

**Bristol, North Somerset and South Gloucestershire  
Clinical Commissioning Group's  
In-Common Audit, Governance and Risk Committee  
Way of Working**

# **Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group's Audit, Governance and Risk Committees meeting in-common**

## **Way of Working**

### **1. Introduction**

The meeting in-common of a Bristol, North Somerset and South Gloucestershire (BNSSG) Clinical Commissioning Groups (CCGs) Audit, Governance and Risk Committees (the Committees) is established in accordance with each of the Clinical Commissioning Group's constitutions, standing orders and schemes of delegation. This document sets out the functions, membership, and voting arrangements for each Audit Committee and describes how in-common meetings will be managed. It does not attempt to replicate in full the arrangements specified in each of the CCGs Terms of Reference for the Audit Committees of the CCGs. Rather, it is intended as a description of how the meetings in common will normally operate. The corporate management team will advise Audit Committee Chairs should specific circumstances require other arrangements not captured in this document by referring to individual CCG terms of reference.

Terms of Reference for each of the Audit Committees are appended to this document. These terms of reference for individual Audit Committees will need to be amended to include additional responsibilities not currently included and to change the title of the Committee to the Audit, Governance and Risk Committee.

### **2. Remit and responsibilities of the Committees**

The Committees meeting in-common shall carry out the following duties on the behalf of their respective Governing Bodies as delegated by their constitutions and their terms of reference:

- Providing assurance to the Governing Bodies on systems of integrated governance and internal control;
- Ensuring that there is effective corporate and information governance systems and procedures in place;
- Assuring and recommending to the Governing Bodies the CCG's risk management strategy and procedures;
- Providing assurance to the Governing Bodies that the CCG's assurance framework and corporate risk register is comprehensive and robust;
- Ensuring there is an effective internal audit function; approving the internal audit plan, receiving Internal Audit reports and monitoring management actions in responding to matters raised in Internal Audit Reports;
- Reviewing and monitoring the work of external auditors and the management response to their work;
- Reviewing draft annual report and accounts and approving them for submission;
- Monitoring and reporting on the integrity of financial reporting and financial systems;

- Ensuring adequate counter-fraud and security services are in place; approving the annual counter-fraud and security plans, receiving counter-fraud and security reports and monitoring management actions in responding to matters raised in counter-fraud and security reports;
- Assuring standards of business conduct and that processes exist to handle conflicts of interest appropriately;
- Reviewing the effectiveness of arrangements for CCG staff to raise concerns and report incidents;
- Reviewing the findings of other assurance functions and reports and considering the implications for the governance of the CCGs;
- Seeking assurance that the CCGs have robust arrangements in place to satisfy their responsibilities in relation to EPRR and Business Continuity

### **3. Membership**

The members of the Committees meeting in-common shall be appointed by the Clinical Commissioning Groups from amongst its Governing Body members as follows:

#### **Bristol Clinical Commissioning Group**

The Committee will comprise three members of the Governing Body; none of whom should be the chair of the CCG

These members should be appointed by vote of the Governing Body:

- Chair of the Audit Committee (Lay member –Governance)
- Deputy Chair of the Audit Committee (another Governing Body member)

#### **North Somerset Clinical Commissioning Group**

The Committee will comprise three members of the Governing Body; none of whom should be the chair of the CCG; these members should be appointed by vote of the Governing Body:

- Chair of the Audit Committee (Lay member – Governance)
- Deputy Chair of the Audit Committee (another lay member )
- A membership representative from the Governing Body.

#### **South Gloucestershire Clinical Commissioning Group**

The Committee will comprise three members of the Governing Body; none of whom should be the chair of the CCG; these members should be appointed by vote of the Governing Body:

- Chair of the Audit Committee (Lay member – Governance)
- Deputy Chair of the Audit Committee (another lay member )
- A membership representative from the Governing Body.

#### **4. Location of Meetings**

Meetings will be rotated around the three CCG areas. The location of the meetings will be published in advance to all members of the Committees.

#### **5. Chair**

The meeting-in-common of the Committees shall be chaired by one of the lay members who have been nominated as Chair of an individual CCG Audit Committee, serving in turn. If, due to a conflict of interest a Chair cannot chair part of the meeting then another Chair will take over that part of the meeting.

#### **6. Attendance at Meetings**

Only members of the Committees have the right to attend Committee meetings.

The Internal and External Auditors will be asked to attend each meeting and will meet at least once per annum alone with just the Audit, Governance and Risk Committee members.

The Local Counterfraud Specialist will be asked to attend twice per annum and has the right to request attendance at any meeting.

Other individuals such as the Chief Financial Officer or other Executives or Managers within the CCG will be asked to attend to present items for assurance.

#### **7. Quorum and Voting**

Each Committee must be quorate in its own right. The quorum and voting arrangements for each CCG as defined in their individual terms of reference are set out below:

##### **Bristol Clinical Commissioning Group**

A quorum shall be two members of the three independent members. One of the members will be appointed Chair of the Committee by the Governing Body. The Chair of the organisation itself shall not be a member of the Committee.

The terms of reference for this committee are silent on voting arrangements.

##### **North Somerset Clinical Commissioning Group**

A minimum of two members will constitute a quorum.

A decision put to a vote at the meeting shall be determined by a majority of the votes of members present. In the case of an equal vote, the Chair of the Committee shall have a second and casting vote.

##### **South Gloucestershire Clinical Commissioning Group**

A minimum of two members will constitute a quorum.

A decision put to a vote at the meeting shall be determined by a majority of the votes of members present. In the case of an equal vote, the Chair of the Committee shall have a second and casting vote.

The aim will be to reach consensus without the need to resort to a vote. If a vote is needed, each Committee will vote individually. All relevant Committees will

need to vote to approve a decision for it to be enacted. Individual CCG decisions cannot be over-ruled by other CCG's.

If decisions only affect one CCG (or two) it is only that CCG/those CCGs who will be asked to consider that decision. Agenda's for in-common meetings will make clear which CCG/s items relate to and whether the item is for decision, review, assurance or information.

## **8. Administration**

The in-common meeting will have a single agenda as items are expected to generally be the same. Where items on the agenda relate to specific CCGs rather than all three this will be made clear.

Each Audit, Assurance and Risk Committee must take its own decisions and these will be recorded in the minutes.

A named administrator will be responsible for the provision of administrative support to the Committees meeting in-common and they will ensure that minutes of the meeting are accurately produced and agreed with members.

The Chief Finance Officer will be responsible for supporting the Chairs in the management of Audit, Assurance and Risk Committees and in drafting agendas; forward planners and specifying content of reports.

The Committees are authorised by the Governing Bodies to investigate any activity within its terms of reference.

## **9. Frequency of Meetings**

The Committees shall meet at least quarterly with additional meetings being scheduled as requested to manage the business of the Committees. Any two members of the Committees can request an additional meeting which should be convened within 21 days.

Except in the event of urgent meetings, a minimum of ten days' notice of a meeting of the committee's in common will normally be provided confirming the venue, time and date together with an agenda of items to be discussed.

Supporting papers will normally be sent to all members and other attendees as appropriate, no later than 5 days before the meeting.

## **10. Reporting arrangements**

The minutes of in-common meetings of the Audit Committees shall be formally recorded and submitted to the CCG Governing Bodies. The Chair of the Committee shall draw to the attention of the Governing Bodies issues that require disclosure or require Executive action.

The Committee will report to the CCG Governing Bodies annually on its work in support of the Annual Governance Statement, specifically commenting on the fitness for purpose of the Assurance Framework, the completeness and embeddedness of risk management in the organisation and the integration of governance arrangements.

## 11. Policy and Best Practice

When considering matters, the Committees should take into account the following points:

- All statutory requirements applicable to Clinical Commissioning Groups (including Accounting, Health and Safety, Information Security, etc.)
- NHS England requirements and standards
- NHS Best practice
- Emerging risks and issues

In all of their decisions and recommendations, the Committees should remain aware that each individual NHS organisation is corporately responsible for gaining its own assurance through the Committees meeting in-common.

The Committees will have full authority to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers this necessary, within its terms of reference and within a limit determined by the CCG's Chief Finance Officer.

## 12. Review of the Committee's Performance

The Committees will undertake a review of its performance on an annual basis and report this to the Governing Bodies of the CCGs.

## 13. Approval and Review

These terms of reference will be reviewed on an annual basis or sooner if required with recommendations made to the Governing Bodies of the CCGs for approval.

## 14. Review History

Version	Reviewed and Approved by:	Date Approved	Review date
Version 4	BNSSG Governing Body In-Common	07/11/2017	March 2018