

Audit and Risk Assurance Committee, Key Issues Report		
Report Date:		Report of: Audit and Risk Assurance Committee
Date of meeting: 16 February 2022		Membership Numbers: Member apologies received from Mr Bristlin. Internal Audit and Counter Fraud (MIAA), External Audit (KPMG), Director of Governance and Communications, Director of Finance, Co-Medical Director, Interim Head of Risk, and Trust Chair (observing) also in attendance for the meeting.
1	Agenda	<p>The Committee considered the following:</p> <ul style="list-style-type: none"> • Internal Audit Progress Report (7 December – 4 January 2022) • Internal Audit: Quality Spot Check final report (limited assurance) • Internal Audit: Waiting Lists Management final report (moderate assurance) • Internal Audit: Cost Improvement final report (substantial assurance) • Internal Audit: Draft Audit Plan 2022/23 • Trust Internal Audit Recommendations Tracker • External Audit: Draft Audit Plan 2022/23 • MIAA Anti-Fraud Progress Report • Risk Management Policy and Risk Management Process Guide • Committee Terms of Reference annual review • Annual Review of Committee Effectiveness • Cycle of Business
2a	Alert	<ul style="list-style-type: none"> • The Committee heard from Mr Steyn that some progress had been made regarding the approval of processes and rates regarding Criteria Led Discharge. However, more work was required before this issue was finalised, and it was agreed that the item would stay as a standing item until complete. • Regarding the implementation of Waiting List Initiative payments, the Committee was advised that there had been a lot of work undertaken regarding this matter, but it was later noted, that progress has been slow. Concerning a timeline as to when the matter would be finalised, the Director of Finance advised that her ambition would be that this was finalised by end of the financial year end.
2b	Assurance	<ul style="list-style-type: none"> • Referring to an issue that had caused some concern at a previous meeting in respect of medical devices the Director of Finance provided assurance and advised that the Trust achieved a maintenance target of 81% on standard items (compared with the industry benchmark of 75%). • Also, regarding 'lost' items, it was noted that this term was used to refer to items that had not been 'seen' for two years (missed a calibration date, etc.); this amounted to 320 items during the 2020/21 financial year. However, the most expensive item to have been 'lost' was valued at circa £7k, with 17 items being valued between £2k - £7k which therefore made up a value of £50k loss, from a total of £146k loss. In addition, many of the 320 items were quite aged, and the majority had been already expensed. • Finally, the 320 items amounted to the equivalent of 1.5% our medical equipment list, with the value of those items totalling circa 0.4% of our •

		<p>medical devices' equipment inventory.</p> <ul style="list-style-type: none"> • The Committee received the Anti-Fraud Progress Report and noted progress. It was also noted that the Trust's Fraud impact submission, due in December 2021, had been filed on time. • The Committee were pleased to see that the Internal Audit: Cost Improvement final report had received substantial assurance. 		
2c	Advise	<ul style="list-style-type: none"> • A report, updating the Committee on the number of outstanding audit recommendations was received and it was noted that the overall number of audit recommendations had decreased from the previous meeting (68) down to 53, with 37 that were overdue for completion, compared with 39 from the previous meeting. It was also noted that the numbers are updated after everyone meeting to include the new recommendations from the reports presented at that meeting. The matter will continue to be reported on a regular basis. • The Committee members reviewed the revised Risk Management Policy and supporting documentation, which they recommended for approval by the Board. 		
3	Report compiled by	<i>Anna Milanec, Director of Governance and Communications</i>	Minutes available from	<i>Isla Tomkiss, Executive Governance Support and Committee Secretary</i>

Audit and Risk Assurance Committee, Key Issues Report	
Report Date:	Report of: Audit and Risk Assurance Committee
Date of meeting: 6 April 2022	Membership Numbers: Member apologies received from Mr Bristlin and Dr Lee. Internal Audit and Counter Fraud (MIAA), External Audit (KPMG), Director of Governance and Communications, Director of Finance, and Interim Head of Risk, also in attendance.
1	<p>Agenda</p> <p>The Committee considered the following:</p> <ul style="list-style-type: none"> • Internal Audit Progress Report (4 January – 25 March 2022) • Internal Audit: ICNET (infection control) critical application final report (limited assurance) • Internal Audit: Consultant Planning final report (moderate assurance) • Internal Audit: ESR / Payroll final report (substantial assurance) • Internal Audit: Assurance Briefing Note • Internal Audit: Head of Internal Auditors' Opinion 2021/22 • Internal Audit: Charter • Internal Audit: Audit Plan 2022/23 • External Audit: Draft Audit Plan 2021/22 • MIAA Anti-Fraud Plan 2022/23 • Losses and special Payments • Procurement Waiver Review • IFRS16 Implementation • Consolidation of Charitable Funds Accounts • Cycle of Business
2a	<p>Alert</p> <ul style="list-style-type: none"> • The Head of Internal Audit Opinion was received and noted as 'Limited' the same as the previous two years. The basis for forming this opinion was: <ul style="list-style-type: none"> • An assessment of the design and operation of the underpinning Assurance Framework and supporting processes. • An assessment of the range of individual assurances arising from the internal audit reports throughout the period (7 limited assurance, two moderate assurance and three substantial assurances); • An assessment of the organisation's response to Internal Audit recommendations and the extent to which they have been implemented. • The Committee members were concerned to learn, as part of the Consultant Planning internal audit report, that 318 consultant job plans were still outstanding, and were due to be completed by 31 May 2022.
2b	<p>Assurance</p> <ul style="list-style-type: none"> • The Committee were pleased to see that the Internal Audit: ESR / Payroll final report had received substantial assurance. • The Losses and Special payments report was received, and the Committee noted that costs of pharmacy expired stock continued to reduce.

2c	Advise	<ul style="list-style-type: none"> • The Internal Audit Plan for 2022/23 was received, and some discussion took place as to whether the correct items were listed as proposed audits. It was suggested that due to where the Trust currently found itself, there may be more urgent matters to consider than some of the areas that had been specified two years ago, as part of year three of the current plan. It was therefore agreed that this would be further discussed outside of the meeting. • The External Auditors presented their Value for Money Audit Plan 2021/22. Whilst these may change whilst audit work is ongoing, it was noted that, at this stage, two potential risks had been identified: <ul style="list-style-type: none"> • Financial stability; and • Improving economy, efficiency and effectiveness (arising from continuing work relating to CQC concerns and Ockenden.) <p>Work will continue to be taken in relation to the VFM plan by the External Auditors, with final opinions being made available in June 2022.</p> • The Committee received the Procurement Waiver Log for the period December 2021 to February 2022 and noted 8 competition waivers and 2 full SFI waivers. (In comparison, the Trust raised 82 waivers for the whole of 2020/21, circa 20 waivers per quarter.) 		
3	Report compiled by	<i>Anna Milanec, Director of Governance and Communications</i>	Minutes available from	<i>Isla Tomkiss, Executive Governance Support and Committee Secretary</i>