

WEST HERTFORDSHIRE HOSPITALS NHS TRUST

AUDIT COMMITTEE

Minutes of the Audit Committee Meeting held on 10 September 2013
Estates Meeting Room
Watford General Hospital

Chair: Sarah Connor

Present: Phil Townsend, Non Executive Director
Robin Douglas, Non Executive Director

In attendance Patrick Butterworth, Director of Finance
Dr Mike Van Der Watt, Medical Director
Amy Thorpe, Grant Thornton
Greg Rubins, BDO
Mark Jarvis, Interim Trust Secretary

	Action	Who	When
	on catalogue items was being reduced as more things were being set up and exceptions required specific authorisation.		
7.2	MVDW expressed concerns about the occasional incidents that arose when stocks were low and signatories were not available to sign off orders. PB felt that the current escalation system should prevent that from happening in the future.		
8.	Losses and Compensation		
8.1	It was noted that PB was looking at the recovery process for overseas visitor monies in light of the £26k write-off recorded in the report. PT would like to see more explanation of items.		
9.	Waiver Register		
9.1	It was noted that PB had put in place a more robust process for the signing off of waivers which he was now doing in all instances. RD was concerned that the report did not provide the Committee with any sense as to whether the items being approved represented a good position for the Trust. It was agreed that the Committee should receive an annual summary and report at May meetings, with context to whether the position was acceptable and in line with practice elsewhere	Patrick Butterworth	
9.2	The report was noted.		
10.	Gifts And Hospitality		
10.1	In light of earlier comments (see 5.5) it was agreed that there would be an agreed notional amount for daily conference rates which could be used in the report. It was agreed that MVDW would consider the level. SC asked if MDVW would review the reports and give the Committee an opinion as to whether notified items are within acceptable limits.	Mike Van Der Watt Mike Van Der Watt	End September November meeting
10.2	The report was noted.		
11.	External Audit Reports		
11.1	In respect of the progress report AT confirmed that the Trust was not expected to respond specifically to the question on page 7 of the report. It was noted that PB had started the internal process to ensure that the Trust was compliant with the 2013/14 manual of accounts and the closedown process. It was also noted		

	Action	Who	When
	that the Trust had made good progress with changes to and improvements in the complaints compliance as highlighted in the Quality Account report.		
12.	Care Quality Commission Compliance		
12.1	SC said that in future a verbal report would be sufficient. She stressed that the Committee needed assurance that the internal processes were working appropriately and that any concerns were highlighted to the Committee. Any reds reported on the Quality and Risk Profiles (QRP) needed to be reported to the Committee.	Mike Van Der Watt	November meeting onwards
12.2	MVDW advised the Committee that he was reviewing the internal assessment process in order to ensure wider ownership of the process and outcomes. He also highlighted that the CQC assessment in respect of outcome 10 (estate) was significantly at odds with the Trust's assessment of the estate and for which central funding had been applied. He felt that there was a general need to review what information was being supplied to the CQC. PT also highlighted that the results in the QRP did not reconcile with the agenda being pursued in the Risk Summit Committee.		
12.3	RD suggested that the report was useful to see at future meetings however the verbal report should be the main focus.		
13.	Internal Audit Reports		
13.1	In terms of the progress report it was noted that the scope for the Quality Of Services Review had yet to be agreed. It was noted that the Contract Management audit would be wider than just a review of Medirest as originally envisaged. The audit of Consultants referred to on page 5 referred to consultant job plans and a further 15 days had been agreed.		
13.2	In respect of the Performance Measure Report RD raised concern that the detail on page 8 suggested that the rating of moderate concerns was inadequate. GR said that the assessment of the Trust was in line with other Trusts, many of which struggle with the indicators. He said that in view of the Trust's position relative to others moderate was appropriate. He confirmed that there would be		

	Action	Who	When
	a follow up audit later in the year.		
13.3	It was agreed that in future only reports with limited assurance should be provided in full.	Greg Rubins	November meeting onwards
13.4	It was agreed that the opening paragraph of the Counter Fraud plan should be re-written to ensure it focuses on counter fraud.	Greg Rubins	End September
14.	Overdue Audit Recommendations		
14.1	It was noted that internal audit were currently reviewing all previous recommendations and would produce a report for the November meeting. It was noted that the Committee only sees overdue items of high importance.	Greg Rubins	November meeting onwards
15.	Review Of Limited Assurance Reports		
15.1	There were no limited assurance reports to review. SC reminded the Committee that where there were limited assurance reports the lead Executive would be asked to attend the meeting to discuss the report.		
16.	Any Other Business		
16.1	It was agreed that SC and MJ would review the current work plan to ensure that it meets the current requirements of the terms of reference.	Sarah Connor/Mark Jarvis	End October
10.	Date of Next Meeting		
10.1	The next meeting of the Audit Committee will be on 14 November 2013 at 10.45 in the West Herts Meeting Room, Watford General Hospital.		