

Joint Federated Audit Committee

MINUTES

Friday 25 May 2017 from 09:00 – 12:00 Meeting Room 2, King Edward VII Hospital

Present:	
Arthur Ferry (AF)	Lay Member for Governance, Windsor, Ascot and Maidenhead CCG (Chair)
Sally Kemp (SK)	Lay Member for Governance, Bracknell and Ascot CCG
Mike Connolly (MC)	Lay Member for Patient and Public Involvement (PPI), Slough CCG
Nigel Foster (NF)	Director of Finance and Performance, East Berkshire CCGs
Debbie Fraser (DF)	Associate Director of Finance, East Berkshire CCGs
Anshu Varma (AV)	Head of Corporate Services, East Berkshire CCGs
Lucy Trevett (LT)	Assistant Manager/Public Sector Assurance, External Audit BDO
Emma Butler (EB)	Internal Audit, PwC (joined by conference call).
Janine Combrinck (JC)	Director RI/Public Sector Assurance, External Audit, BDO

Apologies:	
Karen Maskell (KM)	Lay Member for Patient and Public Involvement (PPI), Bracknell
	and Ascot CCG

Item	Subject	Action
1.	Welcome and apologies for absence	
	AF welcomed everyone to the meeting. Apologies were noted as above.	
2.	Conflicts of interest in relation to the agenda	
	There were no further conflicts of interest stated.	
3.	Internal Audit	
	Review and agree the Internal Audit Risk Assessment and Plan 2017/18 – EB	
	The internal audit plan was discussed and EB invited comments from the Committee, there have been no major changes and the risk assessment on page 9 reflects the current position.	
	The cyber-attack was discussed. It was recognised that the Audit Committee has the responsibility to ensure that the security of data is not compromised, and IM&T Committee have the technical responsibility. IM&T received a report in November; there had been a planned penetration test to ensure the appropriate safeguards were in place. An action plan will be drawn up with a heightened focus.	
	Action: An update to be provided in the June Audit Committee Meeting regarding the work completed so far with a check point in September to review progress which could include Business Continuity planning.	NF
	There was a query regarding the following:	
	Procurement (non-clinical) page 19, 3 rd paragraph: Finally, we will seek to provide assurance over the procurement of 111 that is due to take place in 2017/18'	

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	EB explained that this audit was originally scheduled for 2016/17 but was replaced with the Conflict of Interest work that needed to be completed.	
	Action: EB to re-word the paragraph regarding NHS 111 procurement taking into account that there are lessons to be learnt from this process.	ЕВ
	The governance arrangements for the STP were discussed. It was identified it would be useful to review an independent assessment of the quality of the governance that is being planned for the STP to ensure that the appropriate checks and balances are being established.	
	Action: EB to provide an update regarding the formative plan for STP Governance in Quarter 2 and present in the June Audit Committee Meeting. This to be followed by a further update regarding the governance framework in Quarter 3. This will be reflected in the wording of the report.	ЕВ
	The new digital materials were discussed and EB explained that new reports will be available with an interactive PDF format.	
	Action: AV to check if BoardPad facilitates the new interactive format.	
	The Audit Committee approved the Internal Audit Risk Assessment and Plan 2017/18.	AV
4.	Service Auditor Reporting – South, Central & West CSU	
	Process areas discussed were HR and Procurement.	
	Procurement – it is recognised that there was a conversation with the organisation involved regarding the assessment criteria, however, it was an urgent procurement situation so it was a conversation and not properly documented, it is agreed that the appropriate documentation needs to be in place.	
	HR processes – there is an action to move to more of an electronic work flow process regarding the HR forms.	
5.	Actions of the Audit Committee held on 5 th May 2017 relating to this meeting	
	Annual reports and draft accounts – lay members to provide feedback comments on the annual reports to AV.	ALL
	All actions from log recommended to close to be closed, any outstanding actions to be discussed at the June meeting.	
6.	External Audit Reports	
6.1 6.2 6.3	Bracknell and Ascot CCG Slough CCG WAM CCG	
	LT provided a one page summary which summarises the reports. The audit team finished on site on Tuesday with a couple of items outstanding; however, all outstanding information has now been received. There were no new risks identified during the course of the audit. All materiality levels since the last Audit Committee have been reduced and there are no other significant changes to the planned audit approach. There are no material misstatements, there have been a number of adjustments made to figures in the accounts and these were re-classifications within expenditure, there is	

no impact on bottom line surplus.

The one page summary of unadjusted errors for the CCGs was discussed in detail with LT providing explanation on the unadjusted errors which impact on surplus. The Committee agreed that the mis-statements did not need to be adjusted because they were not material.

NF expressed his thanks to the team for the work completed. The Audit Letter will be presented to the Audit Committee in June.

Private sector expenditure was discussed, NF advised that it is worth noting what is counted as non-NHS bodies e.g. all expenditure for nursing homes and we have an aging population.

7. Presentation of Annual Accounts and Annual Report 2016/17

7.1 Bracknell and Ascot CCG

7.1.1 Annual Report and Governance Statement

Amendments

Page 7 – the primary care transformation paragraph makes reference to PMCF, B&A did not receive PMCF funding.

Page 10 – before NVoC – slight re-phrase needed e.g. 'to end their life with care and dignity in a place of their own choice – this for all three CCGs.

Page 11 – Friends in Need Service – remove.

Page 83 – Explanations of people – SK is no longer a trustee advisor, declaration has been completed previously.

Page 127 – staff composition – breakdown of number of employees on the governing body and employed as VSM – check these figures. (Following the meeting these figures were checked and circulated to Audit Committee members).

7.1.2 Financial Statements

NF informed the Committee that this report passed first time within the SC area; the only one to do so – this is evidence of the hard work completed. DF highlighted the variance document on BoardPad for the differences between the draft and final to enable the Committee to see the movements.

7.1.3 Delegation to Audit Chair to approve any changes after the 25th May Audit Committee – all Committee members agreed.

7.2 Slough CCG

7.2.1 Annual Report and Governance Statement

MC pointed out that the report reflects the rigour with which the various people responsible for the projects have worked.

Amendments

Page 2 – align page numbers.

Page 7 – Better access to primary care services – should state the Walk in Centre at Upton and not St. Mark's.

Page 8 – paragraph headed delegated primary care commissioning – line space missing.

Page 17 – Rates of TB in **SE** of England – both should be capitals – same for all three CCGs.

Page 86 – background information on Sue to be inserted.

	Page 115 – delete the tables with missing data.	
	NF reflected it would be useful to use the AGMs to take a forward look into the new way of working.	
	<u>Financial statements</u>	
7.2.2	No revisions to be made.	
	Delegation to Audit Chair to approve any changes after the 25 th May Audit Committee – all committee members agreed.	
7.2.3	Windsor, Ascot and Maidenhead CCG	
7.3	Annual Report and Governance Statement	
7.3.1	No revisions other than those stated earlier that affect all three CCGs.	
	Financial statements	
7.3.2	No revisions to be made.	
	Delegation to Audit Chair to approve any changes after the 25 th May Audit Committee – all committee members agreed.	
7.3.3	Declaration from the Audit Committee members to the Auditors	
	SK declared 'as far as I am aware there is no relevant audit information of which the clinical commissioning group's auditors are unaware.'	
	MC declared 'as far as I am aware there is no relevant audit information of which the clinical commissioning group's auditors are unaware.'	
	AF declared 'as far as I am aware there is no relevant audit information of which the clinical commissioning group's auditors are unaware.'	
8.	Any Other Business	
	DF confirmed that all documents will be uploaded by Wednesday lunchtime. It is recommended that we do not publish between 10 th and 16 th June. All papers to go to the three AGMs in September and the Governing Body Meeting in July.	
9.	Date and time of the next meeting:	
	The next meeting will be held from 14:00 – 17:00 on 29 June 2017 in Meeting Room 2 (Henry) at King Edward VII Hospital, Windsor.	
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