

Board Committee report to the Board of Directors

Committee Name:	Governance and Compliance
Committee Chair:	Lucy Hind
Date of last meeting:	Tuesday 13 April 2021
Date of Board meeting for which this report is prepared	27 April 2021

Summary of Key Issues

This was the first meeting of the Governance and Compliance Committee in 2021 and the first G&CC meeting since the changes in the structure at HIF late 2020.

AG was welcomed to the committee as the interim Managing Director.

The minutes from the previous meeting were approved.

The action log was discussed, actions closed and timescales for report out agreed for standing actions.

The amended Terms of Reference for the committee were approved along with the annual workplan. It was agreed that the committee would meet every two months due to the workplan and link with internal audit to ensure that all assurance was provided and time be given at each meeting to discuss any findings / solutions or timescales for actions.

The committee received updates on the following areas at the April meeting:

- Annual Plan
- PLACE Report
- Complaints Annual Summary and National Inpatient Survey (in relation to HIF)
- Policy Register
- Risk Register
- HIF Internal Audit Programme 2021/22
- Contract Review Meeting Minutes

It was agreed that a number of additional updates and actions were to be provided at the next meeting as per the action log.

It was also agreed at the meeting that due to the number of reports and plans to be reviewed that, as above, the committee would meet on a bi-monthly basis instead of quarterly. Meetings would be taking place with the interim Managing Director to review the number of audits and reports to ascertain the best way to communicate these to ensure sufficient time to review and question where necessary.

No risks were agreed to be added to the risk register at the April meeting.

The feedback from the meeting was positive and reiterated that it was a necessary committee that had value for both the organisation and the parent company.

This committee continues to align its duties with the People and Culture committee to ensure that there is consistency in approach and to limit any duplication of activity.

Are there any significant risks for noting by Board? (list if appropriate)

Nothing to note at this time.

Any matters of escalation to Board for decision or noting (list if appropriate)

The Board is asked to ratify the amended Terms of Reference for the committee.

Following review of the 2021/22 Internal Audit Annual Operational Plan the Board is asked to approve the following areas for audit:

- Patient-Led Assessment of the Care Environment (PLACE)
- Security Management
- Domestic and Cleaning Standards
- Contracts and Financial Governance
- Use of Agency Staff
- Limited Assurance Follow Up
- Assurance over Financial Controls, IT, DSPT, etc