

Audit and Risk Assurance Committee (ARAC) Summary

The Board is asked to **RECEIVE** and **NOTE** the Committee Chair's report of the 3-4 issues/key points from the meeting which are needed to be <u>escalated to the Board</u>

Key points from the meeting held on 14 February 2020

Annual Leave and Medical Waiting List Initiatives (WLI) Audits

The Medical Director (MD) attended and provided an update in response to recent audit recommendations with respect to i) Annual Leave and ii) Waiting List Initiatives (WLI).

- i) The Senior Medical Leadership Team (SLT) along with the BMA representative and the LNC are currently reviewing the *Annual Leave* Policy to ensure that there is clear guidance provided to our doctors and operational managers. The MD gave assurance that regular ongoing audits will be carried out to measure compliance. It was noted that whilst the current audit has looked at about 50% of Consultants and SAS doctors, this review will be extended to all relevant staff.
- ii) The MD noted that the *Additional Clinical Activity* Policy (previously WLI policy) is also being reviewed and that he had written to the Medical colleagues to reiterate that:
 - When WLIs can and cannot be booked and the authorisation process for these.
 - The Senior Medical Leadership Team will work on harmonising the WLI rates, taking into account intensity and areas of high demand.
 - Medical eRostering launch/roll-out commences Apr-20 (estimated 1-2 years to complete) and that the associated action plan will be monitored by the Workforce Committee.

Level of assurance provided: Moderate Direction of travel: Improving

Payments and Creditors - Better Practice Code

Internal audit has noted the pragmatic approach taken by the Trust in managing its working capital. The Better Payment Practice code requires payments to be made within 30 days, the Trust has not met this requirement in the majority of cases as we are currently working with an internally agreed target 45 days. The Trust has breached this internal performance target on a number of occasions and work is underway to identify the reasons for this. Work will focus on the purchase to pay cycle and where invoices are held up in the process.

Level of assurance provided: Low Direction of travel: Same

Corporate Governance

It was noted that the newly appointed Interim Director of Corporate Governance was in attendance and would act as the Trust lead director for Audit and Risk Assurance and all Trust governance matters with immediate effect. This role also covers 'Counter- Fraud Champion' for the Trust.

Level of assurance provided: High Direction of travel: Improving

Internal Audit opinions to date and prior year comparisons					
	IA Risk		2017/18	2018/19	2019/20
Review Area	Rating		Rating	Rating	Rating
Governance statement: Integrated governance and risk management					
Board Assurance Framework	Medium		Substantial	Moderate	date tba
Core Internal Audits - Financial Con	trol and Mana	ıge	ement		
Waste Reduction Programme	Medium		Not audited	Limited	n/a
Cash and Treasury Management	Medium		Moderate	Limited	Limited
Income and Debtors	Medium		Moderate	Moderate	Moderate
Payments and Creditors	Medium		Substantial	Substantial	Substantial
Budgetary Control	High		Limited	Limited	date tba
Fixed Assets	Medium		Not audited	Not audited	Moderate
Core Internal Audits - Other review	S				
Payroll	Medium		Substantial	Substantial	Substantial
IT Controls	High		Moderate	Moderate	Feb-20
Risk Based Performance Reviews					
Workforce - reruitment process	High		-	-	tba
CNST Review	High		-	-	tba
Datis Incident Management	Medium		-	-	tba
Freedom to Speak-up	Medium		-	-	Mar-20

Notes -

'tba' means report had not been issued as the time of ARAC meeting, n/a means no audit was conducted or planned.

Level of assurance provided: Moderate Direction of travel: Same

Internal Audit Progress Reports

- A number of planned Risk Based reviews were scheduled to be reported at this meeting these were Datix Incident Management, Workforce recruitment processes and Freedom to Speak up
- These reports were not included in the Internal Audit report, with capacity issues within the trust cited as the reason.
- The committee was concerned that this was causing a workload in the final quarter that would be challenging to deliver on and asked that this was raised at the Executive committee, and consideration should be given to allocating sufficient resource to complete these reports to ensure timelines now agreed with the Internal Audit team are achieved.

Level of assurance provided: Low Direction of travel: Worsening

Risk Assurance

- The Committee noted the imperative for the executive team to agree the strategic direction, particularly (the clinical strategy) prior to establishing the governance arrangements need to ensure delivery. As these new governance arrangements are being developed, current governance arrangements will be maintained.
- The Interim Director of Corporate Governance informed the Committee that he would be taking over as Chair of the Operational Risk Group in March.

Level of assurance provided: Moderate Direction of travel: Same

Further matters raised for consideration by the Board

- Recommendations for developing the Trust's Risk Appetite Statement have been drafted using
 guidance from the Good Governance Institute (GGI) and were considered by the Committee.
 The approach was accepted by the Committee and the revised version is to be circulated to the
 Executive team for comment prior to referral to the Trust Board for approval.
- The Committee Chair acknowledged the significant support from the Director of Corporate Services to the Audit Committee over recent years, and thanked her for her much valued contribution.

Level of assurance provided: High Direction of travel: Improving

Completed by: Tony Bristlin, Chair of Audit and Risk Assurance Committee

Date: 14 February 2020