

REPORT TO THE TRUST BOARD IN PUBLIC
24 March 2022

Title	Audit Committee 8 March 2022 – Chair of the Meeting Report
Chair of the meeting	Deborah Wheeler, Non-Executive Director
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Purpose of the report

To bring to the Board’s attention key issues and assurances discussed at the Audit Committee meeting held on 8 March 2022.

Key messages

<p>Cyber Security</p> <ul style="list-style-type: none"> • Business continuity resilience of all systems across the Trust are being examined via the Silver Group which was established to monitor the UK cloud position • The Trust is part of a national NHS board, necessitating regular reports on our state of preparedness against cyber attacks. Response to notifications and Care Certs are provided within the required timescale and the Trust is currently RAG rated as green • The cyber security tool Dark Trace will be in place by the end of April; this will monitor all activity on the Trust’s network and beyond. A web filter system will also be stood up to detect malware on internet sites with coms messages alerting staff to be issued Trust wide • The Trust is linked to the secure boundary cyber tool which is being upgraded • Targeted education for staff who click on spurious links is ongoing and a phishing exercise will be run again once the new CISO is in place • A ‘top 5 tips’ and updates on cyber risks will run continually on a dedicated intranet page • Cyber will be added to the new Learning Management System as part of mandatory training, and the Trust has been offered further training for the Board from Gartner, if appropriate • An exercise is under way to establish whether any of the Trust’s suppliers have programmers based in Russia or Belarus • The Committee acknowledged that business continuity and contingency is as important as the deployment of cyber tools and noted the work undertaken has produced positive outcomes in terms of quick technical and digital fixes to some internal systems in the event of a cyber attack. <p>Board Assurance Framework: Deep Dive Risk 4 – improved experience of care</p> <p>Lorraine Sunduza, Chief Nurse, presented the deep dive review for risk 4: <i>If essential standards of quality and safety are not maintained, this may result in the provision of sub-optimal care and increases the risk of harm</i></p> <ul style="list-style-type: none"> • Aim is to be a listening and learning organisation, empowering staff to drive improvement, increasing transparency and openness, and rebalancing quality control, assurance and improvement • The quality and safety concerns and challenges include the impact of the pandemic, an increased level of complexity and activity, complaints and SIs, clinical diversity and geographical spread, patient safety and workforce and infrastructure challenges • Responses and actions to tackle these are in place, including incidence responses, improved clinical and operational leadership, a patient safety structure, workstreams for backlogs, waiting lists, recruitment, retention and wellbeing, a CQC framework process, triangulation of data and estates and digital work plans • The Committee sought assurance on how the impacts of the processes in place are being measured, if the plans are on target for delivery and whether it can be demonstrated that quality of care is being maintained, with the ultimate measure being the patient experience. <p>Board Assurance Framework</p> <ul style="list-style-type: none"> • The BAF dashboard (appendix 1) provides an overview of the risks and summarises the movement on the risk scores/progress on achieving the target scores for all risks; two risk scores have been reduced:
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- Risk 7 *If the Trust's approach to value and financial sustainability are not embedded, this may impact on the achievement of the Trust's financial, service delivery and operational plans:* current risk score has been reduced from Significant 16 to High 12 (impact of major 4 x likelihood of possible 3)
- Risk 9 *If the Trust does not effectively manage its commissioning responsibilities and associated risks as a lead provider or lead commissioner, this will impact on the quality and experience of care for service users and patients:* current risk score has been reduced from Significant 16 to High 12 (impact of the risk remains high and the likelihood of the risk occurring has reduced to possible)
- A summary report is also provided for each BAF risk (appendix 2) which includes a progress section that highlights what is going well including future opportunities, the current challenges including future risks, and how these challenges are being managed.

Charitable Funds Annual Report

- In 2021 a governance structure for the management of the Trust's charitable funds was agreed with the establishment of the Charity Committee as a standing committee of the Board and also the ELFT Charity Operational Committee
- Initial focus has been on the consolidation of existing funds at Barts Charity, progressing the registration of the ELFT Charity via the Charities Commission, development of the infrastructure to manage the Charity's operations and finance, and to provide grant funding opportunities to ELFT services
- The charity registration process has been delayed due to ongoing challenges with the backlog of applications within the Charities Commission; however, the Charity will be working closely with Barts Charity to maintain the administrative duties
- In the year the Trust received legacy fundings and there were some movements on the funds
- Equalities impact assessments are being carried out and monitored around the groups that are being supported and how the monies are being spent, to ensure equity across the Trust
- Work is underway to promulgate the benefits of the Charity and engage with a wider audience, including third sector partners, to ensure knowledge of the opportunities afforded by the Charity becomes embedded
- Assurance was received that the charity is looking to support the three main principles of social isolation, digital access and, specifically linked to the Marmot work in Luton, employment
- The Committee commended the cohesion that has been brought into this initiative.

Internal Audit: The Committee approved the internal audit plan for 2022-2023

Counter Fraud

- Local counter fraud team have been focusing on progressing the investigations on the fraudulent covid vaccine entries on the National Immunisation and Vaccine System (NIVS)
- NHS Counter Fraud Authority have issued benchmarking data for 2020-2021 which compares ELFT's performance in terms of investigations, against all commissioners and providers. The Committee commended the Trust's elevated position of performing very well against not only other mental health trusts but all providers and trusts in England.
- Assurance was provided that cyber is included in the regular fraud and bribery sessions run by the LCF team. There has also been liaison with the digital team in connection with the NIVS investigation and the inappropriate use of digital; this work will be increased to include cyber.

Waivers and Breach Report

- There have been no breaches since the last Audit Committee meeting in November 2021 and one waiver approved in December 2021 and two in January 2022
- The Committee commended the effectiveness of the controls in place that have provided it with assurance

Previous Minutes: The approved minutes of the Audit Committee meeting held on 11 January 2022 are available on request by Board Directors from the Director of Corporate Governance.