

**Meeting Assurance Report  
to the Council of Governors  
Held on 19 March 2024**

<b>Name of Committee / Group</b>	Audit Committee
<b>Date of Meeting</b>	15 January 2024
<b>Chair</b>	Ann Harris, Non-executive Director
<b>Lead Officer</b>	Sandi Carman, Assistant Chief Executive
<b>Meeting Administrator</b>	Beth Jones, Business Manager

### Purpose

The purpose of this report is to provide in summary an update on the key discussions and outcomes of the above meeting.

### Agenda items covered at the meeting

The agenda included the following items:

- Counter Fraud and Internal Audit reports
- Integrated Governance and Assurance
  - Review of governance objective 1 – related to the Well-led actions
  - Risk Management Executive Committee – assurance report
  - Data Quality Steering Group - assurance Report
- 2023/24 Annual Report and Accounts Preparation
- External Audit draft audit plan, VFM risk assessment and technical update
- Single Tender Waiver

Specific areas to highlight are as follows:

#### Matters Arising

Counter-fraud position stable with relevant issues escalated to people committee and included in their forward agenda.

Internal audit had completed four audits all of which had been issued with a significant assurance opinion. The Head of Internal Audit reported that the stage 2 Internal audit opinion was moderate at the nine-month stage. This is based largely on the fact that the first follow up rate is 62% with one historic risk remaining open with a revised date of 31 March 2024. Completion of the audit plan is on track. Areas flagged for consideration included potential issues with adherence to the Scheme of Delegation where evidence was not found that approval of expenditure had the appropriate authority applied. There is an audit on Accounts payable underway which will review overall compliance.

The follow up of audit recommendations/actions in line with proposed timescales is one of three areas taken in to account when assessing the overall annual audit opinion on our Accounts. It is important therefore that we improve follow up action. Presently 360 Assure monitor progress against action. The

committee agreed that the Executive should consider whether there was a light touch monitoring roll for Trust colleagues to play in progress chasing completion of actions to timescales.

### **Integrated Governance, Risk and Assurance**

The committee were invited to review progress against 2023/24 Objective 1 – clearance of actions against the Well Led review action plan. While over 60% of actions had been discharged, the committee could not determine how critical those still outstanding were without further information. A fuller update will be presented to the January Board. The Committee agreed to note the update.

Assurance reports were received from the Risk Management Executive Committee (RMEC) and Data Quality Steering Group – both of these were noted. RMEC in particular appears to be adding value to risk management.

### **Annual Report and Accounts Preparation (internal)**

Work is well in hand to prepare for the preparation and drafts of the Annual Report and Accounts. The committee noted that the timetable for scrutiny and clearance of drafts is quite tight. Colleagues will need committee’s help in relatively short turnaround time for any comments to meet the submission timetable.

KPMG shared their draft outline plan for the external audit work. Good progress is being made but it will be March before they are able to clarify any revenue risk on elective recovery fund. The remainder of the risk profile is similar to last year. Nothing substantial to report from the value for money update.

The committee were reassured that there is good engagement already between the Chief Finance Officer/ Finance Team and KPMG. KPMG gave assurances that they would share any findings as soon as possible to aid completion of the report to timetable.

### **Single Tender Waiver**

The committee noted one single tender waiver to replace obsolete power tools for podiatry surgery. Without these, patients could incur long waits.

### **New significant issues / concerns escalated including proposals on the next steps to address this**

No significant issues/concerns to report.

## **Implications**

<b>Aim of the STHFT Corporate Strategy</b>		<b>✓ Tick as appropriate</b>
1	Deliver the Best Clinical Outcomes	✓
2	Provide Patient Centred Services	✓
3	Employ Caring and Cared for Staff	✓
4	Spend Public Money Wisely	✓
5	Create a Sustainable Organisation	✓
6	Deliver Excellent Research, Education and Innovation	✓

## **Recommendations**

The Council of Governors is asked to **NOTE** the update provided and respond to any specific points raised within the report.