

AUDIT AND RISK MANAGEMENT COMMITTEE

Date of meeting:	23 rd May 2019
Attendees:	Harjinder Kang (Chair), Mike Laverty [part meeting], Richard Samuda, Dinah McLannahan, Kam Dhami, Dave Baker, Craig Higgins, Julie Turley [committee support] Grant Thornton: Nicola Coombes, Mark Stocks [part meeting] RSM: Asam Hussain and Bradley Vaughan
Apologies:	Marie Perry, Prof Kate Thomas, Waseem Zaffar, Mike Hoare
Key points of discussion relevant to the Board:	<ul style="list-style-type: none"> <p>• 2018/19 Financial Statements The final version had been circulated which contained some minor disclosure and points of detail comments. No major changes to the accounts had occurred since the draft was considered at by the Committee on 2nd May 2019. Grant Thornton were awaiting a paper from KPMG regarding the VAT conclusion on their testing on GRNI. MS would contact the Chair with any other misstatements that may be identified. Subject to those matters an unqualified opinion will be issued.</p> <p>• Governance pack: A full supplier list had been created by merging the following data sets: IT and Estates data from their local registers, purchase orders raised over the past 12 months. Every supplier who the Trust paid over the last 12 months. A new process around tender waivers would be presented at the next FIC meeting</p> <p>• Overseas patients / charging Invoicing of potentially chargeable patients has increased significantly, however the national average collection rate is 34% and the Trust scores substantially less than this. It was felt that other Trusts were more successful at clawing back these debts as their dedicated teams had been more embedded into the system, and that they were more ruthless in the pursuit of payments.</p> <p>• GDPR compliance The Trust had rated itself as amber or non-compliant against the Data Security & Protection Toolkit requirements as greater assurance and information/confirmation of compliance was required. The action plan, which was The Trust's own assessment against its obligations, is review quarterly by the CEO.</p> <p>• Data quality There was assurance around the data quality, however there were several red segments around process or people skills that</p>

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	<p>required resolving. There was an action plan at each indicator level to fix those.</p> <p>Internal Audit: The results of two audit reviews were discussed:</p> <ul style="list-style-type: none"> • Data Security and Protection Toolkit: a lack of evidence meant the Trust's self-assessments could not be confirmed. Some evidence was subsequently found • Consultant Job Planning: the overall conclusion was that the Trust had the policies and was in line with best practice but there were lots of inconsistencies in practice • Counter Fraud draft Annual Report, Workplan and Fraud Risk Assessment <ul style="list-style-type: none"> - From a counter fraud risk assessment point of view the list of risks identified were areas where fraud was more likely to occur not specific to the Trust.
Positive highlights of note:	<ul style="list-style-type: none"> • Unqualified audit opinions on the 2018/19 Annual Accounts and Value for Money expected.
Matters of concern or key risks to escalate to the Board:	<ul style="list-style-type: none"> • None
Matters presented for information or noting:	<ul style="list-style-type: none"> • The Trust was down to three individual incidents over 21 days. A report was produced for groups and directorates to identify all incidents due to be managed within the next 14 days for the purposes of proactive management of potential breaches.
Decisions made:	None
Actions agreed:	<ul style="list-style-type: none"> • To target those staff who are non-compliant with their IG mandatory training and have never done it.

Harjinder Kang

Chair of the Quality and Safety Committee

For the meeting of the Trust Board scheduled for 6th June 2019