

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 2 December 2024
Title:	Audit and Risk Committee meeting on 18 November 2024 report to NHS Board
Responsible Director:	Derek Lindsay – Director of Finance
Report Author:	Jean Ford, Non-Executive Director/Committee Chair

1. Purpose

This is presented to the Board for: Discussion.

This paper relates to: Local policy to ensure good governance practice in reporting from board committees

This aligns to the NHS Scotland quality ambitions of Safe, Effective and Person Centred. Good governance practice supports the effective delivery of services across the organisation.

2. Report summary

2.1 Situation

This report provides information to Board Members on key items discussed within the Governance Committee's remit, in order to provide assurance to the Board that those matters have been identified and are being addressed, where required.

2.2 Background

The Board Model Standing Orders advises that Board meeting papers will include the minutes of committee meetings which the relevant committee has approved. To ensure that there is no delay in reporting from committees this paper provides a timely update on key items from committees.

2.3 Assessment

Key items agreed by Committee are noted below.

Internal Audit

- The committee received three completed Internal Audit reports:-

Cash Releasing Efficiency Savings (CRES) Process

(Rated –Red - immediate major improvement required).

This audit noted a range of significant issues with the CRES process covering both the setting and reporting of targets, communication and reporting and the delivery of underpinning action plans to generate the required savings. The audit took place in tandem with Viridian work and the plans which are now emerging from this work will go a long way to addressing the issues raised in the short term. Committee are keen to ensure that all actions are appropriately addressed and evidenced in the coming months and have requested detailed updates for next Committee. The Strategic Risk associated with this activity will also be re-evaluated.

Waiting List Management (Rated- Amber - significant improvement required).

Committee were assured that robust plans were in place to address the issues raised.

Environmental Sustainability (Rated – Yellow – minor improvement required).

- The Internal Audit Progress report was received highlighting good progress with the annual plan, however, due to additional time having to be invested in the CRES audit, a delay to completion of the planned Strategy and Operational Planning audit was requested. This was agreed and will most likely be included in the 2025/26 plan.
- The quarterly Follow Up actions report highlighted good progress with completion of actions from previous audits with a number of historic lower risk actions having been agreed for transfer to alternative committees for monitoring to conclusion.
- The first draft Internal Audit Plan for 2025/26 was shared with members for initial review and comment prior to being considered by CMT and Integrated Governance Committee before re-submission for approval.

External Audit

- Members received an update on progress of the actions identified as part of the External Audit process. Both members and auditors were assured that progress is being made and further updates will be provided on an ongoing basis.

Risk

- Members received the Strategic Risk Register
- 3 risks were proposed for escalation to the Strategic Risk Register relating to
 1. Lack of community accommodation – community midwife impact
Additional information was requested covering the exact risk and impact before any decision can be taken
 2. Children and Young People Speech and Language Therapy – accepted
 3. Medical workforce supply and capacity – accepted but consideration to be given to whether risk re medical registrant workforce should be merged with the new one.
- Risk ID 856 Adverse publicity / reputation – COVID-19 Inquiry – Retention of Mailboxes was agreed for transfer to operational risk register.

Tender Waivers

- Following a request from members, clarity was provided on the role of Committee regarding this activity. Changes have been made to the Tender Waiver report to provide enhanced detail and trend information to enable Committee to monitor compliance with Procurement Standards.

IJB Annual Audit Updates

- Chief Auditors from each of the IJBs were in attendance to provide their annual update on the internal audit reports for 2023/24 and audit plans for 2024/25. Each report concluded that an opinion of reasonable assurance can be placed on the control environment of the IJB.

2.4 Recommendation

The Board is asked to be aware of and discuss the key items highlighted and receive assurance that issues are being addressed, where required.