11 under 'Core Audit Plan Outputs, Continuing Healthcare elements which requires a 'tick'	BJo	Completed/Done
Item 8.2 page 7	TP/DL-B to invite other Board members to the workshop session around Conflicts of Interest organised for March 2014	TP/DL-B	Arranged for 14 <sup>th</sup> March 2014
Item 8.2 Page 7	Audit Group Effectiveness Review suggested outline to be covered at the next meeting in January. Audit Group to send any comments to BJo before 20 <sup>th</sup> December 2013	ALL	BJo confirmed no comments received
Item 8.2 Page 7	ECAC Survey – Audit Group to forward any suggestions for the survey to BJo before 20 <sup>th</sup> December 2013	ALL	BJo confirmed no comments received
Item 10, page 8,	Members of Audit Group to send any comments on the draft Procurement Policy to GM before the end of November	ALL	Completed
Item 10 Page 8	Re Draft Procurement Policy SFIs need to be amended to 'prime financial policies in the CCG's constitution	GM	Completed
Item 10 Page 8,	Further guidance on the practical implications of conflicts of interest to be incorporated into the framework	GM	Completed
Item 11 Page 9	TP to follow-up with the CSU to resolve any outstanding payment issues around Continuing Care with LA	ТР	Completed, meetings have been arranged with CSU
Item 11 Page 9	JC to feedback to CHC the frustrations raised by the Audit Group around sufficient assurance	IC	Detailed update sent to TP further work to be undertaken in line with the update
Item 11 Page 9,	Nick Stephenson to provide a more comprehensive table and report for the next Audit Group in January including progress and actions	NS	To be brought to January Audit Group
Item 13 Page 10	BL to provide as many draft policies as possible to the next Audit Group meeting	BL	Added to January's Agenda
Item 14 Page 10	Aged Debt - DL-B to liaise/inform Annette Watkinson to provide more detailed aged debt information for future meetings	DL-B	Completed now incorporated into board finance report

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