Agenda Item: 21a

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:** | 1 February 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 by the Audit Committee at its meeting on **14 December 2021**. |
| **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.<br>The work of the Committee will facilitate the completion of the Annual Governance Statement by the Accounting Officer. |
| **Item for Assurance** | **Clinical Audit Quarter 2 Performance Report**<br>The Committee considered the quarter 2 performance report and noted that the recovery plan and trajectory for improvement is in place. The Committee was informed that the response from the Divisions has been positive and that the next stage of the improvement plan will involve the development and implementation of action plans. The Committee welcomed the continuous improvement in this area and requested that further commentary be included in areas of audit non-participation to give further clarification to the position of the overall audit programme. |
| **Item for Assurance** | **Internal Audit Progress Report & Cyber Security Quarterly Progress Update**<br>The Committee received the Internal Audit Update report and noted the progress against the annual plan. The Committee noted that a significant amount of audit work was required to be completed in the last quarter to achieve the completion of the plan.<br>The Committee also noted that there had been positive progress in terms of cyber security and acknowledged that this was being monitored through the Finance and Activity Committee on a monthly basis. The Committee recognised that duplication of reporting should be avoided and confirmed as a result of this good progress cyber security should be monitored on a quarterly basis. |

| | |
|---|---|
| **Item for Assurance and for Escalation** | **Internal Audit Reports: Recruitment and Selection and Temporary Staffing**<br>The Committee received both reports and had noted that both reports had provided "partial assurance with improvements required." The Committee was satisfied with the conclusions for both audits and noted that they will be monitored through the established monthly recommendation tracking process.<br>The Committee also noted that both Internal Audit Reports for Recruitment and Selection and Temporary Staffing would also be delivered to the People Committee. |
| **Item for Assurance** | **Internal Audit Reports: Infection Prevention and Control**<br>The Committee received the internal audit report for Infection Prevention and Control and noted that the report provided "significant assurance with some improvements". The recommendations were confirmed as low risk with a few advisory items for improvement.<br>The Committee welcomed the report and the Chair of the Committee asked for the Committee's thanks to be passed back to all the staff involved. |
| **Item for Assurance** | **Internal Audit Recommendations Tracker**<br>The Committee received the internal audit recommendation tracker update report. The Committee noted that the Trust is in a much better position than it was at this point last year. The Committee also noted that the report goes to the Chief Executive Leadership Group on a monthly basis. The Committee requested additional narrative on any overdue items to be included within future reports. |
| **Item for Assurance** | **Counter Fraud (LCFS) update including survey outcomes report and comparable benchmarking**<br>The Committee received the Counter Fraud update report including benchmarking data and information against other acute providers. This benchmarking data was provided by the Local Counter Fraud service due to the delay in the publication of the national benchmarking datasets.<br>The Committee was also informed that it would need to approve the Counter Fraud strategy which is currently in drafting stage and would progress to the next Committee meeting. |
| **Item for Assurance** | **External Audit Progress Report**<br>The Committee noted that KPMG had been appointed as the Trust's external auditors following a full tender exercise.<br>The Committee received an update report from the external auditors and noted that more detail on the planning process and benchmarking actions will be provided at the next meeting in March 2022. |
| **Item for Assurance** | **Hospital Valuation Report**<br>The Committee received a verbal update on the year end revaluation process. The Trust's independent valuers will deliver a draft valuation report at the March Committee as part of the year-end financial closure process. |

| | |
|---|---|
| **Item for Assurance** | **Digital – Cyber Audit update**<br>The Committee received a specific update paper on the actions following the internal audit on cyber security. The Committee referenced the update as discussed in the Internal Audit Update and noted that substantial progress had been achieved in the last 12-months. The Committee also noted Alan Brown's (Non-Executive Director) significant contribution in terms of cyber security. |
| **Item for Assurance** | **Declarations of Interest, Gifts and Hospitality**<br>The Committee received the Declarations of Interest, Gifts and Hospitality Report. The Committee noted that c300 letters will be sent to decision making staff with a 21 January 2022 deadline. The Committee looks forward to the March 2022 report.<br>The Committee also noted that that this work would affect Component 12 and the rating that will be awarded at the end of the year. |
| **Risks to refer to risk register:** | None |
| **Other items of business:** | • Reports for standing items on IG Breaches, Waivers and Losses<br>• Forward planner 2021/22 |

**Attendance record**

Attended: D Dickinson – Committee Chair & Non-Executive Director
G Ward – Non-Executive Director
S Hayter – Non-Executive Director

Invitees: C Shaw – CEO
C Benham – Director of Finance
J Humphries – Director of People
L Notley – Director of Patient Safety
L Lippman – Deputy Director of Finance
D-D A Graham – Grant Thornton (Internal Audit)
H Lincoln – KPMG (External Audit)
S Pooni – LCFS, Grant Thornton
M Robertson – LCFS, Grant Thornton
N David-West – Interim Deputy Director of Patient Safety (agenda item 6)
A Howling – Dep. Dir. Infection Prevention & Control (agenda item 7c.iii)
L Skaife-Knight – Deputy CEO (agenda items 11, 12)
S Balmford – Head of Digital (agenda item 11)
N Hall – Head of Digital (agenda item 12)
A Prime – Trust Secretary (agenda item 13c)
L Preston – Board / Committee Administrator (minutes)