



Audit Committee

Venue: Kirkstall and Fountains, YAS, Wakefield, WF2 0XQ
Date: Thursday 6 October 2016
Time: 0900 hours

Chairman:

Barrie Senior (BS) Non-Executive Director

Membership

Barrie Senior (BS) Non-Executive Director
Pat Drake (PD) Non-Executive Director & Deputy Chairman
John Nutton (JN) Non-Executive Director
Erfana Mahmood (EM) Non-Executive Director

In Attendance:

Robert D Toole (RDT) Interim Executive Director of Finance
Steve Page (SP) Executive Director of Quality, Governance and Performance
Hassan Rohimun (HRo) Executive Director, Ernst & Young (External Audit)
Benita Boyes (BB) Internal Audit
Shaun Fleming (SF) Counter Fraud
Anne Allen (AA) Trust Secretary (Observing)
Perry Duke (PDU) Head of Financial Services

Apologies:

Ronnie Coutts (RC) Non-Executive Director (Designate) (Observing)
Claire Mellons (CM) Senior Manager, Ernst & Young (External Audit)
Roberta Barker (RBa) Interim Director of Workforce and Organisational Development
Alex Crickmar (AC) Deputy Director of Finance
Dr Dave Macklin (DM) Executive Director of Operations

Minutes produced by:

Joanne Lancaster (JL) Committee Services Manager

		Action
	The meeting commenced at 0900 hours.	
1.0	Introduction and Apologies BS welcomed everyone to the meeting and thanked them for their prompt attendance. Apologies were noted as above.	
2.0	Declaration of Interests for any item on the agenda No declarations of interest were made relating to agenda items.	

	Action
<p><u>Action 2016/012 – Losses and Compensation benchmarks –</u> The Trust provided information of themes of claims to the Quality Committee. Work was underway to consider and understand better the employee claims the Trust received. SP advised there might be scope to liaise and learn in conjunction with the Northern Ambulance Alliance in this regard and he and PDU would discuss outside of the meeting. Action closed.</p> <p><u>Action 2016/019 - Internal Audit Limited Assurance Reports within the HR remit</u> - This action to be transferred to the new HR action 2016/037. Action closed.</p> <p><u>Action 2016/020 - To formalise the review of YAS' External Auditors it was agreed that a formal assessment be built into the Audit Committee workplan</u> – This item was on the Auditor Panel meeting following Audit Committee. Action closed.</p> <p><u>Action 2016/021 - Annual assessment report on clinical governance and audit to be placed on the Audit Committee workplan</u> – It was noted that the Clinical Audit reporting that is presented to the Quality Committee had been expanded to provide further assurance. It was agreed that the report be brought to the next Audit Committee in January 2017. Action remains open.</p> <p>Discussion took place in relation to the level of assurance provided by QC and F&IC to the Audit Committee. It was agreed that reports provided by the Chair's of QC and F&IC should specify the level of assurance that had been gained.</p> <p>Action: That reports provided by the Chair's of QC and F&IC should specify the level of assurance that had been gained.</p> <p><u>Action 2016/022 - a full assessment of third party providers and the assurance provided to the Trust</u> – SP advised that assurance was built into the Private Provider framework for PTS. Private Provision within A&E Operations was within an agreed governance framework. The LCD contract within NHS 111 and Urgent Care was managed through the Contract Monitoring meetings.</p> <p>BS referred to a query that Mary Wareing, former Non-Executive Director of YAS, had in relation to the LCD sub-contract.</p> <p>SP responded that it was in relation to a service failure and the Trust was in active discussion with LCD in this regard.</p> <p>PD asked how many primary contracts the Trust had which were sub-contracted and whether the contracts were fit for purpose.</p> <p>It was agreed that SP speak with RDT and Mike Fairbotham in this regard and report back at the next Audit Committee meeting. Action</p>	<p>SP/RDT/P D/JN 2016/040</p>

	Action
<p>remains open.</p> <p><u>Action 2016/024 - An assurance report to be presented on 'raising concerns at work'</u> – This item was on the agenda. Action closed.</p> <p><u>Action 2016/025 – To amend the Audit Committee Annual Plan to reflect the comments received at the Audit Committee 7 July 2016</u> – BS confirmed that the relevant amendments had been incorporated into the Audit Committee annual Plan. Action closed.</p> <p><u>Action 2016/027 - Confirmation to be presented on what would be reported on at the October Audit Committee in respect of SFIs and SOs</u> – This item was on the agenda. Action closed.</p> <p><u>Action 2016/028 - Both the revision of, and provision of assurance in respect of compliance with, SFIs and SOs to be placed October 2016 Audit Committee agenda</u> - This item was on the agenda. Action closed.</p> <p><u>Action 2016/029 - To cleanse the In-Progress Internal Audit Recommendations Register</u> - This item was on the agenda. Action closed.</p> <p><u>Action 2016/030 – To consider an automated annual declaration system for secondary employment</u> - This action to be transferred to the new HR action 2016/037. Action closed.</p> <p><u>Action 2016/031 - To look into the issue surrounding no receipts and discrepancies with mileage</u> – PDU explained this was in respect of the timeliness and expense receipts for claims by Executive Directors and Non- Executive Directors. This was a minor issue and would be resolved in the long term by an electronic recording system. Action closed.</p> <p><u>Action 2016/032 - To provide statistics on the checking of overtime claims</u> – A report was attached to the agenda. Action closed.</p> <p><u>Action 2016/033 - For the Executive Director of Operations to attend the next Audit Committee to provide assurance on End of Shift Overtime</u> – RDT advised that DM had provided a full explanation and appropriate assurance that this was being managed effectively at both the Finance and Investment Committee and the Trust Board. Action closed.</p> <p><u>Action 2016/035 - To identify and split out Ombudsman Complaints resulting in financial redress</u> - The NHSLA data did not distinguish between Ombudsman and other liabilities, but this information had been identified in the report. Action closed.</p> <p><u>Action 2016/036 - Internal Audit Management Update</u> - To be discussed at the Auditor Panel meeting. Action closed.</p>	

		Action
4.0	<p>For Assurance: Risk Assurance Reporting including Board Assurance Framework and Corporate Risk Register (including Datix Progress Update)</p> <p>The Committee noted an overview of the risks recorded on the BAF and Corporate Risk Register (CRR) and assurance of the effective management of corporate risks and provided with an update on Internal Risk Profiling and Assurance Mapping.</p> <p>The Committee received the same report which had been to the Trust Board meeting on 27 September with the addition of the Risk Rating Matrix to remind colleagues how risks were scored.</p> <p>The Committee noted that the Board set the level of risk; the risk rating was scored prior to any mitigating actions being completed that would reduce the level of risk.</p> <p>It was agreed that future reports would include information on where a risk had been managed down and the revised risk rating.</p> <p>Action: Future reports would include information on where a risk had been managed down and the revised risk rating.</p> <p>The Committee noted that the Draft Assurance Map had been included as an appendix with the report. It was intended that this would be reviewed and owned by TEG/TMG and reported into the Quality Committee and Finance and Investment Committee.</p> <p>Approval: Audit Committee noted the key risks and developments as outlined in the report and continued to be assured with regard to the effective management of risks and noted the continued improvement of risk management within the Trust.</p>	SP 2016/041
5.0	<p>For Assurance: Quality Committee Risk Assurance Report</p> <p>PD provided assurance to the Audit Committee on the management of risks within the remit of the Quality Committee.</p> <p>PD informed the Committee that two members of the CQC inspection team had observed the Quality Committee (QC) meeting on 15 September.</p> <p>She provided a brief overview of some of the items that the QC had considered. They had received the regular Quality and Safety report which had not highlighted any issues across the organisation in this regard.</p> <p>She advised that a report had been presented on A&E Operations and the significant increase in demand had been noted. The</p>	

	Action
<p>Committee had some concerns in relation to A&E Operations:</p> <ul style="list-style-type: none"> • the achievability of 50% of new rotas implemented by the agreed deadline; • Reconfigurations of acute services, for example Acute Stroke Centres, across the region. <p>She reported that AQIs showed a positive picture.</p> <p>The Sign Up to Safety programme was an excellent piece of work and the QC welcomed the initiative and looked forward to receiving further updates at future meetings.</p> <p>The QC noted the challenges in achieving the CIPS for end of shift overtime, meal breaks and PTS transformation.</p> <p>She reported that there had been a rise in verbal aggression towards staff and the QC had asked for a report back on what support was available for staff.</p> <p>PD advised that in terms of workforce issues there had been a discussion in relation to holiday pay, the national position on Paramedic Band 6 and the apprenticeship levy.</p> <p>The QC had noted the BAF and the winter plans that were in place across the organisation.</p> <p>Approval: The Audit Committee noted the update on Quality Committee discussions in relation to key risks and gained adequate assurance from the update report that appropriate risks were being suitably managed.</p>	
<p>6.0</p> <p>For Assurance: Charitable Funds Committee Risk Assurance Report</p> <p>EM informed the Committee that the Charitable Funds Committee had undertaken a risk workshop in July using the Charity Commission Risk Profile.</p> <p>She advised that the charity's Strategy had been agreed in March 2016 and work was taking place to ensure that there was the right level of delegated authority for the charity.</p> <p>PDu added that there was some significant actions to take forward for the charity.</p> <p>Approval: The Audit Committee noted the update on the Charitable Funds Committee.</p>	
<p>7.0</p> <p>For Assurance: Finance & Investment Committee Risk Assurance Report</p>	

	Action
<p>JN provided assurance to the Audit Committee on the management of risks within the remit of the Finance and Investment Committee (F&IC).</p> <p>JN informed the Committee that the F&IC had been disappointed with the quality of the PTS report. He advised that there had been some quality improvements within PTS but that the F&IC felt the transformation programme, including the budgetary efficiencies forecast, would be a challenge to achieve.</p> <p>JN advised that the F&IC had discussed the re-tender of PTS services for South Yorkshire CCG and Hull CCG and gained assurance that the process for these had been managed appropriately.</p> <p>It had been agreed that RC would meet with Chris Dexter, Managing Director, PTS to consider the issues the service faced.</p> <p>The F&IC had noted that A&E Operations transformation programme was progressing however the increase in demand was putting pressure on the service and having impact on some of the service's CIPs.</p> <p>It was noted that the budgetary process was moving to a two yearly cycle and the Trust's plans would need to be submitted to NHSI by 4 December; noting that there was a possibility that contracts would not be negotiated by this date and this did present a risk.</p> <p>The Committee noted that the bringing forward of next year's plans by three months meant that plans would even more probably need to be submitted prior to the outcome of a number of contract negotiations and this did present a number of risks for the Trust.</p> <p>The F&IC had received a report of the PLICs system and had been impressed by the information that could be generated from this.</p> <p>JN informed the Committee that the F&IC had discussed Capital Spend and the need to ensure the process was effectively managed.</p> <p>JN advised that there had been some good work undertaken within procurement.</p> <p>BS stated that the Audit Committee was not sufficiently assured in respect of the management and future direction of PTS. Further information and assurance was required from F&IC.</p> <p>Action For F&IC to continue to monitor PTS and provide information and assurance to the Audit Committee.</p>	<p>JN/(CD) 2016/042</p>

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	<p>Approval: The Audit Committee noted the update on Finance & Investment Committee discussions in relation to key risks and gained appropriate assurance that risks were being suitably managed. The Audit Committee noted the lack of adequate assurance in respect of PTS.</p>	
<p>8.0</p>	<p>For Assurance: External Audit Update</p> <ul style="list-style-type: none"> • Annual Audit Letter • Fee Letter • Sector Update <p>The Committee noted that the Annual Audit Letter had been issued in July 2016 and that the 2016/17 Fee letter was included within the report.</p> <p>The Health Sector Audit Committee briefing provided details relevant to the NHS Trust provider sector but not all parts were relevant to the ambulance sector. BS asked whether, referring to page 8 of the briefing, the impact of leaving the European Union (EU) was being considered within the Trust.</p> <p>Discussion took place in relation to what impact leaving the EU might have on the Trust including contractual agreements, medicines management, fleet and workforce issues. TEG had discussed this subject and it did require further consideration going forward. NHSE was advertising for a Head of European Transaction and it was likely that there would be some coordination and information flow from this role to the Trust.</p> <p>Action: For TEG to further reflect on the impact and risks to the Trust of the UK leaving the EU.</p> <p>BS asked whether the Trust had considered the question in relation to ‘the increase in personal data collection which we will be responsible for as a result of changes to off-payroll working’.</p> <p>Action: To consider the question in relation to ‘the increase in personal data collection which we will be responsible for as a result of changes to off-payroll working’.</p> <p>BS referred to the questions ‘Does our Trust adopt any of the best practices set out by the NAO in discharging older patients? And if not how can we help encourage this?’ and asked whether the Trust would have the right to refuse to convey a patient.</p> <p>SP responded that the hospital discharging the patient would be responsible for providing assurance that it was safe and appropriate for a patient to be discharged.</p>	<p>SP 2016/43</p> <p>RBa 2016/44</p>

		Action
	<p>BS thanked HRo for the update.</p> <p>Approval: The Audit Committee received and accepted the latest External Audit Progress Report.</p>	
<p>9.0</p>	<p>For Assurance: Update: Review of Standing Financial Instructions</p> <p>RDT introduced the item which proposed revised Standing Financial Instructions following work to review and refresh these which related to the financial processes, controls and delegation within the organisation. Standing Orders (SOs) were the 'rules' that supported the roles of the Board, Committees and individual officers. The SFIs and SOs would be aligned.</p> <p>AA added that she was in the process of updating the SOs to reflect the decisions made by the Board at the September Board meeting. It was intended that the revised SFIs and SOs would be signed off by the Board at their 8 November meeting in readiness to be formally adopted at the January Trust Board in Public.</p> <p>Discussion took place in relation to the timescales to enable the Trust's Committees to have the opportunity to comment on the SFIs and SOs prior to the discussion at the Private Board meeting on 8 November. It was agreed that the SFIs and SOs be circulated to Board members prior to the 8 November for comment.</p> <p>Action: To circulate the SFIs and SOs to Board members prior to 8 November for comment.</p> <p>BS remarked that the SFIs were an improvement on those used previously. He stated his belief that the Audit Committee required the following before full approval could be granted:</p> <p>Action:</p> <ul style="list-style-type: none"> • For the Chief Executive as the Accountable Officer to confirm he was satisfied with the revisions and why; • For the Director of Finance to confirm he was satisfied with the revisions and why; • Where individual officer roles had been specified within the SFIs, for the post holder to be satisfied; • An assessment of any changes to procedures/controls due to the SFIs being revised. <p>Discussion took place on the proposed delegation level for the Chief Executive, particularly in relation to multi-year contracts, this required further clarification.</p>	<p>RDT/AA 2016/045</p> <p>RDT 2016/46</p>

	Action
<p>Action: To consider clarification in connection with Chief Executive delegated authority.</p> <p>Approval: The Audit Committee noted the update but required the following before approval could be granted:</p> <ul style="list-style-type: none"> • For the Chief Executive as the Accountable Officer to confirm he was satisfied with the revisions and why; • For the Director of Finance to confirm he was satisfied with the revisions and why; • Where individual officer roles had been specified within the SFIs, for the post holder to be satisfied; • An assessment of any changes to procedures/controls due to the SFIs being revised; • Clarification of Chief Executive delegated authority. 	<p>PDu 2016/047</p>
<p>9.1 For Assurance: Assurance of compliance with Standing Orders and Standing Financial Instructions</p> <p>The Committee noted the report which provided assurance that Trust employees were complying with Standing Financial Instructions and Standing Orders.</p> <p>JN asked whether there was an agreed timeframe for the implementation of Purchase to Pay.</p> <p>PDu responded that a formal project plan was going to the ICT Project Board for approval. It was anticipated that Purchase to Pay would be rolled out in November and on-line requisitioning approved by the end of the financial year. After the year-end period if there was no purchase order then no payment would be made, the on-line requisitioning would ensure that goods and services were secured through the Trust's preferred supplier procurement framework. He confirmed that the new process would not compromise front-line delivery or patient safety.</p> <p>BS asked what the assurance map would look like going forward and how it would reflect SO/SFI compliance.</p> <p>SP responded that there would be the Board Assurance Framework, the assurance map and national framework assessments.</p> <p>RDT added that the SFIs and SOs would be the frameworks for accountability and responsibility.</p> <p>AA advised that there would be a clear quarterly assurance cycle with a logical flow of meetings and information.</p> <p>RDT provided a brief overview of some of the processes which would tighten expenditure including the Vacancy Panel (for recruitment including agency), Single Tender Waivers (aligning with Purchase</p>	

		Action
	<p>Orders) and Payroll and Overtime (TEG and TMG ensuring managers comply). He advised that work was on-going to ensure compliance in healthcare and associated contracts.</p> <p>HRo advised that there should also be a key assurance in relation to 'income'.</p> <p>Action: PDu to incorporate assurance in relation to income.</p> <p>Approval: The Audit Committee noted the update and next steps and gained appropriate assurance that the Trust was complying with Standing Financial Instructions and Standing Orders.</p>	<p>PDu 2016/048</p>
<p>10.0</p>	<p>For Assurance: Compliance with Audit Recommendations The Committee noted the report which provided an update on the status of outstanding Audit and Counter Fraud recommendations.</p> <p>RDT clarified that where actions were allocated to individuals who had now left the organisation these would be transferred to the individual who was now in post.</p> <p>The Committee discussed the dates on the table that had passed, some being over 12 months old. This would be discussed with Maxine Travis, Risk Manager to determine how best to record this and take forward with the relevant manager.</p> <p>Action: To discuss with Maxine Travis, Risk Manager the dates on the Internal Audit Report Status table that were over 6-12 months old to determine how best to record this and take forward with the relevant manager.</p> <p>SP informed the Committee that the process for monitoring these would be strengthened through TMG reporting mechanisms.</p> <p>BB remarked that there was some overlap with the Internal Audit report and she would liaise with PDu to ensure the reports were better aligned going forward.</p> <p>Approval: The Audit Committee received and accepted the latest Compliance with Audit Recommendations Report.</p>	<p>PDu 2016/049</p>
<p>11.0</p>	<p>For Assurance: Internal Audit and Anti-Fraud Progress Report BS remarked that he had found the new format useful. He referred to the dashboard on page four of the document and remarked that there were fewer internal audit reviews.</p> <p>BB explained that there had been some required changes to the</p>	

	Action
<p>Internal Audit plan profiling requested by the Trust in Quarters 1 and 2 which meant that there was a consequent increase in Quarter 4 which may impact on capacity issues (including the Trust staff to support the audit) at that time. She advised that there were a number of audits that were in-progress and at an advanced stage which were outlined at Table 6 of the report. She referred to Table 7 and informed the Committee that this reflected the number of audit outputs would require consideration by the Audit Committee.</p> <p>The Audit Committee noted the number of HR reviews which had been deferred and that related issues would be included as part of the overall HR report that was discussed at the beginning of the meeting.</p> <p>The Audit Committee considered each review within the report.</p> <p><u>Pathfinder Application General Controls</u> The findings were noted.</p> <p><u>Temporary Staffing and Interim Appointments</u> This would be included within the overall HR report.</p> <p><u>Data Centres – Physical and Environmental Security Controls</u> The findings were noted.</p> <p><u>Corporate Governance</u> BB advised that this review had included a number of different elements including an assessment of the organisation’s compliance with the Bribery Act and a survey.</p> <p>PD remarked that she still had concerns with secondary employment, specifically where YAS was the secondary employer and whether staff were aware that this needed to be declared.</p> <p><u>Commissioning and Contracting – Healthcare Contract Management</u> This review had not yet been finalised but findings were included in the progress report for the Committee’s information.</p> <p>The Committee noted that contracts should always be signed prior to work commencing. BB explained that the finding was only for certain contracts reviewed.</p> <p>RDT explained the work which had been undertaken in respect of contracts and terms for Private Events.</p> <p>PD remarked she had concerns in relation to clinical checks for third parties.</p> <p>It was noted that this would be picked up through the Quality Committee and explained that the governance checks were very complex.</p>	

	Action
<p><u>Management of the Estate</u> The findings of this review were noted.</p> <p><u>Care Pathways – Acute Service Reconfiguration</u> The findings of this review were noted.</p> <p>The Committee noted the follow up activity which had taken place since the last meeting.</p> <p>The Committee noted that there were two new investigations underway in terms of counter fraud activity. The Committee heard about two investigations, 00051 was a very detailed investigation and 74426 was now with local management to resolve.</p> <p>Approval: The Audit Committee received and accepted the latest Internal Audit Progress Report.</p>	
<p>13.0</p> <p>For Ratification: Capitalisation of Vehicle Set up Costs This item was taken out of order of the agenda. RDT outlined the financial framework for the classification of vehicle set-up costs as capital to support operating plans, service delivery and developments fit for the future and how the Trust would like to treat the classification of YAS’ vehicle fit out and equipping as a ‘grouped assets’.</p> <p>It was decided that further discussion would need to take place on this issue between YAS’ Capital Accountant and HR before the Audit Committee could approve the recommendations.</p> <p>Action: HRO and YAS’ Capital Accountant to discuss the issue of ‘grouped assets’.</p> <p>Approval: The Audit Committee noted the report but deferred approval and ratification until further clarification and assurance was provided following the outcome of discussions between the External Auditors and YAS’ Capital Accountant.</p>	<p>RDT/HRO 2016/050</p>
<p>11.1</p> <p>For Assurance: Review of Effectiveness of Internal Audit BB referred to Appendix 1 and remarked that to comply with Public Sector Internal Audit (PSIAS) there would need to be an independent peer review at least every five years, adding that the last peer review had been in January 2013.</p> <p>BS thanked BB for the report and advised that the Audit Committee gained assurance from the report.</p>	

		Action
	<p>Approval: The Audit Committee noted the update and gained assurance that Internal Audit provided an effective service.</p>	
11.2	<p>For Assurance: Internal Audit Management Update (Confidential) The Committee received an overview of the current status of Internal Audit provision and the proposals in relation to Audit One.</p> <p>RDT explained the current due diligence process being undertaken.</p> <p>He advised that the contract with Audit One would likely be three years plus a rolling one year.</p> <p>Approval: The Audit Committee noted the update.</p>	
12.0	<p>For Assurance: Review of Losses and Special Payments RDT informed the Committee that he was concerned that the paper currently did not cover such issues as central settlements/grievances etc. as these did not go through YAS' Legal Team. These tended to be dealt with by the HR team and then charged back to the relevant department. He advised that he had instructed that HR review this and report back to him their findings.</p> <p>SP responded that he felt this was probably a correct assumption. He advised that with the development and introduction of an in-house Solicitor role that the Trust should be able to manage such issues within the Trust.</p> <p>It was agreed that following the review by the HR team that a report be brought back to the Audit Committee for discussion.</p> <p>Action: Following the review by the HR team into payments made via the HR team in terms of central settlements/grievances for a paper to be brought to the Audit Committee.</p> <p>PD referred to the tables attached to the report and questioned why the two losses were listed both listed under 'other'.</p> <p>Approval: The Audit Committee noted the reported incidence of Losses and Special Payments made up to August 2016.</p>	<p>RDT 2016/051</p>
14.0	<p>For Assurance: SFI Waivers and Contract Award Activity over £100,000 RDT provided assurance to the Audit Committee of compliance with Standing Orders and SFIs for contracts that have been awarded;</p>	

		Action
	<p>purchase orders raised for goods and services above £100k; Single Tender Waivers (STW) raised (including retrospective for compliance review) completed since the last Audit Committee.</p> <p>BS questioned the action from the last meeting requesting a report on Single Tender Waivers from the Head of Procurement and asked that this be revisited.</p> <p>Action: For the Head of Procurement to produce a paper on the issues surrounding Single Waiver Tenders.</p> <p>The Committee noted an apparent increase in STWs. RDT assured the Committee the list presented was comprehensive. He added that he understood that there may have been a breach of compliance with a couple of the STWs and he was investigating whether this was the case.</p> <p>Action: To investigate whether there had been a breach of compliance with STWs.</p> <p>RDT advised that he would add a column on to the tables which highlighted whether the decision was retrospective or not.</p> <p>Action: To insert a column on the table which indicated whether the decision was retrospective or not.</p> <p>Approval: The Audit Committee noted the update and was assured on the contracts let and purchase orders raised for goods and services above £100,000 and Single Tender Waivers (STW).</p>	<p>RDT/MF 2016/052</p> <p>RDT 2016/053</p> <p>RDT 2016/054</p>
14.1	<p>For Assurance: Review of Suspension of Standing Orders AA confirmed that there had been no suspension of Standing Orders since the Audit Committee meeting on 7 July 2016.</p> <p>Approval: The Audit Committee noted the update.</p>	
15.0	<p>For Assurance: Update on actions arising from audit of End of Shift Overtime BS referred to the conversation concerning this under Action 2016/033 – End of Shift Overtime. The issue had been discussed at the Finance and Investment Committee and the Trust Board meeting and the appropriate assurance had been given that the issues were being managed and resolved.</p> <p>RDT emphasised that the issue was receiving the appropriate attention from Operations Management Team, adding that this</p>	

		Action
	<p>should streamline further and be more effective with the management restructure and better recording systems.</p> <p>BS referred to the time it had taken to introduce the checks for end of shift overtime and asked that any further changes be accelerated accordingly.</p> <p>RDT explained the issues surrounding the delay in commencement of the checks and he did not anticipate this would be an issue going forward.</p> <p>Approval: The Audit Committee noted the update and gained assurance that the appropriate systems had been put in place to audit end of shift overtime. It was noted that any further enhancements would be required to be introduced at pace.</p>	
16.0	<p>For Assurance: Raising Concerns at Work</p> <p>BS advised that he had not been advised of anything of note since the last meeting.</p> <p>SP updated the Audit Committee on cases that had been raised under 'Raising Concerns at Work' including 2-3 specific whistleblowing cases.</p> <p>PD informed the Committee that she had volunteered to be the NED lead for 'whistleblowing' within the Trust alongside JN.</p> <p>Approval: The Audit Committee noted the update.</p>	
16.1	<p>Freedom to Speak Up</p> <p>SP updated the Committee with a number of issues that had been raised through the Freedom to Speak Up route. He confirmed these were being followed appropriately.</p> <p>He emphasised that Jock Crawford, the YAS F2SU Guardian was independent of management within the Trust and that some parameters for the role would be established.</p> <p>He advised that there had been 19 cases logged on the Datix system.</p> <p>He advised the Audit Committee that emerging themes would be shared with them but in such a way that it would not breach confidentiality.</p> <p>Action: To share with the Audit Committee any themes relating to Freedom to Speak Up.</p>	SP 2016/055

		Action
	<p>It was agreed by consensus that reporting would be done verbally.</p> <p>Approval: The Audit Committee noted the update.</p>	
17.0	<p>For Assurance: Review of Meeting Actions and Quality Review of Papers</p> <p>BS referred to the number of items on the agenda and action log which the meeting had covered effectively.</p> <p>He thanked those present for their attendance and contributions to the meeting.</p> <p>The meeting finished at 1250 hours.</p>	
18.0	<p>Date and Location of Next Meeting: 12 January 2017 – 0900-1300, Kirkstall and Fountains, YAS HQ</p>	

CERTIFIED AS A TRUE RECORD OF PROCEEDINGS

_____ **CHAIRMAN**

_____ **DATE**