

Whittington Health Trust Board

3rd December 2014

Title:	Audit and Risk Committee: Update to the Board						
Agenda item:	14/176		Paper			9	
Action requested:	For information						
Executive Summary:	To update the Board on the work and recommendations conducted at the November 2014 Audit and Risk Committee.						
Summary of recommendations:	None						
Fit with WH strategy:	The Audit and Risk Committee is a sub-committee of the Board, established to provide the Board of Directors with a means of independent and objective review of financial and corporate governance and risk management. In addition, the Committee shall provide assurance of the independence of both external and internal audit.						
Reference to related / other documents:	Previous reports to the Trust Board.						
Reference to areas of risk and corporate risks on the Board Assurance Framework:	Strategic goal three: Delivering efficient and effective services (ref 3.1 to 3.12).						
Date paper completed:	20 th November 2014						
Author name and title:	Ursula Grueger, Deputy Director of Finance			Director name and title:	Rob Whiteman Non-Executive Director		
Date paper seen by EC	-	Equality Impact Assessment complete?	N/A	Quality Impact Assessment complete?	N/A	Financial Impact Assessment complete?	N/A



Audit and Risk Committee update to the Board

Meeting Date – 17th November 2014

1. The Audit and Risk Committee met on 17th November 2014, chaired by Rob Whiteman, Non-executive Director (NED).
2. The Chair asked for a preliminary note on the forthcoming Workforce Plan prior to the full report at the January committee.
3. External Audit (KPMG) presented a progress and technical update report. The committee discussed off payroll arrangements, overseas visitors' income and breaches of competition law.
4. External Audit (KPMG) presented the Whittington Charity ISA 260 Report and proposed Unqualified Assurance. There were detailed discussions on future Internal Audit reports, the Friends and Family Test, bank and agency, and risk management.
5. The committee noted the Local Counter Fraud Report and, from that discussion, asked for a report on mandatory training for the next meeting.
6. The committee reviewed the list of bad debts for write off and tender waivers and asked the Deputy Director of Finance to investigate the reasons for salary overpayments. With waivers relating to only one provider, the Executive will review plans should the provider go out of business.
7. The committee reviewed the Corporate Risk Register (CRR) and noted the Director of Nursing and Patient Experience would be reviewing the format of the CRR to enable better assurance from the Trust Board. It was agreed that all operational divisions should include Cost Improvement Plans on the CRR along with the risk of inappropriately locked/unlocked doors. The committee discussed the risk level of the Bed Plan.
8. The committee reviewed a schedule of debtor/creditor balances >£5k > 6 months.
9. The committee received an update on the data quality assurance programme from the Chief Operating Officer.
10. The Chair asked the Executive to ensure the full extent of any overspend, if there is to be one, should be noted in the NHS Trust Development Authority (TDA) returns.

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