Trust Board Meeting: Wednesday 8 May 2013

Title Audit Committee

<table>
<thead>
<tr>
<th>Status</th>
<th>A paper highlighting key areas of discussion at the Audit Committee meeting held on 13 March 2013, and formally presenting the minutes of the meeting of 9 January 2013</th>
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<tbody>
<tr>
<td>History</td>
<td>This is a regular report to the Board</td>
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<tr>
<th>Board Lead</th>
<th>Mrs Anne Tutt, Committee Chairman</th>
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<tbody>
<tr>
<td>Key purpose</td>
<td>Strategy</td>
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# Summary

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<tr>
<td>1</td>
<td>The Audit Committee met on 13 March 2013.</td>
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<td>2</td>
<td>This paper sets out the key decisions, actions, risks and matters for future consideration as raised by the Committee, and attaches the minutes of the meeting. Also attached are the approved minutes of the Committee’s meeting held on 9 January 2013.</td>
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| 3 | **Recommendation:**  
The Board is asked to note the contents of this paper. |
1. Introduction

The Audit Committee met on 13 March 2013. The approved minutes of the 9 January 2013 meeting are attached as Appendix A.

2. Significant issues of interest to the Board


In addition the Committee received a paper on the review of its effectiveness.

3. Key Risks Discussed

The Committee were notified of a number of risks that had recently been escalated to Corporate Risk Register, relating to the management and maintenance of beds and mattresses, and the potential impact on patient safety. Discussions were also held about the risk profile in relation to A&E performance, delayed discharges and staffing, considering the recent pressures within the system.

The first two risk deep dives, covering Quality and Performance, were held. For Quality, the risk of failing to meet the Quality Strategy goals and breaches of CQC regulations were highlighted. The impact on quality of the recent winter pressures was also discussed. For Performance, the main risk discussed was the failure to meet targets. In both deep dives, the adequacy of the controls that were in place to prevent or minimise the impact of the risk happening were also discussed.

In relation to the preparation of the annual report and accounts, the risks presented by the fact that the SHA and PCT were both to cease operations on 31 March 2013, were discussed. Other risks identified by the External Auditors were financial year end pressures, and the valuation of PFI schemes.

Finally, on procurement, the risk of not effectively factoring in the cost of consumables when making tendering decisions was, discussed.

4. Key decisions taken

The following key decisions were made:

- The risk deep dives would be pitched at principal risk level, but the process would be flexible enough to enable the appropriate level of focus in each case
- The deep dive process is to be reviewed after 6 months
- Brief summaries are to be provided of the findings of internal audit reports in which significant assurance had been found, and limited assurance reports are to be circulated to Audit Committee members by email once they have been signed off.
- The accounting policies set out by the Secretary of State for Health were adopted for preparation of the 2012/13 accounts
5. **Agreed Actions**
   - A report on the review of procurement processes is to be presented to the May meeting of the Audit Committee

6. **Matters deferred for future consideration**
   - There were no matters deferred for a future meeting.

7. **Assurance required from/actions required by other Board sub-committees**
   - A report on the impact that the winter pressures had had on quality is to be presented to the next meeting of the Quality Committee

8. **Matters to be referred to the Trust Board**
   - No matters were referred to the Trust Board.

Anne Tutt, Audit Committee Chairman
April 2013