

**Report from Chair of Audit Committee**

Date of Committee 07 March 2024

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Minutes of the previous meeting</b>	Minutes from the Audit Committee meeting on 11 January 2024	Approved	None	n/a	n/a
<b>Workplan 2024/25</b>	Draft plan of work for the Board and Board Committees in 2024/25	Noted	Workplan to be updated to reflect the comments of the Committee	Review of the workplan of the Quality & Clinical Governance Committee in view of the implementation of PSIRF (due April 2024)	n/a
<b>Year End Update</b>	Summary of critical judgements in applying NHS accounting policies and the assessment of the Trust as a going concern	Assured – recognising an asset verification audit was underway	None	n/a	n/a
<b>2022/23 Accounts &amp; Annual Report</b>	Presentation of the following documents related to financial year 2022/23: <ul style="list-style-type: none"> <li>- Auditor's Annual Report</li> <li>- Audit Results Report</li> <li>- Letter of Representation</li> <li>- BHT Annual Accounts</li> <li>- BHT Annual Report</li> </ul>	Assurance – recognising the significant work undertaken to complete the audit and associated challenges including GRNI** and asset verification  The annual report and accounts for the Trust for 2022/23 were approved by the Committee	Transfer learning from the process to the 2023/24 audit, due to start imminently	n/a	To note completion of the annual audit process for 2022/23

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Organisational Risk</b>	Overview of risk within the Trust including details from the Corporate Risk Register (CRR) and Board Assurance Framework (BAF)	Partially assured – exploring the role of the committee in reviewing the CRR; committee oversight of risk and those plans and levels of assurance in place  Process tested on Risk 320 (endoscopy) and Risk 190 (ward 2a)	Inclusion of oversight committee within reporting  Ensure full and timely updates to Datix for all CRR risks  Ensure consequences to key operational risks outlined within business cases  Test further risks in July 2024 meeting (scoring 20)	n/a	To note the content of the report and take assurance from committee focus and discussions
<b>External Audit</b>	Verbal update on plans for the 2023/24 audit	Noted – recognising an interim audit was underway	None	n/a	n/a
<b>Internal Audit; Progress Report</b>	Update on progress with annual plan including presentation of one final report 'Key Financial Controls' split into:  - Accounts Payable (RA)* - Asset Management (PA)*	Noted – recognising issues with the tracking and management of assets organisation wide	None	n/a	n/a
<b>Internal Audit; Draft Head of Internal Audit Opinion (HOIA)</b>	Draft opinion on the overall adequacy and effectiveness of the Trust's risk management, control and governance processes for 2023/24	Assured – recognising the positive opinion and areas for improvement	None	n/a	n/a

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Internal Audit; Recommendations Follow Up Report</b>	Update on actions and recommendations followed up since the last meeting	Assured – recognising overall improvements in the process	Ensure clear rationale included for any dates deferred	Need to ensure tighter control over management over IT assets	n/a
<b>Internal Audit; Plan 2024/25</b>	Draft plan for internal audit work during 2024/25 and associated Internal Audit Charter	Approved – recognising the plan would be subject to change should new areas of risk emerge in year	None	n/a	n/a
<b>Local Counter Fraud Specialist (LCFS) Update</b>	Overview of the LCFS activity at the Trust since the last meeting including areas of emerging risk, mitigations in place, ongoing investigations and compliance with NHS Counter Fraud Authority (NHSCFA) requirements	Assured – recognising the positives in the report alongside the need to focus on progressing ongoing investigations	None	n/a	n/a
<b>LCFS Annual Plan</b>	Draft plan for work by the LCFS during the financial year 2024/25	Approved – recognising the need to focus on potential for cyber fraud	None	n/a	n/a
<b>Single Tender Waivers (STW)</b>	Overview of STW since the last meeting including internal comparative data and those waivers considered to be avoidable and retrospective	Assured – recognising broad improvements in processes and resultant number of waivers	None	n/a	n/a

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Losses and Special Payments</b>	Summary of YTD losses including pharmacy and patient property	Noted – including need for continued efforts in the safekeeping of patient property	None	n/a	n/a
<b>Committee Effectiveness</b>	Annual self-assessment survey for completion by Committee members and regular attendees	Noted	Results of survey to be presented to Committee alongside draft revised Terms of Reference (ToR) at next meeting	n/a	n/a
<b>Minutes of Finance &amp; Business Performance Committee</b>	Minutes from F&BP Committee Meeting on 24 January 2024 (approved)	Noted	None	n/a	n/a
<b>Minutes of Quality &amp; Clinical Governance Committee</b>	Minutes from Q&CG Committee Meeting on 17 January 2024 (approved)	Noted	None	n/a	n/a
<b>Minutes of Strategic People Committee</b>	Draft minutes from SPC Committee Meeting on 8 January 2024	Noted	None	n/a	n/a

\*SA – Substantial Assurance; \*RA – Reasonable Assurance; PA – Partial Assurance; MA – Minimal Assurance

\*\*Goods Received Not Invoiced

#### Emerging Risks Identified:

- Impact of GNRI (Goods Received Not Invoiced).

**Report from Chair of Quality and Clinical Governance Committee (Q&CG)**

Date of Committee 29 February 2024

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Meeting Minutes</b>	Minutes from the Q&CG meeting on 17 January 2024	Minutes approved	None	Refer to Audit Committee for noting	n/a
<b>Integrated Performance Report (IPR)</b>	Monthly reporting on Trust quality metrics and actions/progress with actions to address negative variance	Assured – noting the increase in incident reporting alongside the need for a clear threshold for concern, recognising the support PSIRF would provide in the theming of incidents  The Committee discussed the death of a patient in the Emergency Department waiting room at Queen’s Medical Centre, Nottingham and what was in place locally to mitigate against a similar incident	IPR under review ahead of the next financial year; 2024/25	None	Considered by Trust Board 28 February 2024
<b>Patient Safety Incident Response Framework (PSIRF)</b>	Update on progress made in the implementation of PSIRF to date including recruitment to additional roles to support implementation	Assured – recognising the significant change in culture and ways of working required at all levels of the organisation	Review of Committee Terms of Reference (ToR) to incorporate changes required to support PSIRF	n/a	To note seminar scheduled to support increased knowledge and changes in practice required for implementation
<b>Patient Safety Incident Response Framework Plan (PSIRP) &amp; Policy</b>	Overview of PSIRP, setting out the Trust’s planned response to patient safety incidents over the coming 12-18 months and the accompanying Trust Policy	Noted	Committee to retain oversight of implementation of the plan	n/a	n/a

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Serious Incident (SI) Theming Report</b>	Detailed analysis of 13 SIs related to diagnostics including resultant learning  Verbal update on diagnostic scanning capacity and the 'on hold' follow up programme	Assured – recognising further updates due to the Committee regarding the 'on hold' programme	None	n/a	n/a
<b>Maternity Quality &amp; Safety Reports</b>	An overview of current maternity quality issues focussing on perinatal mortality and morbidity, themes from incidents, complaints and litigation, performance related to external assurance and culture and patient feedback metrics  Details provided of perinatal mortality reviews including resultant learning	Assured – recognising the development of new regional guidance and subsequent anecdotal improvements in fetal monitoring	None	n/a	Considered by Trust Board 28 February 2024
<b>Maternity Staffing Report</b>	Six monthly report providing an update on maternity staffing including mitigations in place	Assured – noting a reduction in the midwifery vacancy rate, stable retention and ongoing recruitment efforts with a trajectory in place for the year	None	n/a	n/a
<b>Safe Staffing Report</b>	Overview of the nursing and midwifery workforce during December 2023 aligned to the National Quality Board (NQB) Standards and Expectations for Safe Staffing	Noted	None	Strategic People Committee (SPC) to retain oversight of staffing challenges in specific groups/areas	Considered by Trust Board 28 February 2024

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Infection Prevention &amp; Control (IPC) Report</b>	Overview of IPC metrics for Q3 (Oct-Dec) 2023/24	Assured – recognising planned actions to support implementation of the national cleaning standards	None	n/a	n/a
<b>Emergency Department (ED) e-Obs</b>	Overview of compliance with NEWs within ED including the use of e-Obs and ongoing actions	Partially assured – recognising the need for further support from digital teams in the use of the e-Obs system	Report back to the Committee regarding local sepsis management recognising national trends indicating worsening management	Refer to the Digital Health Board and note by the Finance & Business Performance Committee (FBPC) – <i>Ensure there is appropriate follow-on support after implementation of a new system including 'snagging', noting the importance for the wider EPR project</i>	n/a
<b>Patient Experience Report</b>	Overview of patient experience metrics for Q3 (Oct-Dec) 2023/24 including	Assured – noting the awarding of an MBE to one of the Trust Chaplains, the benefits of the Reflect & Review forum and the triangulation of complaint, litigation and incident data within maternity services on a quarterly basis  The Committee discussed the sustainability of the 'Improving Sleep at Night' programme as well as the ability to regularly monitor programmes related to food and patient care	None	n/a	n/a

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Clinical Effectiveness Report</b>	Overview of activities reported to the Clinical Effectiveness Group including Clinical Audit and Clinical Guidelines for Q3 (Oct-Dec) 2023/24	Assured – recognising the additional work requested related to sepsis (see above)	As per ED e-Obs item	None	n/a
<b>Research &amp; Innovation Report</b>	Overview of activities within the Trust related to research and innovation during Q3 (Oct-Dec) 2023/24 including key successes, challenges, finances and the team's vision for 2024	Assured – noting the excellent work of the team	n/a	None	n/a
<b>Equality &amp; Quality Impact Assessment (EQIA) Assurance Report</b>	Summary of EQIA projects considered between August 2023-January 2024	Noted	n/a	None	n/a
<b>Homebirth Report</b>	Summary of the practice of home birthing outside of recommended guidance and an overview of options for the development of local guidance	The Committee supported the decision made by the Executive Management Committee (EMC) to develop local guidance with clear criteria where a home birth would not be supported	n/a	None	n/a
<b>Safeguarding Review</b>	A review of current policies and practices applied at the Trust and an update on the implementation of actions following the detailed Governance Review of Safeguarding in 2018	Noted	n/a	None	Considered by Trust Board 28 February 2024



Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Mortality Reduction Group Minutes</b>	Minutes of the meeting held on 23 January 2024	Noted	None	n/a	n/a
<b>Patient Safety Board Minutes</b>	Minutes of the meeting held on 24 January 2024	Noted – recognising the change in the Care Group structure would be reflected in meetings going forwards	None	n/a	n/a
<b>Patient Experience Board</b>	Minutes of the meeting held on 18 January 2024	Noted	None	n/a	n/a

**Emerging Risks noted:**

- Implementation of EPR; the need to ensure appropriate support in place post implementation for clinical colleagues to ensure both the optimum use of new systems and clinical buy in.
- Need for significant cultural and operational change to ensure effective implementation of PSIRF.

**Report from Chair of Strategic People Committee (SPC)**

Date of Committee 11 March 2024

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Meeting Minutes</b>	Minutes from the Strategic Workforce Committee meeting on 8 January 2024	Approved	None	Refer to Audit Committee for noting	n/a
<b>Chief People Officer Report</b>	Update on key people developments since the previous Committee meeting (January 2024)	Assured – noting updates on industrial action and the recent signing of the Sexual Safety Charter	None	n/a	n/a
<b>NHSE Equality, Diversity &amp; Inclusion (ED&amp;I) Improvement Plan</b>	Summary of Trust compliance with the 6 high level actions within this national plan	<p>Assured – recognising ongoing work with the Senior Leadership Team (SLT) to support and develop the collective leadership style and impact on organisational culture</p> <p>Committee discussed the staff survey results related to bullying and harassment, the importance of recognising colleagues' feelings and the role of appropriate and effective performance management</p> <p>The importance of building the 'Speaking Up' agenda into all internal processes focussing on internationally educated colleagues and use of the staff networks</p>	<p>Consider alongside WRES and WDES reports</p> <p>Ensure all senior managers sighted on and understand the importance of the ED&amp;I agenda</p>	<p>Action 6 (related to bullying &amp; harassment) to be a focus through the Trust 2024/25 Breakthrough Objectives</p> <p>EMC to consider plan for each employee to set an annual appraisal directly linked to the annual Breakthrough Objectives</p>	To take assurance from Trust progress against the plan and work ongoing in this area

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Freedom to Speak Up Guardian (FTSUG) Mid-Year Report</b>	Annual report covering Q1-Q2 2023-2024 April-September 2023) including national and local updates, key themes and next steps	Assured – recognising the paper had been disseminated to the SLT following discussion at Trust Board and the plans to incorporate ‘Speaking Up’ into the annual appraisal process	<p>Based on staff survey results, need to focus on the experience of younger colleagues as well as those groups already identified</p> <p>Triangulation of data with staff survey results for Admin &amp; Clerical (A&amp;C) staff groups recognising the lack of patient contact in this group and potential impact on job satisfaction</p> <p>Further information to be provided on proportion of concerns escalated through the Speaking Up Champions</p> <p>Following release of full staff survey results, learn from the successes of other organisations recognising colleagues’ concerns related to confidentiality and futility when speaking up</p>	Previous report (impact on quality metrics) to be considered by the Quality & Clinical Governance Committee (QCGC)	Considered by Trust Board January 2024
<b>Staff Survey</b>	Full national results of the 2023 Staff Survey and a breakdown of scores locally including a summary of key highlights and areas for improvement and future focus	Assured – recognising the need to focus on the equity in experience of groups of colleagues. Recognition given for improved response rate	<p>Identify key areas for focus with greatest impact for clarity across the organisation</p> <p>Learning from actions taken by other organisations</p>	n/a	To take assurance from the results and work planned within the areas identified for improvement

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Risk Register</b>	Review of 'People' risks within divisional and corporate risk registers and update on Internal Audit work ongoing	Assured – noting the nursing workforce risk from the Corporate Risk Register which would take place through the usual process and the importance of ensuring areas with a high vacancy rate are escalated as appropriate to maintain oversight of such areas	n/a	n/a	To take assurance from Committee discussions when considering the Organisational Risk Report
<b>Guardian of Safe Working Hours (GSWH) Report</b>	Report providing information for Q3 2023-24 (October-December 2023) including exception reports, issues raised and next steps	Assured – recognising strong levels of reporting and efforts to triangulate information from all sources, including close working with the FTSUG and Head of Medical Education	Action plan related to areas of concern to be presented at the next Committee meeting  Further detail on concerns raised to provide greater assurance to the Committee including an increased number of data points for an assessment of variation  Focus on areas of low reporting to confirm appropriate reporting culture in place	n/a	n/a
<b>Transformation Objectives</b>	Update on Trust Breakthrough Objectives related to People	Assured – recognising the impact of the learning from previous years in setting the 2024/25 objectives and workforce plan	Continue to ensure an appropriate workforce plan in place across the organisation with an understanding of the financial implications of such	n/a	n/a

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Committee Effectiveness</b>	Annual self-assessment survey for completion by Committee members and regular attendees	Noted	Results of survey to be presented to Committee alongside draft revised Terms of Reference (ToR) at next meeting	n/a	n/a

**Emerging Risks Identified:**

- Related to the ED&I report and the 2023 Staff Survey results, the need to focus on intersectionality of colleagues.
- Actions related to the Temporary Staffing Programme; recognising oversight of the outputs and financial implications of this by the Finance & Business Performance Committee.

**Report from Chair of Charitable Funds Committee**

Date of Committee 23 February 2024

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>Minutes of the previous meeting(s)</b>	Minutes from the meeting on 29 January 2024	Approved	None	n/a	n/a
<b>Portfolio Investment Report</b>	Portfolio Investment Report from Cazenove detailing a summary of investments up to 31 December 2023 and a focussed presentation on the Sustainable Multi-Asset Fund	Assured	Comparative exercise of Sustainable Multi-Asset Funds to be undertaken in due course	n/a	n/a
<b>Scannappeal Funded Bids</b>	Progress update on the following appeals: - Lung cancer - Spinal surgery - Cardiac - MRI (Wycombe)	Noted – recognising the amount of support provided by Scannappeal	None	n/a	n/a
<b>Bid for Approval</b>	Bid for support for a Defence Medical Services Welfare Officer	Noted – does not meet the threshold for Charity consideration (£50k)	To be considered through appropriate governance	n/a	n/a

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<p><b>Charitable Funds Activities &amp; Financial Statements</b></p>	<p>Overview report highlighting the financial, operational and governance information related to Charity activities including financial statements as at 31 December 2023 and a summary of open bids and legacies</p>	<p>Assured – noting potential cash position at year end and recruitment of additional resource to support Charity administration and engagement with Trust colleagues</p>	<p>Pipeline of potential bids for 2024/25</p> <p>Development of KPIs related to fundraising activities</p> <p>Make use of material from previous ‘Legacy Campaign’ to raise the profile of this</p> <p>Focussed reporting on categories of fundraising activities noting a strategy paper was due at the next meeting</p>	<p>Continue to elevate the profile of the Charity alongside collective efforts to line up large projects strategically</p>	<p>n/a</p>
<p><b>2024/25 Budget</b></p>	<p>Presentation of expected expenditure for the year</p>	<p>Noted – recognising the helpful first iteration of the information</p>	<p>Income and expenditure budget to be presented at the next Committee meeting recognising income assumptions would be required to be made and there was a need to set aspirational fundraising targets</p>	<p>n/a</p>	<p>n/a</p>

Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>External Audit Update</b>	Committee updated that the Annual Audit and Accounts were submitted in line with the Charity Commission of 31 January 2024	Assured	Formatting changes to the presentation of information for 2023/24 accounts	n/a	To note
<b>BHT Charitable Fund - potential merger</b>	Update on potential for change in the corporate structure of BHTCT to create an independent charity	Noted	Finalise paper for presentation to the Corporate Trustee to approve the proposed direction of travel in connection with possible merger	n/a	To note
<b>Risk Management</b>	Update to the risk register and related actions	Noted	Committee members requested to complete a short questionnaire related to risk appetite for analysis ahead of the next report	n/a	n/a
<b>Charity Governance Code</b>	Review of compliance against the Code	Noted – recognising this was a work in progress	Review of further work undertaken in 6 months before moving to annual monitoring	n/a	n/a



Item	Summary of Item	Committee Assured	Further Work Required	Referral Elsewhere for Further Work	Recommendation to Board
<b>BHT Pol 300</b>	Revised 'Charitable Funds Fundraising Policy' to ensure: - Greater accessibility and readability - Confirmation of threshold for Committee approval of appeals (£100k) and bids (£50k)	Approved	None	n/a	Recommended for approval
<b>Any Other Business</b>	<u>Training</u> Individual request for conference attendance	Not approved - noting the threshold set for training set per individual per annum	Review principle for attendance at conferences/training events more broadly considering the impact on patient care	n/a	n/a

**Emerging Risks:**

- None identified.