

**Name and date of meeting:**

**TRUST BOARD  
27 November 2014**

**Document Title:**

**Audit Committee report**

**Action for the Trust Board:**

To note the chair's report of the Audit Committee meeting that took place on 12 November 2014.

**Summary:**

At the November Audit Committee meeting a number of actions were identified for the executive which are listed in the report, namely:

- Fire Safety: quantified progress in this area is needed and should be reported to the Trust Board, specifically the area of recruitment and training of fire wardens;
- Data Quality Governance: priority should be given to the area of improving cashing up in Out Patients;
- Whistleblowing: the executive should produce an action plan for enhancing the Whistleblowing culture within the Trust.

Other topics covered at the committee meeting are contained within the report.

**Author and Date:**

Mike Rappolt  
Audit Committee chair

20 November 2014

## KEY MESSAGES TO THE BOARD FROM AUDIT COMMITTEE HELD ON 12<sup>th</sup> November 2014.

The key points which the Audit Committee feels it needs to bring to the Board's attention this month based on its last meeting are listed below:

1. In our last report to the Board we highlighted our concern over Fire Safety in the Trust and the seeming lack of action to address high risk issues. A significant focus of our meeting on 12<sup>th</sup> November was to obtain a report from the Director of Estates on all outstanding actions arising from previous Fire Safety audit reports. We are pleased to report satisfactory assurances on progress on these actions with one exception. The identification and training of Fire Wardens seems to have stalled with only about 28% in place and trained or requiring training. The requirement for Fire Wardens is approximately 850 staff (i.e. a minimum of 8 staff per 24-hour patient area and a minimum of 3 staff per non-patient areas). The number of Fire Wardens trained and in-date (annual training required) is currently 236. Progress in this area is urgent and requires concerted action from the Executive as a whole. We recommend that quantified progress in this specific area is reported to the next Board meeting.
2. We were pleased to receive Reasonable Assurance from Internal Audit on Nursing and Midwifery Establishment and skill mix (right people, with right skills, in right place at right time). The audit confirmed that the Trust had done good work in response to the Francis Report on safe staffing levels.
3. We received Reasonable Assurance from an Internal Audit Report on Contracted Out Cleaning Services and were pleased to note that the Director of Estates has in hand a plan to rationalise various cleaning contracts across the Trust and University which is expected to lead to cost savings.
4. We also received Reasonable Assurances on the value for money of our Postage services.
5. Good progress was reported on implementing Data Quality improvements and the IT Systems to improve the Trust's ability to monitor Cancer Wait times.
6. However an Internal Audit on Data Quality Governance (i.e. the framework and processes in place for the management of data to ensure its accuracy and identification and mitigation of risk) could give only Limited Assurance. The Trust has accepted the report as very helpful and a number of the recommendations are currently being actioned. However one area we would specifically wish to bring to the attention of the Board are weaknesses in cashing up processes and controls in Out Patients. Internal Audit estimates that up to £169 k of revenue could have been lost because it was not invoiced in the time slot allowed. Because of data inaccuracies in iClip this figure cannot be validated but if correct this equates to an annualised loss of up to £0.5 million. We understand that improving cashing up in Out Patient clinics is part of the Performance Improvement programme for Out Patients but urge the Executive to give this area priority attention.
7. An Internal Audit of RTT Data Quality gave Reasonable Assurance for all parts of the Trust other than Community Services. The Trust accepts this and is committed to reviewing processes and training and assessing all staff working in Community Services RTT data validation.
8. We were pleased to receive oral reports from the Trust confirming satisfactory actions being taken to address Cybersecurity, Discharge Summaries and the induction of Medical Locums – all areas that we have raised concerns about at previous meetings.
9. We were concerned to receive an Internal Audit report indicating Limited Assurance on Whistleblowing within the Trust. While the Whistleblowing Policies

in place reflect best practice there was some doubt as to whether the Trust has done enough to engender a culture where staff feels confident to Whistleblow where necessary. The Trust Secretary accepted that there was more that could be done in this area and will liaise with Internal Audit to ensure a common understanding of terms and definitions and come back to the Audit Committee with an agreed action plan for enhancing the Whistleblowing culture within the Trust.

10. The Audit Committee received oral reports as to how the Audit Committee's Action Tracking System could be improved and made more efficient and a briefing on the statutory relationship with the Council of Governors.

MSJR  
13 November 2014