

## **BNSSG ICB Audit and Risk Committee Meeting**

**Minutes of the meeting held on 6<sup>th</sup> December 2024 at 2.00pm  
via Microsoft Teams**

### **DRAFT Minutes**

<b>Present</b>		
John Cappock	Audit Committee Chair - Non-Executive Member	JCa
Jaya Chakrabarti	Non-Executive Member – People	JCh
Ellen Donovan	Non-Executive Member – Quality and Performance	ED
Steve West	Non-Executive Member – Finance, Estates and Digital	SW
<b>Apologies</b>		
Jo Walker	Chief Executive Officer, North Somerset Council	JW
<b>In attendance</b>		
Nick Atkinson	Head of Internal Audit, RSM	NA
Matt Backler	Deputy Director of Finance, BNSSG	MB
Andrew Davies	Grant Thornton	AD
Deborah El-Sayed	Chief Transformation and Digital Information Officer, BNSSG ICB <i>For item 5</i>	DES
Connor Evans	Executive PA, BNSSG	CE
Rob Hayday	Chief of Staff, BNSSG ICB	RH
Jo Hicks	Chief People Officer, BNSSG ICB <i>For item 5</i>	JH
David Jarrett	Chief Delivery Officer, BNSSG ICB	DJ
Jo Medhurst	<i>For item 4</i>	JM
Nic Saunders	Head of System Planning, BNSSG ICB	NS
Rosi Shepherd	<i>For item 4</i>	RS
Sarah Smith	Local Counter Fraud Service, ASW Assurance	SS
Sarah Truelove	Chief Financial Officer and Deputy Chief Executive, BNSSG ICB	ST
Anne Tutt	NHS University Hospitals Bristol and Weston Foundation Trust Non-Executive Member	AT
Nick Hassey	BNSSG	NH
Adwoa Webber	Head of Quality and Clinical Excellence, BNSSG	AW

	Item	Action
A	<b>Meeting with Auditors without the Executive</b>	
1	<p><b>Welcome and Apologies</b></p> <p>John Cappock (JCa) welcomed everyone to the meeting. Apologies were noted as above. Steve West (SW) would be joining at 15:00.</p> <p>JCa reminded members of the of 4 aims of the ICB.</p> <ul style="list-style-type: none"> <li>- Improving outcomes and population healthcare</li> <li>- Tackling inequalities</li> <li>- Enhancing productivity</li> <li>- Helping NHS support the broader social and economic development</li> </ul> <p>JCa shared feedback from the joint NED (non-executive director) and Executive Team Away Day. JCa explained that it was good to reflect and understand how the ICB could look to involve NEDs from provider originations going forwards. JCa acknowledged the significant chair turnover across BNSSG in the past year and shared that there was an intention, through Jeff Farrar (BNSSG ICB Chair), to bring together NEDs from across BNSSG for a get together.</p> <p>JCa was supportive of exploring the appetite for an in-person Audit &amp; Risk Committee meeting within the next year.</p>	
2	<p><b>Declarations of Interest</b></p> <p>Anne Tutt (AT) declared healthcare interests which would be officially recorded by Loran Davison:</p> <ul style="list-style-type: none"> <li>- UHBW – audit Chair</li> <li>- Oxford Hospitals Charity - Trustee</li> <li>- Catherine House Hospice - Trustee</li> <li>- Pancreatic Cancer UK – Trustee and Treasurer</li> </ul> <p>JCa declared an interest on behalf of Steve West in relation to single action waivers:</p> <ul style="list-style-type: none"> <li>- £25k transaction between the ICB and UWE</li> </ul>	
3	<p><b>Minutes of the previous meeting held and Action Log</b></p> <p>The minutes of the previous meeting were agreed as a correct record. The Committee reviewed the action log:</p>	

	<b>Item</b>	<b>Action</b>
	<p>59– JCa recently discussed project gateways with Deborah El-Sayed (DES) and noted that this would be covered as part of the internal audit report later in the meeting. Closed.</p> <p>61– Ownership passed from Nic Saunders (NS) to Rob Hayday (RH). RH updated members that a risk leads meeting would be taking place on Tuesday. Work was being done to map directorate risks to a committee. This would be confirmed by end of the month and shared as part of the committee workplans.</p>	
4.1	<p><b>Internal Audit Progress Report</b></p> <p>Nick Atkinson (NA) referred to the ICB values and objectives highlighted by JCa at the start of the meeting and highlighted the population health report. NA commented that BNSSG ICB had done quite well noting that the 30% running costs reduction had hit other ICBs quite hard in terms of delivering in those areas. NA explained that the report contained suggestions on how to take things further based on feedback from stakeholders. NA noted that there was not anything surprising in the report and acknowledged that it was a useful exercise in terms of flagging key areas and identifying a way forward.</p> <p>NA referred to the first part of the finance report which looked at the process and noted the big challenges this year. NA explained that part of the work would be to look at effectiveness in practice. NA noted that it was easy to audit something and say it was fine because certain targets had been achieved which were reflected by the outcomes however NA went on to explain that caveats had been included around external factors and the size of the challenge which could lead to an impact on delivery as a whole.</p> <p>JCa commented that this was an area which received a lot of attention at the Finance, Estates and Digital Committee each month and also featured as part of the closed board discussion on 5<sup>th</sup> December.</p> <p>Ellen Donovan (ED) congratulated the finance department on an excellent report.</p> <p>ST noted that the production of the report was broader than just the ICB finance department and was dependent on the way we worked across the system. ST noted the challenges and highlighted the importance of continually looking at areas of improvement, ensuring that there was ownership across all organisations.</p>	

	Item	Action
	<p>Jo Medhurst (JM) highlighted a point for clarification around population health and health inequalities. JM explained that population health management was tool built through the intelligence centre for data analysis. JM was keen for there to be a deep dive on how we do population health in BNSSG, using the data to make sure that we were working in the most effective way to deliver the best outcomes for the right people. JM noted that there was good guidance which had come out of the insightful boards work for both ICBs and providers.</p> <p>Alison Moon (AM) referred to the points raised by JM and commented that it was an important foundation to help us get to where we wanted to go. AM highlighted the risks involved referring specifically to GP collective action and the data sharing issue. AM acknowledged that BNSSG were doing well compared to others but challenged members to think about what would need to be done to protect this work amongst the expected upcoming challenges. JM referred back to the insightful board guidance which provided recommendations on embedding and development. JM noted the recently established Strategic Health Inequalities Prevention and Population Health Committee which provided a space for scrutiny as a statutory oversight committee. JM commented that we were good at observing but needed to shift more to implementation.</p> <p>NA commented on the suggestion for a deep dive into population health management and noted that it would fit well in terms of the internal audit plan for next year.</p> <p>NA highlighted other areas of work in progress and referred to the draft report on systems quality. NA noted that they were in the stage of finalising the actions and this report would be available for the next meeting. NA explained that besides the output of reports, everything else was in train or had an agreed scope.</p> <p>NA moved on to talk about the number of outstanding areas and specifically highlighted 3 key areas which were past the due date. NA thanked NS on the work she had done to support this by taking on some of the work directly which meant there was more clarity and better updates in the report. NA noted that the team were open to have conversations about action and targeted achievement. NA referred to the action around project assurance and explained that the team would be going back to check that it was going to achieve the desired outcome. NA commented on the DSP toolkit and acknowledged that there were a number of actions to be completed. NA explained that there had</p>	

Item	Action
<p>been a delay from NHS England in releasing the guidance for the toolkit but noted that it would be due shortly, with a focus on cyber security.</p> <p>NA updated members on the audit chairs forum which was held just over a week ago and included over 30 audit chairs from across the NHS. As part of that forum, there were discussion on ICS governance and risk. NA added that he had sent a note sent to JCa summarising the key points. This would also be shared with committee members.</p> <p><b>Action: NA to share audit member forum summary with committee members.</b></p> <p>Rosi Shepherd noted that she had seen the revised version of the system quality assurance report and it would be shared in due course. RS explained that learning was taken from the funded care actions. They were complex and involved work across multiple teams which did lead to a pushback of deadlines. RS noted that having had conversations with the team, they were mindful about agreeing to realistic deadlines, ensuring that they could be met. RS noted that the safeguarding work was going well and that the first phase of the transformation plan was on track for completion in January.</p> <p>AM agreed with RS with regards to setting realistic but challenging timelines for management actions. AM noted the process in terms of the sign off of timescales and queried if this was done by RS for the management actions that she was the responsible Executive for. RS noted that she had for last 2 but not the one facing challenges and explained that this was where the learning had been taken to set more considered and realistic timescales.</p> <p>ED thanked RS for her comments. ED queried if RS was confident of meeting the 31<sup>st</sup> December deadline as it was close approaching. RS explained that she would be going to check with team on progress.</p> <p>ED commented on the DSP toolkit and noted a lack of confidence towards the update. ED noted that the responsible manager was the digital lead and questioned who this was. ED requested further clarity as the date had been pushed back by 6 months but also acknowledged that JCa had recently met with DES.</p> <p>NA responded to the points raised by ED and explained that when working on the DSP toolkit that there would be an aim to do the work and then input the actions before the final toolkit went off so that the the benefit would be included in the results. This could lead to a push to get everything done by 30<sup>th</sup> June so that it would be included in the declared position however it could also lead to</p>	<p><b>NA</b></p>

	Item	Action
	<p>unrealistic timescales. NA noted that there was something for the internal audit team to do in terms of challenging those dates. Often, there would be two separate approaches which could end up being conflated around the need strengthen controls whilst also trying to be compliant for the next year.</p> <p>JCa was supportive of the challenges raised by ED. ED queried if it was appropriate to request for the director responsible for the management action to be in attendance at the committee to provide confirmation and assurance of the internal process.</p> <p>ST provided assurance that this was now happening and that they Executive Team were in the process of putting together standardised agendas for the senior leadership team meeting which would including the people who were often completing the actions as well as the responsible director to make sure they were covering all outstanding internal audit actions. ST noted that the process would improve over time.</p> <p><b>The Audit and Risk Committee received the Internal Audit Progress Report and discussed the finalised audit reports</b></p>	
5.1	<p><b>External Auditor Update</b></p> <p>JCa acknowledged the 24/25 year end process and handed over to Andrew Davies (AD) to provide an update on external audit.</p> <p>AD introduced himself and noted that he was working with various ICPs including Gloucestershire and Somerset.</p> <p>AD explained that since the last meeting, a washup took place with finance team looking at where improvements could be made and how things could be made to run smoother.</p> <p>AD noted that one of the key areas which caused some difficulty last year was POD. AD explained that they would be taking a standardised approach across all ICBs. AD informed members of a meeting with NHS England next week to ensure that they were also on board, and this would hopefully lead to an improved experience across the whole of audit in the Southwest.</p> <p>AD referred the Mental Health Investment Standard and noted the April 2025 deadline. AD explained that someone from Grant Thornton, outside the audit team but with specialist experience would be leading on that work.</p>	



	Item	Action
	<p>AD noted that the Value for Money work would be completed by a specialist team with the audit plan coming in March 2025.</p> <p>AD explained that since the report was drafted, the accounts timetable had now been published. The submission dates had come forward by a week to Monday 23<sup>rd</sup> June which effectively meant the deadline would be Friday 20<sup>th</sup> June as it would need to be submitted the week before.</p> <p>JCA thanked AD and highlighted the Grenfell Tower publication noting that it would be helpful to share with David Jarrett. <b>Action: Connor Evans (CE) to send publication to David Jarrett</b></p> <p>ST flagged that the next audit committee date would need to change to due to the overlap with the local authority audit planning time and the audit plan timelines.</p> <p><b>Action: JCa to test availability for a move to a March Audit and Risk Committee.</b></p> <p>ED referred to the review of processes and queried if there was an expectation that the process would be to a better standard compared to last year. AD stated that he was confident and that there were no concerns in terms of delivery. AD noted that there would likely be some challenges in January and February due to local government backstop dates.</p> <p>ST noted that she was also confident and work would be done to keep developing, ensuring that teams were aligned.</p> <p>JCa commented that the committee would be taking a key interest due to past experiences.</p> <p>AD noted that the plan would be to produce a detailed project plan early in the new year which would have timelines so that both the ICB and Grant Thornton could hold each other accountable.</p> <p>JCa thanked AD for the update and welcomed Steve West (SW) to the meeting.</p> <p><b>The Audit and Risk Committee received the update.</b></p>	<p>CE</p> <p>JCa</p>
6.1	<b>Counter Fraud Progress Report</b>	

Item		Action
	<p>Sarah Smith (SS) provided a summary of the report.</p> <p>SS referred to the Economic Crime and Corporate Transparency Act 2023. SS highlighted that this was of importance to the ICB as it required all agents, subsidiaries or other associated persons from which services were procured and who were part of supply chains, providing services for or on behalf of organisations in scope, may be required to demonstrate compliance or reasonable fraud prevention. SS noted that measures were in place and a professional briefing would be imminent.</p> <p>SS noted that a section of the report made reference to attendance of a 2-day training session about artificial intelligence. SS explained that this was invaluable to proving understanding of threats posed by artificial intelligence to client organisations.</p> <p>In terms of business as usual, SS noted the following:</p> <ul style="list-style-type: none"> <li>- The latest newsletter had been issued and provided additional resources to the ICP communications team to promote November international fraud awareness week.</li> <li>- 2 alerts had been issued in respect of individuals who could have been seeking NHS employment but who were separately known to multiple concurrent employments or whose employment history and qualifications were false.</li> <li>- Webinar delivered for finance procurement</li> <li>- New counter fraud e-learning had been completed and was available to client organisations to adopt</li> </ul> <p>JCa thanked SS for the update and noted that it was good to see the strategic intel update as well as the proactive work and awareness raising.</p> <p>Jaya Chakrabarti (JCh) queried if any thought had been given to other areas where artificial intelligence could be used in terms of both potential risk but also reward. JCh asked if there had been any assessment beyond the patient level.</p> <p>SS explained that she was not sure if there was an assessment which encompassed the whole of the NHS. The immediate concern was around things such as recruitment and the fabrication of documents. SS noted that as part of the training they also considered the benefits of artificial intelligence to the NHS.</p>	



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	<p>DES noted that an ICB artificial intelligence policy was in development and would be shared in the new year.</p> <p><b>The Audit and Risk Committee received the Counter Fraud Interim Report</b></p>	
7.1	<p><b>Corporate Risk Register</b></p> <p>RH explained that the corporate risk register was built on the directorate risk register process which had become better established. The document shared with the committee was pulled from those sources to provide visibility, updates and to capture any recommendations to the ICB board around the closure or escalation of risks.</p> <p>RH noted the development of a new risk register template which was being trialled by the Office of the Chair and Chief Executive as well as the Business and Planning team.</p> <p>JCa asked if the new template would be simpler in terms of scale and how much screen space it required. RH explained that there was a priority to ensure that risks were being recorded in the right way first before moving to a completely new system.</p> <p>JCa questioned the closure of the risk around the transfer of cost from social care given recent conversations at board. ST noted that they were happy to reconsider as since this risk was put forward, the ICB had received further correspondence from Bristol City Council.</p> <p><b>Action: ST team to revisit the risk around the transfer of cost from social care and update accordingly.</b></p> <p>RH acknowledged that the risk register was taken from a period of time and noted that it would be updated for the ICB board in January.</p> <p><b>Action: Rob Hayday to ensure that updates to risks were captured for the January ICB Board.</b></p> <p>ED noted that it would be helpful to have a reminder somewhere on the document of what constituted a risk to be on the corporate or system risk register. ED also requested that the risk around LEDER was referred back to the Outcomes, Performance and Quality Committee before being closed.</p>	<p><b>ST</b></p> <p><b>RH</b></p>



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	<p>within an executive role outside of the ICB. NA was happy to support and discuss how other organisations were starting to move towards that approach.</p> <p>RH thanked NA for the offer of support and noted that the intention was to have a buddy allocated to each risk from partner organisations.</p> <p>JCa was supportive of the feedback and additional perspective from NA which could enhance and build on the collaboration between teams.</p> <p><b>The Audit and Risk Committee received the system risk register.</b></p>	
7.3	<p><b>Review of Committee Terms of Reference</b></p> <p>NS noted that that the terms of reference were brought to the previous meeting. Following the feedback given, amendments were made and the document was returning for committee sign off prior to ICB board approval. NS stated that the amendments were captured in the version control table.</p> <p>ED made a comment with regards to NED membership and the description provided for each member. The terms of reference for the Outcomes, Performance and Quality Committee provided more detail on membership roles. ED queried which approach was preferred.</p> <p>ST stated that for the Audit and Risk committee, it was very clear that only NEDs were members of the committee due to the specific governance role the committee provided.</p> <p>NA commented on the role of provider NEDs as there was some uncertainty around the role they had as part of the committee in terms of membership or in attendance. JCa stated that he felt partner NEDs were part of the core membership of the committee. NA suggested looking at the ICB governance to ensure that the wording was correct and there weren't any trip ups.</p> <p><b>Action: RH to check membership detail of NEDs for each ICB committee via the terms of reference to test what it meant and to clarify if external NEDs were members or in attendance.</b></p> <p>RH noted that the terms of reference would be shared with the board as part of the committee update for sign off.</p>	RH

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	<p><b>The Audit and Risk Committee reviewed the current Terms of Reference and</b></p>	
8.1	<p><b>ISFE 2</b></p> <p>Matt Backler (MB) informed members that previously, the hope was for the new system to be implemented from 1<sup>st</sup> of April 2025 as per plans from NHS England. MB stated that there were suspicions that this would not be the case, and this had recently confirmed however no new date had been provided.</p> <p>MB informed members that implementation plans were being worked on with the CSU and the expectation was that the new date would likely be within the next financial year.</p> <p>JCa concluded that in summary we were in the hands of national movement.</p> <p>NA highlighted a potential risk around mid-year implementation due to the busy period and the recognition that it could create some additional pressure.</p> <p><b>The Audit and Risk Committee received and noted the report</b></p>	
8.2	<p><b>Submission of the M9 Governance statement</b></p> <p>RH noted that there was a requirement to submit the governance statement by 21st January however no template had been provided from NHS England.</p> <p>RH stated that the intention was to pull together the statement and take it through the ICB Executive Team for sign off prior to the deadline.</p>	

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	<p>JCa requested that the Audit and Risk Committee also had oversight of the return prior to submission.</p> <p><b>Action: Rob to circulate the governance statement to the Audit and Risk committee prior to submission.</b></p>	<p><b>RH</b></p>
<p>9</p>	<p><b>Matter for Information</b></p> <p>The Committee received the following matters for information:</p> <ul style="list-style-type: none"> <li>• Management of Conflicts of Interest 6-month report</li> <li>• Claims and Litigation Report</li> <li>• Information Rights Report</li> <li>• Waiver of Standing Financial Instructions</li> <li>• Audit and Risk Committee Workplan</li> <li>• Losses and Special Payments Register</li> </ul> <p>Conflict of interest approved previously. No additional comments were raised.</p>	
<p>10</p>	<p><b>Reflection on Effectiveness of Committee Meeting</b></p> <p>JCa handover over to RH to provide reflections on the effectiveness of the meeting.</p> <p>RH noted:</p> <ul style="list-style-type: none"> <li>- Nice to welcome others and engage in open discussion.</li> <li>- Good to have multiple directorates present to provide accountability.</li> <li>- Good to get feedback from the NED and Executive Team Away Day in October.</li> <li>- Nice to receive opinions from internal audit partners</li> <li>- Motivating to receive feedback from NEDs</li> <li>- Regarding population health management, it was good to hear JH asking to have internal audit opinion.</li> <li>- There was fair challenge</li> <li>- There was good reflection</li> <li>- It was good to note planning around external audit and learning.</li> <li>- noted development through active interest, specifically around risk</li> <li>- Good discussion out of genuine interest around the terms of reference</li> <li>-</li> </ul>	
	<p><b>Date of Next Meeting</b></p>	

	<b>Item</b>	<b>Action</b>
	Monday 10 <sup>th</sup> March 2025, 10:00-12:30	
B	<b>Members meeting with the Executive without Auditor</b>	
12.1	<b>External Auditor Services Procurement</b>	

**Connor Evans, Executive PA, December 2024**

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