

3As Highlight Report

Meeting Name: Audit and Risk Committee Meeting Chair & Report Author: Hetal Parmar

Date: 13 September 2024

Quorate: Yes

Policies & expiry date: N/A

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Agenda Item:	Reference:	Lead:	Description:	BAF Ref:			
ALERT:							
Alert to matters the	at need the Boar	d's attention or action,	e.g. an area of non-compliance, safety or a threat to the Trust's strategy				
There were no iten	ns to alert the Bo	ard of.					
ADVISE:							
Advise the Board o	f areas subject to	o on-going monitoring o	or development or where there is negative assurance				
Governance & Risk Report	ARC/24/066	Director of Governance and Risk	There were 286 policies in total, 5 had very recently gone out of date and 30 were due to go out of date over the next 3 months. Assurance was provided that plans were in place to review policies and to grant extensions where appropriate. There were no out of date policies on the Trust website.	N/A			
			The Board was recommended to approve the level one committees' effectiveness; FPC, QSC, PPC and CFC based on ARC's review. The full ARC annual committee review would be provided to the Board as a separate agenda item.				
Chief Executive Waivers Q1 2024/25	ARC/24/069	Director of Finance	ARC noted that a large percentage of waivers were still being raised due to insufficient timescale but systems put in place by the Procurement Team were expected to improve this position.	N/A			
ASSURE: Inform the Board wh	ere positive assura	ance has been received					
Internal Audit	ARC/24/058	Client Manager,	Good assurance was provided on Internal Audit activity since the previous meeting, 4	N/A			
Progress Report	ANC/24/036	360 Assurance	final reports had been issued, 1 with moderate assurance opinion and 3 with substantial / significant assurance. With regard to action tracking, 41 actions had fallen due since 1 <sup>st</sup> April 2024 and the implementation rate for first follow ups was 93%, no actions were high risk.	IN/A			

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			The terms of reference for 5 reviews had been issued and discussion focused on how to make them more explicit in terms of performance improvement rather than being purely focussed on the objectives and scope of the review.	
Claims Management Policy	ARC/24/063	Director of Governance & Risk	ARC approved the policy which had been reviewed and updated to include the new role of the Head of Legal Services, subject to minor amendments being made.  Discussion took place around how to report and monitor compliance against the policy, assurance was provided work was underway as part of the policy improvement framework across the organisation.	N/A
ARC Terms of Reference	ARC/24/064	Director of Governance & Risk	ARC approved its terms of reference which had been updated to align them to the requirements of the HFMA NHS Audit Committee Handbook that had been published in March 2024.	N/A
Risk Management Strategy 2024/25	ARC/24/065	Director of Governance & Risk	ARC received the strategy which set out the Trust's risk management priorities for the remainder of 2024/25 aligned to its overarching strategy 'Step Up To Great'. A longer term 3 year risk management strategy would be published in line with the launch of a new overarching Trust strategy from 1 April 2025.	N/A
EPRR Self- Assessment for 2024/25	ARC/24/067	Director of Finance (obo deputy CEO)	LPT had completed the self-assessment against the applicable NHS Core Standards for EPRR in England and rated itself 'fully compliant'. There would be a confirm and challenge meeting with NHSE and the ICB and the Trust would receive its final assessment by December 2024.  In terms of business continuity, consideration would be given to having disaster recovery in place rather than disaster backup.	BAF05
External Auditor Contract	ARC/24/068	Director of Finance	ARC received for information the proposal to extend the contract by 12 months up to 31st March 2026 as allowed under the existing contract.	N/A
HFMA Checklist	ARC/24/070	Deputy Director of Finance	ARC agreed there would be no further reporting against the checklist which contained 36 areas that the HFMA considered to be best practice to improve financial efficiency, as the majority of actions had been implemented. Outstanding actions would be picked up as part of business as usual.	BAF03

## **CELEBRATING OUTSTANDING:**

Share any practice, innovation or action that the Committee considers to be outstanding

There were no items to highlight to the Board.