

Red	Amber	Green
No Assurance	Limited Assurance	Significant Assurance

Name of Meeting:	Audit & Risk Committee
Date of Meeting:	Tuesday 20 October 2020
Prepared by:	David Wharfe, Chair of Committee/Non-Executive Director

Key Highlights from the meeting		
	Highlight	RAG Rating
1.	The Committee received and discussed the report issued by the North of England Commissioning Support Unit, which assessed the overall quality of the Trust's referral to treatment tracking list, following completion of the National Patient Tracking List (PTL) Validation Programme. The report concluded that the Trust was largely on top of its validation of the PTL.	G

Assurances gained at the meeting		
	Assurance	RAG Rating
1.	Internal Audit has given high assurance that the Trust has followed government guidelines in reclaiming costs incurred in respect of COVID-19. This opinion reflects the auditors' view that controls are operating effectively and consistently across the system.	G
2.	The Committee received and discussed the Counter Fraud progress report. The promotion and delivery of fraud awareness training remotely will be followed up with departments across the Trust.	G
3.	The Committee discussed the risks set out in the Board Assurance Framework, and reviewed the current risk scores. A programme of deep dives at Committee level was agreed, to enable further focus and scrutiny to strategic risks in 2021. These were scheduled for January, April and July in the FPD, Quality and Safety and People Committees respectively.	A
4.	Future reports on waivers would include narrative to explain the reasoning behind the decision to waive standing orders.	G

Issues or emerging risks		
	Issues or emerging risks	RAG Rating
1.	In respect of previously agreed Internal Audit recommendations in a number of areas, no update had been provided to give assurance that progress had been made. Agreement was reached that the process needs increased scrutiny within relevant Committee agendas.	A
2.	The Committee received a paper detailing progress made towards implementing agreed recommendations in relation to the Internal Audit report labelled Organisational Governance Deep Dive. Some agreed actions had not been completed within the agreed timescale, and agreement was reached that the outstanding issues needed to be completed and confirmation received within a further paper at the January 2021 Audit & Risk Committee meeting.	A

3.	In respect of the Board Assurance Framework, the gap in assurance, with no narrative provided, across the strategic aim of "not developing confident, skilled, competent and diverse colleagues to provide clinical and managerial leadership" was discussed. The Director of People and OD would be contacted to understand how the gap in assurance would be addressed. In more general terms the gaps in assurance required further detailed work up across all strategic risks.	A
4.	The Committee received an update paper regarding the high level risks and mitigations within the organisation. The Committee recognised the additional focus required at divisional level to ensure that the risk register is reflective of the Trust's current situation, and is fully owned by the responsible risk owners. Further updates would be needed to gain assurance.	A
5.	The Committee discussed the report detailing the expired and damaged medicine which had to be written off in 2019/20. The value of the write off was £97,967 and the Chief Pharmacist provided an explanation as to the reasons behind this figure.	A

Any other comments

External Auditors were not in attendance at the meeting. As a result, the agenda item AGH Solutions Annual Accounts had to be deferred and a further meeting will need to be convened to discuss the audited accounts.