Agenda Item: 9a

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Committee Chair's Assurance Report

Report to:	Board of Directors (in Public)
Date of meeting:	2 August 2022
Title of Report:	Assurance Report from the Audit Committee
Recommendation:	For assurance
Chair:	David Dickinson, Non-Executive Director
Purpose:	The report summarises the assurances received, approvals, recommendations and decisions made at the Trust's Audit Committee meeting on **14 June 2022.**
Background:	The Committee meets no less frequently than quarterly. Its purpose is to provide independent assurance of the adequacy of the Board Assurance Framework and associated control environment, independent scrutiny of the Trust's financial, non-financial and quality performance to the extent that it affects the Trust's exposure to risk and weakens the control environment and to oversee the financial reporting process. The work of the Committee will facilitate the completion of the Annual Governance Statement by the Accounting Officer.
Item for Assurance	**Clinical Audit Quarter 4 Performance Report** The Committee received the clinical audit report for the period up to quarter 4 for 2021/22 and noted a continued improvement within the clinical audit programme. The Committee noted the significant amount of work that had been completed and the work of the team to focus on the review of data quality and processes to support the audit programme for 2022/23 and build upon the improvements that have been made within the year. The Committee was informed that all divisions had signed off their plans for 2022/23 with a focus on ensuring that relevant national and local audits were being progressed. The Committee took some assurance from the progress made and looks forward to seeing further improvements within the 2022/23 audit programme.
Item for Escalation / Assurance	**Internal Audit Annual Plan** The Committee noted that the 3-year Audit Plan will be presented at the next meeting in September 2022. This was the first year of the new Internal Auditors and the process will ensure that the development of the 3-year plan and more detailed annual plan will be informed by previous internal audits and a review of the 'audit universe' that will identify the key risks for the Trust in achieving the strategic objectives.

	The Committee was informed that the requirements of NHSE&I to review a self-assessment of the national financial controls checklist and a requirement to complete an internal audit of Emergency Preparedness, Resilience and Response (EPRR) have been prioritised and will form part of the 2022/23 annual internal audit plan.
Item for Assurance	**LCFS Annual Work Plan** The Committee noted there will be a focus on staff engagement and interaction. This is the first year of the new Local Counter Fraud Specialist (LCFS) supplier and the plan is based upon national standards and work that needs to be done in-year to support the Trust's submission of the Counter Fraud Functional Standard Returns (CFFSR). The LCFS will co-ordinate with internal audit colleagues to avoid potential duplication.
Item for Assurance	**External Audit Progress Report** The External Auditors briefed the Committee and confirmed that the main focus of their update would follow as part of the annual accounts audit process. This was completed in the second part of the Audit Committee dedicated to the annual accounts of 2021/22.
Item for Assurance	**Emergency Planning Resilience and Response (EPRR) and Business Continuity Assurance** The Committee noted that this is currently progressing through Executive groups and will come to this Committee in September 2022. An internal audit is being scoped around the EPRR process and will come to this Committee in either September or December 2022.
Item for Assurance	**Waivers and High Value Orders** The Committee discussed high value orders and noted that all items have been approved via the business case procedure and/or the relevant limits of approval in place for expenditure. The Committee was also informed that the tender process was followed. The key oversight of the Committee was with regards the number of waivers being raised and the Committee agreed to consider the contents of future reports.
Item for Assurance	**Losses** The Committee received the report on losses and noted that comparator narrative will be included in future reports, which will provide further assurance.
Item for Assurance	**Declarations of Interest, Gifts and Hospitality** The Committee received the Declarations of Interest, Gifts and Hospitality Report. Since the last meeting in March 2022, individuals that had not made Declarations have been pursued and those with lengthy entries have been given the opportunity to shorten them. Those responses will be placed on the register ahead of publication to the website. The Committee noted the approach to the register for the current financial year.
Risks to refer to risk register:	None.

Attendees	D Dickinson– Non-Executive Director and Committee Chair S Hayter – Non-Executive Director S Roberts – Non-Executive Director C Shaw - CEO C Benham – Director of Finance J Humphries – Director of People L Notley – Director of Patient Safety L Lippmann – Deputy Director of Finance A Prime – Trust Secretary L Skaife-Knight – Deputy CEO (agenda item 10e) L Preston – Board / Committee Administrator (minutes) H Ward – PwC, Internal Audit (agenda items 7 & 8) L Carbonelle-Marvan – PwC, Internal Audit (LCFS) (agenda items 7 & 8) E Larcombe – KPMG, External Audit (agenda item 9) H Lincoln – KPMG, External Audit (agenda items 9)
Apologies:	None