Council of Governors

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Subject:	Report of the Audit and Assurance Committee			Date: 11 th August 2021	
Prepared By:	Shirley A Higginbotham, Director of Corporate Affairs				
Approved By:	Graham Ward, NED, Chair of Audit and Assurance Committee				
Presented By:	Graham Ward, NED, Chair of Audit and Assurance Committee				
Purpose					
	surance Committee m	et on 20 th July 2021.	Approval		
This paper informs members of the significant matters agreed				x	
by the Committee for highlighting to the Council of			Update		
Governors.			Consider		
Strategic Object	tives				
To provide	To promote and	To maximise the	To continuously To achieve		
outstanding	support health	potential of our	learn and	better value	
care	and wellbeing	workforce	improve		
	j				
X	X	x	x	x	
Overall Level of Assurance					
	Significant	Sufficient	Limited	None	
		X			
Risks/Issues					
Financial	The Audit and Assurance Committee is responsible for ensuring the system of				
Patient Impact	internal control is robust and effective in order to provide high quality, value for				
Staff Impact	money services to patients and provide a safe environment for staff.				
Services	Safeguarding the reputation of the Trust				
Reputational		1			
	ups where this item	has been presented	l before		
	Directors 5 th August 202				
Executive Summary					
 highlighted below Counter F Internal A Limited A Clinical A 	Fraud – Progress Repo udit – Progress Repor ssurance Report – Pat udit Planning and Prog	ort t ient Consent	the Report and note	the items	
• Board Ass The Audit and As approved, and al	of Interests surance Framework ssurance Committee m l outstanding actions a re no declarations of ir	re progressing, were	e covered by the age	enda or agreed as	

<u>Counter Fraud – Progress</u>

Counter Fraud presented their progress report detailing the work carried during the period 1st April

2021 – 30th June 2021. Committee agreed the Annual Bribery compliance report would be included in future Counter fraud updates and could be removed from the workplan. There were no items of escalation within the progress report.

Internal Audit – Progress Report

360 Assurance updated the outstanding audit from the 2019/2020 plan with regard to FIP is complete and the report is in draft. The two final reports from the 2020/21 plan had been issued. Five reviews have commenced from the 2021/22 plan, work had commenced on the Head of Internal Audit Opinion work programme and the current performance in relation to implementation of actions is 82%

Patient Consent – Limited Assurance Report

The medical director presented the report and noted the recommendations and timelines. It was agreed Quality Committee would monitor the implementation and embedding of the recommendations.

Clinical Audit Planning and Progress Report

Committee received assurance regarding clinical audit performance during the pandemic and were updated on progress against the plan and noted the potential impact the ongoing challenges would have on the plan going forwards.

Register of Interests

Committee received and noted the report, noting the number of non-compliant band 7+ at the time of reporting was 136 which was a significant improvement on the same time last year when the number non-compliant was 209. The focus during the year would be on Medics, particularly in Surgery as this is the largest and most consistent non-compliant group. Further reports were presented which detailed those members of staff who had identified private practice on their appraisal but had either not submitted a return or had submitted a nil return. Further work will be done to follow these up. Committee requested a report highlighting any individuals who were non-compliant in previous years and agreed that these would all be followed up.

Board Assurance Framework

A report was received detailing the process of populating, reviewing and revising the Board Assurance Framework.