

BOARD COMMITTEE SUMMARY SHEET**NAME OF COMMITTEE:** Audit Committee**DATE OF COMMITTEE MEETING:** 3 April 2019**KEY POINTS TO DRAW TO THE BOARD'S ATTENTION****INTERNAL AUDIT****Internal Audit Annual Report**

The Committee received the Internal Audit annual report and Head of Internal Audit Opinion, which was that the Trust's systems of governance, risk management and control were 'Generally Satisfactory with some improvements required. The Committee was pleased to note the annual report's finding that the Trust had made progress in improving and strengthening its internal control environment during the year.

One final report regarding Serious Incident reporting was received by the Committee, and highlighted significant improvements in terms of timely submission of SI reports, while maintaining quality. This review received an overall classification of Low Risk.

The Committee also noted continuing good progress in closing actions from previous reviews. The Committee reviewed the draft Internal Audit plan for 2019/20, which was set out in pre- and post-merger phases.

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COUNTER FRAUD REPORT

The Committee received the Counter Fraud progress report, summarising the key counter fraud activity undertaken since the last report, including:

- 9 fraud awareness presentations
- 27 corporate induction sessions,
- Review of the e-learning package developed by the NHS Counter Fraud Authority
- Proactive work to measure compliance against the NHSCFA's guidance on security of prescriptions

The Committee also received and noted the draft NHS Standards Fraud Self-Review Tool for the Trust, which was assigned an overall rating of Green.

ANNUAL GOVERNANCE STATEMENT

The Committee reviewed the draft Annual Governance Statement which would form part of the Trust's Annual Report. The Committee suggested some minor additions to the draft AGS, to include reference to the due diligence work undertaken in preparation for the anticipated merger with Gloucestershire Care Services NHS Trust.

OTHER ITEMS

The Audit Committee also:

- Noted that the Committee Chair had met with both Internal and External Auditors before the Committee meeting. These had been positive meetings, with no issues of concern being raised.
- The Committee noted the minutes of the previous meeting which included information on

the potential risk around Extra Care Areas and the Trust's use of Seclusion which differed from usual practice. The MHLS Committee had agreed that our practice was better than usual practice but was not in line with CQC guidance. The Audit Committee asked the Governance Committee to consider if there were any other examples of the Trust improving clinical practice and working outside of CQC guidance and if so how this should be monitored.

- Received the External Audit progress report, technical update, and benchmarking report which provided a comparison of 2gether's performance compared with other trusts, the Committee agreed that the Quality Governance Statement Indicators would be raised at Shadow Board
- Approved the Accounting Policies for the 2018/19 statutory accounts
- Reviewed the Register of Directors' Interests
- Reviewed the Gifts and Hospitality Register
- Reviewed and noted the Board Assurance Map
- Noted that a review of the effectiveness. Of the Internal Audit would take place later in the year, once the first year of the Internal Auditor's contract had been completed.
- Discussed the Trust's processes regarding extra care areas and seclusion, and asked the Governance Committee to consider any potential risk associated with the Trust's seclusion method
- Noted that the Committee's evaluation of its own effectiveness would take place in August. Evaluation forms would be issued shortly before then.

ACTIONS REQUIRED BY THE BOARD

The Board is asked to note the contents of this summary.

SUMMARY PREPARED BY: Marcia Gallagher ROLE: Committee Chair

DATE: 3 April 2019