

Trust Board meeting (Part 1)	Date:	25 January 2016
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Agenda item	Title	Executive Director lead and presenter	Report author
BD/16/228	Report of the Audit and Risk Committee Chair from meeting held on 9 December 2016	Charlotte Moar, NED	Charlotte Moar, NED

This report is for:

Decision	
Discussion	
To Note	X

History

None.

The following impacts have been identified and assessed within this report

Equality	None identified at this time.
Quality	None identified at this time.
Privacy	None identified at this time.

Executive summary of key issues

The Board is asked to **note** the report.

This report addresses these strategic priorities:

We will deliver the best care	X
We will support and develop our staff	X
We will continually improve what we do	X
We will use our resources wisely	X
We will be future focussed	X

1 Business Undertaken

- The Committee considered the following:
- CAMHS risk register
- Trust BAF and risk register
- NHSI investigation letter
- Revised Standing Financial Instructions and Standing Orders
- Information Governance
- Internal and external audit and counterfraud progress reports

2 Key Decisions

- No matters were for decision.

3 Exceptions and Challenges

- The Committee received an update on progress with risks. They noted that a number of actions relating to confirmation by the EMT of top risks and systematic training on risk management were outstanding and that these would be resolved through a workshop on 12 January.
- The Committee received an update on progress with strengthening internal financial controls and received assurance that no changes to the 2015/16 accounts were expected. The Committee discussed what lessons might be learnt from the deterioration in the 2016/17 financial position and the NHSI investigation.

4 Impact of Risks to the Achievement of Strategic Objectives

- The CAMHS risk register was considered. The top risks were working with two email systems, outstanding issues around funding and budgets, waiting times for services in South Gloucestershire, capital upgrade works to inpatient unit required to take patients of higher acuity, junior doctors cover. The CAMHS service and Nurse Director provided assurance that the

service was safe and that risks were being managed.

5 Governance and Other Business

- The Committee noted two internal audit reports – month end finance processes and payments to staff, both of which had partial assurance. The Committee noted that reports on safer staffing, clinical data quality, estates management and organisational culture were in draft. The Committee noted that internal audit were on track to complete the plan by 31 March 2017.
- The Committee received an update on information governance assurance and noted that work was underway to submit the IG toolkit by 31 March 2017.

6 Future Business

- Changes to Trust risk management arrangements following the workshop on 12 January
- Approval of internal audit and clinical audit plans which align to Trust business plan objectives and key risks by 31 March 2017

7 Horizontal Reporting

- Three internal audit reports to go to Quality and Safety Committee in January – safer staffing, clinical data quality and organisational culture.
- Finance and Performance Committee to ensure that there is effective performance management place around the Meridian contract
- Finance and Performance Committee to obtain assurance that the funding for the CAMHS service covers its costs