

<b>Trust Board meeting (Part 1)</b>		<b>Date:</b>	<b>24 February 2016</b>
<b>Agenda item</b>	<b>Title</b>	<b>Executive Director lead and presenter</b>	<b>Report author</b>
BD/15/250.1	Report of Audit and Risk Committee Chair	Charlotte Moar, Non-Executive Director, Committee Chair	Charlotte Moar, Non-Executive Director, Committee Chair
<b>This report is for:</b>			
Decision			
Discussion			
To Note		X	
<b>History</b>			
<i>None.</i>			
<b>The following impacts have been identified and assessed within this report</b>			
Equality	None identified at this time.		
Quality	To be updated on verbally.		
Privacy	None identified at this time.		
<b>Executive summary of key issues</b>			
This report updates the Board of the work of the Audit and Risk Committee in February 2016. The Board is asked to <b>note</b> the report.			
<b>This report addresses these strategic priorities:</b>			
We will deliver the best care		X	
We will support and develop our staff			
We will continually improve what we do		X	
We will use our resources wisely			
We will be future focussed		X	

## 1 Business Undertaken

- The Committee received an update on key risks from North Somerset Locality. These included challenges in covering junior doctors' rotas out of hours and managing services safely during the works to Juniper Unit.
- The Risk Register was presented to the Committee. One significant risk had been reduced, relating to provision of management information in Bristol.
- The External and Internal Reports were put to the Committee, alongside several Internal Audit Reports and Associated Opinions. It was noted that Internal Audit Reports should come to the Committee on a timelier basis.
- Two key internal audit reports – Safer Staffing and Management of Quality Improvement were considered. It was noted that there were a significant number of recommendations arising from these two reports, the majority of which had been completed. Follow up will be directly into the Board through the regular updates on the Safer Staffing Plan and through preparation for the CQC visit.
- The Local Counter Fraud Service report was presented. It was noted that the Trust's policy on private practice needed to be reviewed to ensure the principles through which medical staff could undertake section 12 assessments were clear.
- The Committee reviewed its draft workplan for 2016/17

## 2 Key Risks and Their Impact on the Organisation

- None

## 3 Key Decisions

- The revised Whistleblowing Policy was approved.

## 4 Exceptions and Challenges

- None

## 5 Governance and Other Business

- The Committee agreed that its Terms of Reference should be updated, to clarify the Committee's responsibility for ensuring that there was a coherent clinical audit programme which, together with the internal audit programme, ensured that the Trust would have a coherent approach across all aspects of its operation to using audit to manage risk. It was noted that as part of this, it would need to be agreed the routes by which audit reports were directed to the most appropriate committee for consideration.

## 6 Future Business

- April meeting – agree internal audit and clinical audit plan for 2016/17 and the Committee workplan.
- April meeting – update on progress with simplifying Bristol system working.

## 7 Horizontal Reporting

- The Chair confirmed that she would discuss the proposed changes to the terms of reference with the Director of Nursing Chair of the Quality and Safety Committee to ensure that the approach to clinical audit was aligned.

## 8 Recommendations

- None.