

Trust Board meeting		Date:	31 May 2017
Agenda item	Title	Executive Director lead and presenter	Report author
BD/17/052	Report of the Audit and Risk Committee Chair from meeting held on 21 April 2017	Charlotte Moar, NED	Charlotte Moar, NED
<b>This report is for:</b>			
Decision			
Discussion			
To Note			X
<b>History</b>			
None.			
<b>The following impacts have been identified and assessed within this report</b>			
Equality	None identified at this time.		
Quality	None identified at this time.		
Privacy	None identified at this time.		
<b>Executive summary of key issues</b>			
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			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:
- Bristol Risk Register
- Update on risk arrangements
- Information Governance Toolkit self assessment 2016/17
- Internal Audit and Clinical Audit 2017/18 plans
- Progress with the annual accounts and governance statements for 2016/17 including the External Audit 2016/17 plan, the draft Annual Governance Statement and the draft Head of Internal Audit Opinion 2016/17

## 2 Key Decisions

- The Committee approved 2017/18 Internal Audit and Clinical Audit Plans as well as the Internal Audit process flowchart. These have been mapped to the Trusts key corporate risks and will therefore provide assurance against actions to mitigate these
- The Committee approved the strategy element of the self assessment against the Well Led Framework of Strategy and Risk, noting that the score was amber-green. The Committee did not approve the risk element, requesting further work on this.

## 3 Exceptions and Challenges

- The Committee received the annual Information Governance Toolkit self assessment and noted that this does not provided us with assurance around coding but all other areas are satisfactory. This report will go to the full Board. It was agreed that the Clinical Executive would confirm if there are any clinical risks relating to the lack of assurance around coding.

## 4 Impact of Risks to the Achievement of Strategic Objectives

- The Bristol risk register was presented and provided assurance that risks were being identified and mitigating actions taken.
- The Committee received the general risk management report and was assured on the following:
  - Process for the BAF and strategic risks to be approved by the Board in May
  - Executive Team process for the regular review of corporate risks and escalation to strategy if appropriate
- The Committee did not have assurance on the following:
  - Whose responsibility it is to review corporate risks on a thematic basis each month and identify if there are lower scoring risks which appear so often in locality/departmental risk registers that they should be a corporate risk
  - What actions are still required to ensure that the Trust's overall risk management arrangements are secure ie a plan, with timescales and responsibilities. This includes a training and system improvement plan for Riskweb.

## 5 Governance and Other Business

- The Committee noted two internal audit reports – managing beds which had reasonable assurance and medicines management which had partial assurance. The Committee noted that internal audit were on track to complete the plan by 31 March 2017.

- The Committee reviewed its annual report and work programme and agreed to recommend them for approval to the Board

## **6 Future Business**

- Receiving the annual accounts and audit statements in May 2017

## **7 Horizontal Reporting**

- All horizontal reporting actions had been completed