

Meeting:	Brighton and Sussex University Hospitals NHS Trust Board of Directors
Date:	26th January 2015
Board Sponsor:	Chairman, Audit Committee
Paper Author:	Chairman, Audit Committee
Subject:	Audit Committee report – December 2014

<p>Executive summary</p> <p>The Committee received a report from external audit on the timescale for the Charitable Funds audit; and the 2014/15 audit; together with the Audit Commission consultation on its programme and fees.</p> <p>The Committee welcomed progress made in respect of Information Governance.</p> <p>The Committee also considered a progress report from internal audit and noted its disappointment action regarding audit taken to date on the Booking Hub.</p> <p>The meeting noted an increase in the number of waivers since the previous meeting and the Committee Chair agreed to undertake a ‘deep dive’ of two of the waivers and will advise the Board of the outcome.</p>

Links to strategic objectives	Best and Safest Care ✓ High Performing ✓
Identified risks and risk management actions	As detailed in the report
Resource implications	Not applicable
Legal implications	None identified
Report history	Not applicable
Appendices	None

<p>Action required by the Board</p> <p>The Board is asked to note the Audit Committee report and identify any further information or clarification required.</p>

Report from the Audit Committee January 2015
Open Board Session

Purpose

To summarise the proceedings of the Audit Committee held on 1 December 2014.

1. External Audit

The Audit Director reported that the 2013/14 audit of the Charitable Fund accounts would be concluded by mid December with submission of the accounts in January.

The approach to the 2014/15 audit was currently being defined and the Committee was advised that submission of the accounts would be required by 5th June 2015.

The Committee was advised that an Audit Commission consultation on its programme and fees for 2015/16 was underway with a possibility of reducing fees by 25% based on the fees applicable for 2014/15.

2. Information Governance

A progress report on Information Governance was presented. The Report was well received and in summary it was felt that this was more progressive and ambitious than that presented to the Committee some 12 months ago.

Significant improvements had been made in awareness and training, to the timeliness of responses to Subject Access Requests, data destruction processes continue to be developed and the recommendations from the recent internal audit actioned. The fax to email system has also reduced fax activity by 30% within the Trust.

The Committee explored the risk of data breaches further and the Director of Health Informatics advised that the key risk concerned the misplacing of loose papers, which contained patient identifiable information, for example handover sheets. The use of faxes internally has reduced but not yet been 100% eliminated and many GPs still required faxes which the Trust was addressing through the clinical correspondence work-stream.

3. INTERNAL AUDIT

3.1 Internal Audit Progress Report

Progress is in line with expectations and the report concerning data warehouse and information flows was escalated to the Chief Financial Officer as there was confusion over response / ownership responsibilities within the Trust. The Committee discussed this report and lessons learnt with an overall concern about capacity, programme management skills and change management capability within the Trust.

The Committee expressed a combination of frustration and disappointment with Internal Audit and the audit plan / action taken to date on the Booking Hub. A review is now scheduled for quarter 4 of 2014/15.

3.2 Internal Audit Tracker

The tracker has been reviewed with the Director of Corporate Affairs with outstanding recommendations being addressed which include clinical audit, the Sussex Eye Hospital and medical secretaries. The Director of Corporate Affairs noted that traction with some recommendations had reduced as owners had changed with the new directorate structure, but that the required actions would be reinforced with the action owners and responsible Directors.

4. Risk & Assurance

4.1 Quality and Risk Committee

The Committee noted the report from the Quality and Risk Committee. Matters highlighted in the Report have been reported separately to the Board.

4.2 Finance and Workforce Committee

The Committee noted the report from the Finance and Workforce Committee. Matters highlighted in the Report have been reported separately to the Board.

4.3 Schedule of waivers

An increase in the number of waivers since the previous meeting and the value of specific waivers were noted. Concern was registered that this could be used for convenience and to bypass financial or operational controls. The Committee Chair agreed to undertake a 'deep dive' of two of the waivers and will advise the Board of the outcome.

Recommendation to the Board

The Board is recommended to note this report.

Lewis Doyle
Chair Audit Committee
25 January 2015