

**WELSH AMBULANCE SERVICES NHS TRUST****MINUTES OF THE OPEN MEETING OF THE AUDIT COMMITTEE OF THE  
WELSH AMBULANCE SERVICES NHS TRUST HELD ON WEDNESDAY 20  
FEBRUARY 2013 AT TRUST HEADQUARTERS, ST ASAPH AND VIDEO  
CONFERENCING LINK FROM VANTAGE POINT HOUSE, CWMBRAN AND  
CEFN COED, SWANSEA****PRESENT :**

Mr S Castledine	Non Executive Director and Chair
Mr D Evans	Non Executive Director
Mr J Morgan	Non Executive Director

**IN ATTENDANCE :**

Mr M Davies	Patient Safety Risk Manager (Item 2 only)
Mrs V De Zouche	KPMG
Mr T Eckley	Health and Safety National Manager(Item 2 only)
Mr S Fletcher	Non Executive Director and Chairman of the Board
Mrs J Gill	Financial Accountant
Mr D Harries	Internal Audit
Mr J Huxley	Assistant Corporate Secretary
Mr J Jones	Corporate Accountant
Mr O Lotfy	Principal Auditor
Ms N Parrott	Head of Planning (Item 2 only)
Mrs D Sharp	Corporate Secretary
Ms V Stevens	KPMG

**APOLOGIES:**

Dr K Fitzpatrick	Non Executive Director
Mrs P Roseblade	Director of Finance and ICT

The Committee noted that staff side representatives were not in attendance at the meeting.

## **01/13 PROCEDURAL MATTERS**

**RESOLVED: That**

**(1) it be noted that there were no declarations made under the Code of Conduct ;**

**(2) the minutes of the meeting (open and closed) of the Committee held on 28 November 2012 be confirmed as a correct record, and the following matters arising from the minutes be actioned:-**

**(a) Minute 30/12 (3) (Closed) – Tender 317 – Fleet Organisation Review Consultancy**

**A detailed report be presented to the next meeting of the Committee about the apparent delay in the process of completing the award of the contract.**

**(b) Minute 31/12 (2) (Closed) – Payments for Sick Leave in NHS Direct**

**(i) The Director of Workforce and OD be invited to attend the next meeting of the Committee on 29 May 2013, or, submit a detailed paper on the quantum of payments made incorrectly and to confirm what decisions have been made with regard to recovering overpayments; and**

**(ii) it be noted that the Director of Finance and ICT needs to have further discussions with the Nurse Director with regard to staffing levels in NHS Direct**

**(c) Minute 32/12 (Closed) – Health and Safety Thematic Review – Audit Brief**

**The Committee agreed that the review should be commenced as quickly as possible, focussing on the generic set of criteria, and the Internal Auditor be asked to discuss the matter with the Director of Finance and ICT to approve the action. The Committee also requested further reports at the appropriate time picking up any issues that fell out the generic review.**

**(3) the draft minutes outlining the discussions held at the meeting of the Strategic Planning Committee on 14 February 2013 relating to financial matters and the ORH review, be noted;**

**(4) the process for considering the Health and Safety Policy, as outlined in the report, be noted;**

**(5) the draft Annual Business Plan for the Committee be received but with the addition of a report at the next meeting with regard to the implementation/action plan arising from the recommendations in the Fleet Management Review, which is to be presented to the meeting of the Trust Board on 14 March 2013 for approval;**

**(6) the schedule of declarations by members and staff under the Gifts and Hospitality Policy be received;**

**(7) it be noted that no business has been referred to the Committee for consideration from other bodies within the Committee structure;**

**(8) the draft timetable for the production of the 2012/13 accounts as read out at the meeting by the Corporate Accountant be noted; and**

**(9) the verbal updates from the action log be noted and in respect of Minute No. 22/12 (closed) – Medical Gases – the Director of Service Delivery, in conjunction with the Director of Finance and ICT, be asked to produce a short report for the next meeting of the Committee setting out the outcomes of the Audit, and in respect of Minute 26/12 (Closed) – Air Ambulance SLA, it was noted by Members that it was intended that this would be presented to the next meeting of the Committee in May.**

## **02/13 BOARD ASSURANCE SYSTEM AND RISK MANAGEMENT POLICY**

The Committee considered a report which included a revised Risk Management Policy, amended to pick up the requirements of the Board Assurance System. In order to develop a system of monitoring risk management, members received a presentation on the use of Datixweb which, when fully implemented, would help to integrate the planning process with risk management both at directorate and corporate levels.

It was noted that the system would require a staff identified from each Directorate not only to input data but at an appropriate senior level for each Directorate to ensure that the system was owned by those who used it. In this context, members advised that extensive training should be an important part of the process.

The Committee expressed the view that the development of this initiative would best be handled by formalised project

management principles and, consequently, the role of the Management Team was key to ensuring that the necessary resources were identified and in place to support the initiative.

**RESOLVED: That**

**(1) the Committee recommend to the Board:**

**(a) the adoption of the proposed Board Assurance System, as set out in Annex 1 to the report;**

**(b) the establishment of a Governance Working Group (with membership as set out in paragraph 4 of the report), reporting directly to the Board to examine detailed recommendations arising from the Francis Report, making any recommendations as appropriate in respect of this Trust;**

**(c) the adoption of the revised Risk Management Policy, as set out in Annex 2 to the report; and**

**(2) the Executive Management Team be asked to consider the strategic development of the proposed risk management process with regard to its resourcing and directorate responsibilities, following which, the Corporate Secretary to present a further report at the next meeting of the Committee identifying a project plan, with timelines, supported in terms of resources and cost.**

#### **03/13 EXTERNAL AUDIT – AUDIT STRATEGY**

**RESOLVED: That**

**(1) due to the Strategy not being released by the Welsh Audit Office in time for the meeting, consideration of this item of business be deferred to a future meeting of either this Committee or the Trust Board; and**

**(2) it be noted that the financial audit would be progressing between now and the next meeting on a consistent basis with that of previous years.**

#### **04/13 INTERNAL AUDIT CHARTER**

The Charter was required to comply with the Internal Audit Standards for the NHS in Wales and complements the relevant provisions included in the Trust's own Standing Orders and Standing Financial Instructions.

The Committee endorsed the Charter subject to one minor change to the Audit Reporting Process outlined in Appendix A, to

require Internal Audit to finalise their report on expiry of the 15 working days allocated for the Management response, irrespective of whether a response had been received.

**RESOLVED:**

**That the Trust Board be recommended to adopt the draft Internal Audit Charter, subject to the minor amendment as referred above.**

**RESOLUTION TO MEET IN CLOSED SESSION**

*Representatives of the press and other members of the public were excluded from the remainder of the meeting having regard to the confidential nature of the business to be transacted in accordance with the requirements of Section 1(2) of the Public Bodies (Admissions to Meetings) Act 1960.*

**NOTE: Reports supporting the information contained in these minutes can be found on the Trust's website: [www.ambulance.wales.nhs.uk](http://www.ambulance.wales.nhs.uk)**