

## Board of Directors (in Public)

**Item:** 6.1.1  
**Subject:** Audit Committee BAF Key Issues Report  
**Date of Meeting:** Tuesday 27<sup>th</sup> July 2021  
**Prepared by:** Jennifer O'Brien, Senior Executive Assistant  
**Presented by:** Julian Farmer, Chair Audit Committee  
**Meeting Held:** Tuesday 6<sup>th</sup> July 2021

| Agenda Item | Lead Exec | Assurance Received                           | New/Emerging Risks | Actions/Comments  |
|-------------|-----------|--|--------------------|---|
| 3.1         | KE        | Annual Review of Corporate Governance Manual | None               | <p>The table of contents was included as an appendix as were the proposed key updates. There were no major changes to highlight.</p> <p>The Committee reviewed the changes made to the corporate governance manual and recommended these to the Board of Directors for approval and adoption.</p>                   |
| 3.2         | KE        | Risk Management KPIs                         | None               | <p>There were no red indicators to note.</p> <p>Risks reviewed by managers was showing a compliance rating of 96% against a target of 95%. The assurance KPI remained static at 91% against a 95% target.</p> <p>Incidents open over 28 days had improved significantly from 68% to 74% with the Executive team</p> |

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|     |     |   |                            | <p>continuing to monitor and provide scrutiny.</p> <p>Historical risk management KPI improvements had been sustained and work was ongoing to ensure further improvements were made.</p> <p>The Committee noted that a review and refresh of the risk management KPIs was underway and a new reporting format was expected.</p> |
| 3.3 | MPC | Review Clinical Audit Plan & 6 Monthly Progress Report including NICE Guidance Review | None                       | The comprehensive report provided assurance on delivering the Clinical Quality Audit Plan, including NICE, and provided in depth details regarding the work undertaken to support that aim. The Committee noted the comprehensive appendices that were also included.  |
| 3.4 | KE  | Losses & Special Payments   | None                       | Reviewed and Noted   |
| 3.5 | KE  | Single Supplier Tender Waivers  | None                       | Reviewed and Noted   |
| 3.6 | KE  | Compliance with Licence: Review of Quarterly Checklist                                | On-going pandemic recovery | The primary risks related to diagnostic performance, RTT and rollover of contacts, due to the reprioritisation of clinical work in response to the pandemic.   |
| 3.7 | KE  | Review of Register of External Visits   | None                       | The Audit Committee reviewed the Register of External Visits and confirmed their satisfaction with the governance arrangements in place to deal with the findings and recommendations following external visits and inspections.   |
| 3.8 | KE  | Register of Interests Final Report  | None                       | The Audit Committee noted the improved final declarations of interest compliance rating for 2020/21 of 83% and were assured that there were no breaches of the Trust's Managing Conflicts of Interest Policy during 2020/21.   |
| 3.9 | KE  | Regulatory Action Plans   | None                       | The Committee noted that there were no outstanding actions with either the CQC or NHSE/I. The new regime would be presented to the Board of Directors in September 2021.   |

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| 4.1 | KE | Progress Report on Delivery of Plan   | None | The report was noted and work was scheduled to be completed on time  |
| 4.2 | KE | Follow Up Report  | None | The full report was noted by the Audit Committee   |
| 4.3 | KE | Baseline Assessment: Government Functional Standard GovS 013: Counter Fraud | None | The Committee noted the comprehensive report which provided an understanding of the recent changes resulting from the new government functional standard.  |
| 4.4 | KE | Anti-Fraud Update Report  | None | The Audit Committee noted the full report and were assured that thorough investigations into two claims had been carried out and there was no case to answer.  |
| 4.5 | KE | Annual Review of Internal Audit Provision                                   | None | The Trust were very satisfied with the internal audit provision and the Committee noted the positive feedback received from stakeholders.  |
| 5.1 | KE | Final Audit Findings Report   | None | The report confirmed that there were no significant issues to report; no adjustments to the financial statements that had resulted in adjustment to the Trusts retained surplus position were identified. The audit report opinion would be qualified to reflect a limitation of scope over the Trust's opening inventory balance. |
| 5.2 | KE | Annual Review of Performance of External Auditor                            | None | Discussions would take place relating to any improvements that could be made going forward and a stakeholder engagement piece would also be undertaken.<br><br>It was confirmed that feedback would be reported to the Council of Governors once the follow up session had been carried out and stakeholder feedback obtained.     |