

NHS Greater Glasgow & Clyde	Paper No. 23/23
Paper Title	Standing Committee Chair's Board Report
Meeting:	Board Meeting
Date of Meeting:	Tuesday, 25 April 2023
Purpose of Paper:	For Assurance
Classification:	Board Official
Name of Reporting Committee	Audit and Risk Committee
Date of Reporting Committee	14 March 2023
Committee Chairperson	Ms Michelle Wailes

1. Purpose of Paper

The purpose of this paper is to: inform the NHS Board on key items of discussion at the NHSGGC Audit and Risk Committee.

2. Recommendation

The Board is asked to note the key items of discussion at the recent meeting of the Audit and Risk Committee on 14 March 2023 as set out below and seek further assurance as required.

3. Key Items of Discussion

3.1 Information Governance Steering Group Minutes

- Paper provided for assurance.
- The Committee were advised on the progress with the Information Governance Workplan, noted the updated IT Risk Management and IT Information Policies and approved the Clinical (Patient) Photography and Video Policy.
- Members were advised on the planned live date of the IG Knowledge Hub, end of March 2023.
- Members were informed of the continued monitoring of the cyber, security and supplier & system assurance, and cyber risks remained constant.
- The Committee were advised that a total of 3,340 Subject Access Requests had been received, 95% managed by Acute records.

- The Committee were assured by the high Assurance Rating on the ICO Audit on the Data Protection and Information Governance processes.
- Members noted the significant progress on both the Personal and Business Assets register.
- Committee members were assured by the minute.

3.2 Fraud Report and Counter Fraud Services Update

- Papers provided for assurance.
- Members received an update that 18 allegations received from 01.11.22 to 31.01.23.
- Members were informed that a revised Fraud Policy and a new Fraud Response Plan had been approved with due compliance to the terms of the Partnership Agreement with the Counter Fraud Services (CFS).
- The Committee were advised that the CFS Fraud Report had been received for the quarter to 20 December 2022 and noted receipt of 70 referrals, representing a decrease of 24.7% on the previous year.
- Committee members were assured by the update.

3.3 Bad Debt Write Off

- Paper provided for approval.
- The Committee were asked to approve the write off of one debt over £20,000, £112,700.60 for Clovis Oncology who had filed for bankruptcy in the US.
- Members were advised that a total of 399 debts with balances under £20,000 had been written off, totalling £175,513, and noted £99,000 related to age recovery and £47,000 to 316 cases with overseas patients.
- The Committee approved the paper.

3.4 External Audit Annual Audit Plan

- Paper provided for assurance.
- Members were informed that the audit work being carried out considered key developments within the sector, and the approach to the audit and the assessment of risks adhered to the new auditing standard.
- The Committee were advised that due to the investments being held by the Endowment Fund, group instructions would be issued to the Endowment Fund auditors, BDO LLP.
- Members were assured of the integrity of the data and transactions through the NSI e-financials system upgrade.
- The Committee noted the additional work required to address both cyber security and climate change, and an increased focus in terms of risk planning and reporting.
- Members were advised of the 21.8% increased fee due to the revised base fee in accordance with inflation and the additional work required to meet the new auditing standard.
- The Committee were assured by the plan.

3.5 Internal Audit Reports

- The Internal Audit Progress Report and Follow-up Report provided for assurance.
- The Internal Audit draft Audit Plan 2023-24 provided for approval.
- The Committee noted the draft report from the audit of the Moving Forward Together Implementation had been deferred to June 2023 meeting.
- The Committee approved the deferral of the planned audit of Significant Adverse Events Management to 2024-25, and the proposed audit of the Public Protection Arrangements in 2022-23.
- Members acknowledged conclusion of four audits, significant progress with SVP, a clear project management approach to prioritise patients on the waiting list and a programme of work to address the longer term issues.
- The Committee received an update on the actions completed in the Follow-up Report, and the hard work of the management team was acknowledged.
- Members were referred to Appendix 1, Financial Management and Reporting, in the IA Draft Audit Plan, and noted discussions were ongoing to consider NHSGGC's oversight of IJB reserves positions.
- Members were informed that Consultant Job Planning had been included in the Audit Plan for 2023-24, and the Cyber Security IA would be carried out 2024-25 following the external audit by Ernst & Young.
- The Committee were advised that Discharge Planning would be audited on an annual basis.
- Members noted that arrangements would be made to work with COs to consider whether the IJBs can include Infection Prevention and Control as part of IJB's 2023-24 IA Programmes with a specific focus on Care Homes.
- The Committee were assured by the reports.
- The Committee approved the plan for 2022-23.

3.6 Risk Management/Review of the CRR

- The paper provided for assurance.
- The Committee noted 22 risks in total for Quarter 3 2022-23, an increased score on Delayed Discharges, four scores had decreased on Financial Sustainability - Revenue, In Patient/Day Case Treatment Time Guarantee - Scheduled Care Waiting Time Targets, Outpatients - Scheduled Care Waiting Time Targets and Succession Planning.
- The Committee were advised that a system-side approach was applied to risk management.
- Members were assured that Cyber threats remained a priority matter.
- The Committee were assured by the paper.

3.7 Risk Management Steering Group Annual Report and Minute of meeting held 16.01.23

- The papers provided for assurance.
- The Committee was advised that the report covered an extended time period to realign with reporting timeframes.
- Members acknowledged that the report provided an analysis of the changes to the risk scores noted within the CRR, an update on the Risk Management Work

Plan, key achievements throughout 2022, and a summary of risk management objectives to be delivered in 2023.

- Members were informed that Committee meetings had reduced from quarterly to bi-annual, supplemented with Mr Gibson running operational groups and reporting to CMT on a monthly basis.
- The Committee were assured by the papers.

3.8 Whistleblowing Quarter 2 and 3 Report

- The reports provided for assurance.
- The Committee were advised on an overall reduction in response times to Stage 2 cases, and the pattern continued following the implementation of the Standards and the Speak Up! campaign in October 2022.
- Members noted an increase in the number of Stage 2 cases compared to the previous year, and the consideration that the upsurge in the number of cases received was related to the time period.
- The Committee were assured by the reports.

3.9 Audit and Risk Committee Annual Report

- The report provided for assurance.
- Members noted the report to be updated to reflect Committee Member changes, and amendments to the process and control elements of the External Audit.
- The Committee were assured by the report.

4 Issues for referral to other Standing Committees or escalation to the NHS Board

There were no issues for referral to other Standing Committees or escalation to the NHS Board.

5 Date of Next Meeting

The next meeting of the Audit and Risk Committee will take place on Tuesday, 06 June 2023.