

DATE	26 July 2016
REPORT FOR	Trust Board of Directors – Public
REPORT FROM	Wendy Booth, Director of Performance Assurance & Trust Secretary
CONTACT OFFICER	As above
SUBJECT	Trust Action Plan in Response to KPMG Recommendations following KPMG Review of Board Assurance and Self Certification
BACKGROUND DOCUMENT (IF ANY)	None
REPORT PREVIOUSLY CONSIDERED BY & DATE(S)	N/A
EXECUTIVE COMMENT (INCLUDING KEY ISSUES OF NOTE OR, WHERE RELEVANT, CONCERN AND / OR NED CHALLENGE THAT THE BOARD NEED TO BE MADE AWARE OF)	The report provides the Trust's action plan in response to the recommendations within the 2016 KPMG review of Board Assurance & Self Certification
HAVE THE STAFF SIDE BEEN CONSULTED ON THE PROPOSALS?	N/A
HAVE THE RELEVANT SERVICE USERS/CARERS BEEN CONSULTED ON THE PROPOSALS?	N/A
ARE THERE ANY FINANCIAL CONSEQUENCES ARISING FROM THE RECOMMENDATIONS?	NO
IF YES, HAVE THESE BEEN AGREED WITH THE RELEVANT BUDGET HOLDER AND DIRECTOR OF FINANCE, AND HAVE ANY FUNDING ISSUES BEEN RESOLVED?	N/A
ARE THERE ANY LEGAL IMPLICATIONS ARISING FROM THIS PAPER THAT THE BOARD NEED TO BE MADE AWARE OF?	NO
WHERE RELEVANT, HAS PROPER CONSIDERATION BEEN GIVEN TO THE NHS CONSTITUTION IN ANY DECISIONS OR ACTIONS PROPOSED?	YES
WHERE RELEVANT, HAS PROPER CONSIDERATION BEEN GIVEN TO SUSTAINABILITY IMPLICATIONS (QUALITY & FINANCIAL) & CLIMATE CHANGE?	YES
THE PROPOSAL OR ARRANGEMENTS OUTLINED IN THIS PAPER SUPPORT THE ACHIEVEMENT OF THE TRUST OBJECTIVE(S) AND COMPLIANCE WITH THE REGULATORY STANDARDS LISTED	Ensures compliance with the requirements of good governance
ACTION REQUIRED BY THE BOARD	The Board is asked to note the report

## KPMG REVIEW OF BOARD ASSURANCE & SELF-CERTIFICATION 2016

No	Risk	Recommendation	Management Response	Lead Officer	Timescale	Verification
1	Low	<p><b>Actions identified through system reviews:</b></p> <p>Though assurance statements have been included from the review of areas that have been undertaken in year within the Trust (e.g. by Internal Audit), the actions as a result of these reviews have not been highlighted in the Corporate Governance Statement.</p> <p><b>Recommendation:</b></p> <p>The Trust should integrate actions identified through system reviews e.g. Internal Audit and incorporate them explicitly in to the comments and mitigating actions in the Corporate Governance Statement.</p>	Agreed	Wendy Booth, Director of Performance Assurance & Trust Secretary	Immediate	<p>Finalised Corporate Governance Statement</p> <p>Trust Board Minutes</p>
2	Low	<p><b>Clarity of CQC Action Plan:</b></p> <p>The CQC action plan contains areas 'to be agreed' (TBA) or Executive Lead named individuals being vacant. The Trust should revise these areas to clarify arrangements in place and make explicit external factors (e.g. progress of HLHF programme).</p> <p><b>Recommendation:</b></p> <p>The CQC Action Plan should be</p>	Agreed	Wendy Booth, Director of Performance Assurance & Trust Secretary	Immediate	<p>Revised CQC Action Plan</p> <p>Trust Board Minutes</p>

		reviewed to ensure areas that are noted as 'TBA' or 'in discussion' are either defined by the Trust or made explicit where the Trust is impacted by external factors beyond its immediate control.				
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**KEY:**

- High Risk:** Issues that are fundamental and material to your system of internal control. We believe that these issues might mean that you do not meet a system objective or reduce (mitigate) a risk.
- Medium Risk:** Issues that have an important effect on internal controls but do not need immediate action. You may still meet a system objective in full or in part or reduce (mitigate) a risk adequately but the weakness remains in the system.
- Low Risk:** Issues that would, if corrected, improve the internal control in general but are not vital to the overall system. These are generally issues of best practice that we feel would.

**July 2015**