

**NHS DORSET CLINICAL COMMISSIONING GROUP**  
**GOVERNING BODY MEETING**  
**ASSURANCE FRAMEWORK REPORT**

<b>Date of the meeting</b>	15/11/2017
<b>Author</b>	S Hawkins - Patient Safety and Risk Manager
<b>Sponsoring Board Member</b>	Dr S Yule - Locality Lead North Dorset
<b>Purpose of Report</b>	The report provides the Governing Body Assurance Framework for members to consider.
<b>Recommendation</b>	The Governing Body is asked to <b>note</b> the assurance framework contents.
<b>Stakeholder Engagement</b>	The Assurance Framework is maintained with the involvement of all Directorates. Oversight is provided by Lay Members of the Governing Body and Sub-Committees/Working Groups reporting to the Audit & Quality Committee.
<b>Previous GB / Committee/s, Dates</b>	N/A

**Monitoring and Assurance Summary**

<b>This report links to the following Strategic Principles</b>	<ul style="list-style-type: none"> <li>• Services designed around people</li> <li>• Preventing ill health and reducing inequalities</li> <li>• Sustainable healthcare services</li> <li>• Enabling care closer to home</li> </ul>		
	<b>Yes</b> [e.g. ✓] <i>Copy &amp; paste tick</i>	<b>Any action required?</b>	
		<b>Yes</b> Detail in report	<b>No</b>
All three Domains of Quality (Safety, Quality, Patient Experience)	✓		✓
Board Assurance Framework Risk Register	✓		✓
Budgetary Impact	✓		✓
Legal/Regulatory	✓		✓
People/Staff	✓		✓
Financial/Value for Money/Sustainability	✓		✓
Information Management & Technology	✓		✓
Equality Impact Assessment	✓		✓
Freedom of Information	✓		✓
<b>I confirm that I have considered the implications of this report on each of the matters above, as indicated</b>	✓		

Initials: SH

## **1. Introduction**

- 1.1 The framework provides assurance to the Governing Body of the controls that are in place to mitigate the key risks that could impact on the CCG's delivery of its strategic objectives.
- 1.2 This report provides the current version (Appendix 1) of the Governing Body Assurance Framework (GBAF) for information.
- 1.3 The framework is linked to the Strategic Objectives of the organisation and also serves as a source of external assurance for the NHS England – South (Wessex) quarterly assurance processes.
- 1.4 The Strategic Risks to the organisation have been revised by Directors and added to the Assurance Framework.
- 1.5 The Directors' Performance meeting has operational responsibility for maintaining the Governing Body Assurance Framework (GBAF) with support from the Patient Safety and Risk team.

## **2. Internal Audit**

- 2.1 The annual Review of Assurance Framework and Risk Management, was carried out by TIAA in March 2017 and the final report has been issued.
- 2.2 Following recommendations from the audit, a new version of the Governing Body Assurance Framework was developed. This was approved at the Audit and Quality Committee meeting in October. The format of Appendix 1 is now the agreed template going forward.
- 2.3 Additionally, Action 3 of the audit highlighted the need to implement the assurance template; the template is for completion by committees on a six-monthly basis to demonstrate that they are obtaining the assurances required in accordance with the Terms of Reference and strategic objectives applicable for that Committee.
- 2.4 During October, the assurance template was sent (in draft) to the Chair of the Audit and Quality Committee for completion and comment on the format. Following receipt of the completed template, and feedback on the format, the amended template will be sent to the Chairs of the key Groups and Committees for completion, relating to May to September 2017, during November. This will then be repeated in April 2018, and six monthly thereafter.

## **3. Gaps in Controls and Assurances**

- 3.1 There are currently no identified gaps in existing controls.

3.2 Additional control requirements may be identified in the light of ongoing changes to the strategic objectives, risks, and further updates and improvements to the structure of the GBAF.

## 4. Content changes

4.1 Agreement was made at the Director’s Performance Meeting on 17 October 2017 that the following two lines of assurance could be removed, following the Governing Body meeting on 20 September 2017.

KEY CONTROLS	SOURCES OF ASSURANCE	GAPS IN CONTROLS AND/OR ASSURANCE
<p><b>Consultation Institute:</b> The Consultation Institute is a not-for-profit organisation which is providing both advice and external assurance on the CSR consultation.</p>	<p>The CCG were signed off for the closing date review stage of the compliance process by the Consultation Institute on 8 April 2017. The CCH has been awarded a certificate of best practice by the Consultation Institute</p>	<p>None identified; these key controls are to stay on the GBAF until after the decision making on 20 Sept 2017. The Directors will then decide if these controls can be removed from the GBAF</p>
<p>Opinion Research Services:</p>	<p>The Consultation response document has been produced independently by ORS</p>	<p><b>17.10.2017:</b> Agreement reached that these controls can be removed from the GBAF</p>

## 5. Recommendation

5.1 The Governing Body meeting is asked to note the Governing Body Assurance Framework format and contents.

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**Date:** 30 October 2017  
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<b>APPENDICES</b>	
<b>Appendix 1</b>	<b>CCG Governing Body Assurance Framework</b>