

ITEM: 09/047

DOC: 11

Meeting: Trust Board
Date: 18th March 2009

Title: Report from the Audit Committee

Executive Summary: The Audit Committee met on 5th March and was attended by Anna Meyrick (chair), Robert Aitken and Maria Duggan. The Committee reviewed the outstanding actions arising from the meetings held in June, September and November 2008 and the action notes from the meeting in January 2009. The attached paper sets out the outstanding items from the previous meetings and 19 new actions identified at the March 2009 meeting.

The current position is:

<u>Meeting</u>	<u>Original actions</u>	<u>o/s at Jan '09</u>	<u>o/s at March '09</u>
June '08	16	1	0
Sept '08	15	4	2
Nov'08	33	12	2
Jan '09	26	26	11
Total	90	43	15

The Board's attention is drawn to three items on the action list.

Action 8: Report on Clinical Litigation

The Audit Committee received the annual report on clinical litigation for 2008. It was noted that there were 2 fewer claims in 2008 than the previous year but an increase in the number of open claims. There was a significant increase in the number of claims relating to gynaecology. The proportions of total claims in Obs and Gynae and ED are higher than the national average. There will in future be a quarterly report on clinical litigation and any significant trends will be reported to the Board.

Action 12: HCC core standards compliance re infection control.

Although the committee chaired by the CEO recommended that compliance should not be declared, subsequent advice from the HCC indicated that a compliant declaration could be made. This is the subject of a separate paper for discussion at the Board.

Action 13: HCC core standards compliance in relation to Equality Impact Assessments.

There was discussion at the Audit Committee on the extent to which EIAs were a reality rather than a technical exercise and whether they were systematically reviewed. The AC agreed to bring the issue to the Trust Board.

Action: The Board is asked to:

- Note the progress made on actions arising from the work of the Audit Committee;
- Note the recommendation that the Trust Board should discuss further the declaration on compliance with HCC core standards

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Report from:	Susan Sorensen Corporate Secretary
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Sponsor:	Anna Merrick Chairman of the Audit Committee
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Financial Validation	Name of finance officer
Lead: Director of Finance	n.a

Compliance with statute, directions, policy, guidance	Reference:
Lead: All directors	Audit Committee handbook NHS compliance regime

Compliance with Healthcare Commission Core/Developmental Standards	Reference:
Lead: Director of Nursing & Clinical Development	n.a.

Compliance with Auditors' Local Evaluation standards (ALE)	Reference:
Lead: Director of Finance	Internal control

Evidence for self-certification under the Monitor compliance regime	Compliance framework reference:
Lead: All directors	Appendix C3

The Whittington Hospital NHS Trust Audit Committee

This paper tracks progress on actions from previous meetings of the Audit Committee (AC) and summarises the key decisions and actions arising from the latest meeting on 5th March 2009. The minutes of the meeting contain a more comprehensive account of discussion and outcomes.

Update on outstanding actions from Audit Committee 4th September

Action	Progress / Update
Clinical Governance Committee to look into using a competency-based system and report back to November Audit Committee.	AC agreed a more realistic review date to report back. Susan Sorensen to discuss with Deborah Wheeler.
The AC requested that consideration is given to how the SUIs are recorded and monitored within the Assurance Framework. Deborah Clatworthy, Fiona Elliott and Susan Sorensen to discuss and report back.	Incorporate in BAF for March Trust Board

Update on outstanding actions from Audit Committee 10th November 2008

Action	Progress / Update
Estate revaluation to be undertaken 2 April 2009 agreed by AC	In hand
Need to establish how to minimise write off of private patient and overseas visitors' bad debts	Operations directorate reviewing options. Report back to March AC. Not complete. To come to May AC

Update on outstanding actions from Audit Committee on 8th January 2009

Action	Progress / Update
Ensure training database linked to ESR kept up to date	Philip lent to produce a sample report indicating outstanding elements for May AC
Report on fire alarm system and false alarms to be included in H&S report for next couple of meetings	Reported to March AC. Need to report to May AC
Add risk of insurance shortfall to risk register	Outstanding. To be included in next review of Risk register. PI/RM

Action	Progress / Update
Develop dashboard indicators for health and safety and bring to Audit Committee before including in corporate dashboard	In hand. PI to bring to May AC
Secure attendance of a surgeon on the Blood Transfusion Committee	CIC in correspondence with blood bank manager to ascertain whether the identified surgeon can attend. Resolve by May AC
Identify issues in the executive summary of the Overview and Scrutiny Committee Report	Meeting due in 2 nd week of March. Deborah Wheeler to report back to May AC.
Draw up action plan in response to report of assessor (NHSLA acute risk management standards level 2 assessment)	Deborah Wheeler/Deborah Clatworthy to report back to May AC
EC needs to ensure that no action plans are submitted with target dates which have past. Alternative targets should be agreed with explanation for delay.	Check at May AC
Report on SLA position by 31 July 2009	In hand. Tim Jaggard
Seek approval from Trust Board for Audit Committee to include the wider management of charitable funds within its remit in addition to consideration of the investment strategy	Bring back to May AC including proposals for investment of charitable funds. RM
Take a view before next AC on whether DIPC should attend AC to discuss how the committee can support her	Deferred pending outcome of SUI re MRSA on Meyrick Ward.

Actions arising from Audit Committee on 5th March 2009

	Decision/Action	Timescale	Lead and support
	Report from the Health and Safety Committee (Doc 3)		
1.	Ensure staff are aware of the consequences of sharps incidents, e.g. posters, screen savers, Link	By May AC	Philip lent
2.	Ensure issues logs from sub-committees are actioned	May AC	Philip lent
	Unwanted fire signals – trust response measure (Doc5)		
3.	Further report in view of the number of avoidable incidents	May AC	Philip lent
	Loss of medical equipment (Doc 6)		
4.	Crime Investigation Policy to be drafted	April meeting of Security and Personal Safety	Philip lent/Steve Primrose

	Decision/Action	Timescale	Lead and support
		Committee May AC	
	Clinical Litigation Annual Report for 2008 (Doc 9)		
5.	Quarterly report in future	July AC	Deborah Wheeler/ Angela Kennedy
6.	Provide more information on claims history and premiums	July AC	Angela Kennedy
7.	Assess reputational risk arising from claims and include on risk register	Next iteration of RR	Deborah Wheeler
8.	Report from AC to TB on clinical litigation	March TB	SS
	Risk register update (Doc 10)		
9.	Reputational risks to be identified and added to RR	Next iteration of RR	Deborah Wheeler, Fiona Elliott
10.	Risk 08/92b needs more explanation (IFRS)	Next iteration of RR	Richard Martin
	HCC Hygiene Code inspection report (Doc 13)		
11.	Action plan to be followed up	May AC	Philip lent
	HCC core standards 2008-09 compliance (Doc 14)		
12.	Discuss declaration re C4a (control of infection) at Trust Board in light of HCC advice	March TB	Deborah Wheeler
13.	Discuss at TB whether Equality Impact Assessments (7e) are a reality and subject to scrutiny.	March TB	Margaret Boltwood
	Governance self-certification for FT application – action plan (Doc 17)		
14.	Complete actions March/April. EC to monitor (not FT Programme Board)	May AC	Fiona Elliott
	Internal Audit Progress Report (Doc 20)		
15.	Commission audit of private patients department	2009-10 audit plan	Richard Martin
16.	Ensure recommendations on capital schemes (p.32 of report) are implemented	May AC	Philip lent
	Draft internal audit plan (Doc 21)		
17.	Review risk rating of DTC (high?) and possible need for audit of information systems	May AC	Richard Martin/Parkhill
	IT strategic audit plan		
18.	Reassess number of audit (10 too light, 75		Richard Martin/Glenn

	Decision/Action	Timescale	Lead and support
	too heavy. GW to come to next meeting.	May AC	Winteringham
	ALE recommendations Action Plan (Doc 24)		
19.	To be monitored by Audit Committee	May AC	Richard Martin
	Future Meetings		
	7 th May, 9 th June (Annual Accounts), 2 nd July to be retained in diaries.		SS

Susan Sorensen
Corporate Secretary
12 March 2009