

Paper 21

<b>Recommendation</b>  <input checked="" type="checkbox"/> <b>DECISION</b> <input type="checkbox"/> <b>NOTE</b>	<div style="border: 1px solid black; padding: 2px;"><b>Trust Board</b></div> <p>is asked to adapt and adopt the Tier 2 self-assessment used by Audit Committee to carry out an annual review</p>
<b>Reporting to:</b>	<b>Trust Board</b>
<b>Date</b>	5 July 2018
<b>Paper Title</b>	Tier 2 Self-Assessment Template
<b>Brief Description</b>	<p>It is stated within the Audit Committee's terms of reference that in addition to producing an annual report, a self-assessment of the Committee's effectiveness should take place annually. The annual self-assessment questionnaire is completed by the committee members; their responses allow issues to be raised and debated for clarity and to determine where action is needed.</p> <p>The questionnaire is based upon checklists within the HFMA NHS Audit Committee Handbook, designed to help NHS governing bodies to review and continually re-assess systems of governance. Committee members are asked to consider the effectiveness and 'fitness for purpose' of the committee's functions.</p> <p>It is proposed that this best practice approach is adopted as a standard across all tier 2 committees to the Trust Board and is based on the Audit Committee self-assessment. The Audit Committee self-assessment questionnaire is attached for Board members' consideration.</p> <p>The latest Committee structure is attached for information.</p>
<b>Sponsoring Director</b>	Director of Corporate Governance
<b>Author(s)</b>	Director of Corporate Governance
<b>Recommended / escalated by</b>	Audit Committee
<b>Previously considered by</b>	Audit Committee
<b>Link to strategic objectives</b>	
<b>Link to Board Assurance Framework</b>	
<b>Outline of public/patient involvement</b>	

<b>Equality Impact Assessment</b>	<ul style="list-style-type: none"><li><input checked="" type="radio"/> <b>Stage 1 only (no negative impacts identified)</b></li><li><input type="radio"/> <b>Stage 2 recommended (negative impacts identified)</b><ul style="list-style-type: none"><li>* <b>EIA must be attached for Board Approval</b></li><li><input type="radio"/> negative impacts have been mitigated</li><li><input type="radio"/> negative impacts balanced against overall positive impacts</li></ul></li></ul>
<b>Freedom of Information Act (2000) status</b>	<ul style="list-style-type: none"><li><input checked="" type="radio"/> <b>This document is for full publication</b></li><li><input type="radio"/> <b>This document includes FOIA exempt information</b></li><li><input type="radio"/> <b>This whole document is exempt under the FOIA</b></li></ul>

<b>Name</b>	
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**Audit Committee Annual Self Survey**

Source: NHS Audit Handbook (HFMA, 3<sup>rd</sup> Edition)



Statement	Strongly agree	Agree	Disagree	Strongly disagree	Can't answer	Comments
<b>Theme 1 - committee focus</b>						
The committee has set itself a series of objectives it wants to achieve this year.						
The committee has made a conscious decision about how it wants to operate in terms of the level of information it would like to receive for each of the items on its cycle of business.						
Committee members contribute regularly across the range of issues discussed.						
The committee is fully aware of the key sources of assurance and who provides them in support of the controls mitigating the key risks to the organisation.						
The committee clearly understands and receives assurances from third parties the organisation uses to manage/operate key functions - for example, financial services operated by NHS Shared Business Services, other NHS bodies, commissioning support units or private contractors.						
Equal prominence is given to both quality and financial assurance.						
<b>Theme 2 - committee team working</b>						
The committee has the right balance of experience, knowledge and skills to fulfil the role described in the <i>NHS Audit Committee Handbook</i> .						
The committee has structured its agenda to cover quality, data quality, performance targets and financial control.						

Statement	Strongly agree	Agree	Disagree	Strongly disagree	Can't answer	Comments
The committee ensures that the relevant executive director/manager attends meetings to enable it to secure the required level of understanding of the reports and information it receives (i.e. the right executive lead is there to discuss risk and internal matters in their area of responsibility rather than the committee having to rely on the CFO to act as a conduit to the executive team).						
Management fully briefs the committee via the assurance framework in relation to the key risks and assurances received and any gaps in control/assurance in a timely fashion thereby eradicating the potential for 'surprises'.						
Other committees provide timely and clear information in support of the committee thereby eradication the potential for 'surprises'.						
I feel sufficiently comfortable within the committee environment to be able to express my views, doubts and opinions.						
I understand the messages being given by the organisation's assurance advisors (external audit/Internal audit/counter fraud specialists).						
Internal audit contributes to the debate across the range of the agenda and not just on the papers they present.						
Members hold the assurance providers to account for late or missing assurances.						
When a decision has been made or action agreed I feel confident that it will be implemented as agreed and in line with the timescale set down.						
<b>Theme 3 - committee effectiveness</b>						
The quality of committee papers received allows me to perform my role effectively.						

Statement	Strongly agree	Agree	Disagree	Strongly disagree	Can't answer	Comments
Members provide real and genuine challenge - they do not just seek clarification and/or reassurance.						
Debate is allowed to flow and conclusions reached without being cut short or stifled due to time constraints etc.						
Each agenda item is 'closed off' appropriately so that I am clear what the conclusion is; who is doing what, when and how etc. and how it is being monitored.						
At the end of each meeting we discuss the outcomes and reflect back on decisions made and what worked well, not so well etc.						
The committee provides a written summary report of its meetings to the Governing Body.						
The Governing Body challenges and understands the reporting from this committee.						
There is a formal appraisal of the committee's effectiveness each year which is evidence based and takes into account my views and external views.						
<b>Theme 4 - committee engagement</b>						
The committee actively challenges both management and other assurance providers during the year to gain a clear understanding of their findings.						
The committee is clear about the complementary relationship it has with other Governing Body committees that play a role in relation to clinical governance, quality and risk management.						
The committee receives clear and timely reports from other governing body committees which set out the assurances they have received and their impact (either positive or not) on the organisation's assurance framework.						

Statement	Strongly agree	Agree	Disagree	Strongly disagree	Can't answer	Comments
I can provide two examples of where we as a committee have focused on improvements to the system of internal control as a result of assurance gaps identified.						
<b>Theme 5 - committee leadership</b>						
The committee Chair has a positive impact on the performance of the committee.						
Committee meetings are chaired effectively and with clarity of purpose and outcome.						
The committee Chair is visible within the organisation and is considered approachable.						
The committee Chair allows debate to flow freely and does not assert his/her own views too strongly.						
The committee Chair provides clear and concise information to the governing body on the activities of the committee and the implications of all identified gaps in assurance/control.						

SaTH Committee Structure – June-18

