**AUDIT AND ASSURANCE COMMITTEE**

**TERMS OF REFERENCE AND OPERATING ARRANGEMENTS**

1. INTRODUCTION

1.1 The UHB Standing Orders provide that “*The Board may and, where directed by the Welsh Government must, appoint Committees of the LHB Board either to undertake specific functions on the Board’s behalf or to provide advice and assurance to the Board in the exercise of its functions. The Board’s commitment to openness and transparency in the conduct of all its business extends equally to the work carried out on its behalf by committees*”.

1.2 In line with Standing Orders (3.4.1) and the UHB Scheme of Delegation, the Board shall nominate annually a committee to be known as the Audit and Assurance Committee. The detailed terms of reference and operating arrangements set by the Board in respect of this committee are set out below.

2. PURPOSE

2.1 The purpose of the Audit Committee (“the Committee”) is to:

* *Advise* and *assure* the Board and the Accountable Officer on whether effective arrangements are in place - through the design and operation of the UHB’s assurance framework - to support them in their decision taking and in discharging their accountabilities for securing the achievement of the UHB’s objectives, in accordance with the standards of good governance determined for the NHS in Wales.

2.2 Where appropriate, the Committee will advise the Board and the Accountable Officer on where, and how, its assurance framework may be strengthened and developed further.

3. DELEGATED POWERS AND AUTHORITY

3.1 With regard to its role in providing advice to the Board, the Committee will comment specifically upon:

* the adequacy of the UHB strategic governance and assurance framework and processes for risk management and internal control designed to support the Accountable Officer’s statement on internal control, providing reasonable assurance on:
* the organisations ability to achieve its objectives;
* compliance with relevant regulatory requirements, standards and other directions and requirements set by the Welsh Government and others;
* the reliability, integrity, safety and security of the information collected and used by the organisation;
* the efficiency, effectiveness and economic use of resources; and
* the extent to which the organisation safeguards and protects all its assets, including its people
* the adequacy of the arrangements for declaring, registering and handling interests at least annually
* the adequacy of the arrangements for dealing with offers of gifts or hospitality
* to ensure the provision of high quality, safe healthcare for its citizens;
* the Board’s Standing Orders, and Standing Financial Instructions (including associated framework documents, as appropriate);
* the accounting policies, the accounts, and the annual report of the organisation, including the process for review of the accounts prior to submission for audit, levels of error identified, the ISA 260 Report ‘Communication with those charged with Governance’ and managements’ letter of representation to the external auditors;
* the Schedule of Losses and Compensation;
* the planned activity and results of internal audit, external audit and the Local Counter Fraud Specialist (including strategies, annual work plans and annual reports);
* the adequacy of Executive and Managements response to issues identified by Audit, Inspection and other assurance activity;
* anti-fraud policies, whistle-blowing processes and arrangements for special investigations; and
* any particular matter or issue upon which the Board or the Accountable Officer may seek advice.

3.2 The Committee will support the Board with regard to its responsibilities for governance (including risk and control) by:

* reviewing the ***comprehensiveness*** of assurances in meeting the Board and the Accountable Officers assurance needs across the whole of the UHB’s activities, both clinical and non-clinical;
* reviewing the ***reliability and integrity*** of these assurances; and
* considering and approving policies as determined by the Board.

3.3 To achieve this, the Committee’s programme of work will be designed to provide assurance that:

* there is an effective Internal Audit function that meets the standards set for the provision of Internal Audit in the NHS in Wales and provides appropriate independent assurance to the Board and the Accountable Officer through the Committee;
* there is an effective Counter Fraud Service that meets the standards set for the provision of counter fraud in the NHS in Wales and provides appropriate assurance to the Board and the Accountable Officer through the Committee;
* there is an effective clinical audit and quality improvement function that meets the standards set for the NHS in Wales and provides appropriate assurance to the Board and the Accountable Officer through the Quality, Safety and Experience Committee;
* there are effective arrangements in place to secure active, ongoing assurance from management with regard to their responsibilities and accountabilities, whether directly to the Board and the Accountable Officer or through the work of the Board’s Committees
* the work carried out by key sources of external assurance, in particular, but not limited to the UHB External Auditors (Audit Wales), is appropriately planned and co-ordinated and that the results of external assurance activity complements and informs (but does not replace) internal assurance activity
* the work carried out by the whole range of external review bodies is brought to the attention of the Board, and that the organisation is aware of the need to comply with related standards and recommendations of these review bodies, and the risks of failing to comply;
* the systems for financial reporting to the Board, including those of budgetary control, are effective; and that
* the results of audit and assurance work specific to the UHB, and the implications of the findings of wider audit and assurance activity relevant to the UHB’s operations are appropriately considered and acted upon to secure the ongoing development and improvement of the organisation’s governance arrangements.

**Authority**

3.4 The Committee is authorised by the Board to investigate or have investigated any activity (clinical and non-clinical) within its terms of reference. In doing so, the Committee shall have the right to inspect any books, records or documents of the UHB relevant to the Committee’s remit, and ensuring patient/client and staff confidentiality, as appropriate. It may seek relevant information from any:

* employee (and all employees are directed to cooperate with any reasonable request made by the Committee); and
* any other committee, sub-committee or group set up by the Board to assist it in the delivery of its functions.

3.5 The Committee is authorised by the Board to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers it necessary, in accordance with the Board’s procurement, budgetary and other requirements.

**Access**

3.6 The Head of Internal Audit and the Engagement Partner/Audit Manager of External Audit (Audit Wales) shall have unrestricted and confidential access to the Chair of the Audit Committee.

3.7 The Committee will meet with Internal and External Auditors (Audit Wales) and the nominated Local Counter Fraud Specialist without the presence of officials on at least one occasion each year.

3.8 The Chair of Audit Committee shall have reasonable access to Executive Directors and other relevant senior staff.

**Sub Committees**

* 1. The Committee may, subject to the approval of the UHB Board, establish sub committees or task and finish groups to carry out on its behalf specific aspects of Committee business.

**4. MEMBERSHIP**

**Members**

* 1. A minimum of three (3) members, comprising:

Chair Independent member of the Board

Vice Chair Chosen from amongst the Independent members on the Committee

Members At least one other independent members of the Board *[one of which should be the member of the Quality and Safety Committee (or equivalent)]*

The Committee may also co-opt additional independent ‘external’ members from outside the organisation to provide specialist skills, knowledge and expertise.

**Attendees**

4.2 In attendance

Chief Executive

Director of Finance (Lead Executive)

Director of Corporate Governance

Head of Internal Audit

Local Counter Fraud Specialist

Representative of External Auditor (Audit Wales)

Other Executive Directors will attend as required by the Committee Chair

4.3 By invitation The Committee Chair may invite:

* + any other UHB officials; and/or

- any others from within or outside the organisation

* to attend all or part of a meeting to assist it with its discussions on any particular matter.

**Secretariat**

4.4 Secretary - As determined by the Director of Corporate

Governance

**Member Appointments**

4.5 The Membership of the Committee shall be determined by the Board, based on the recommendation of the UHB Chair - taking account of the balance of skills and expertise necessary to deliver the Committee’s remit and subject to any specific requirements or directions made by the Welsh Government.

4.6 Committee Members’ Terms and Conditions of appointment, (including any remuneration and reimbursement) are determined by the Board, based upon the recommendation of the UHB Chair.

**Support to Committee Members**

4.7 The Director of Corporate Governance, on behalf of the Committee Chair, shall:

* arrange the provision of advice and support to committee members on any aspect related to the conduct of their role; and
* ensure the provision of a programme of organisational development for committee members as part of the UHB’s overall OD programme developed by the Director of Workforce and Organisational Development.

**5. COMMITTEE MEETINGS**

**Quorum**

5.1 At least two members must be present to ensure the quorum of the Committee, one of whom should be the committee Chair or Vice Chair.

**Frequency of Meetings**

5.2 Meetings shall be held no less than quarterly, and otherwise as the Chair of the Committee deems necessary – consistent with the UHB annual plan of Board Business.

**Withdrawal of Individuals in Attendance**

5.3 The Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

6. RELATIONSHIP AND ACCOUNTABILITIES WITH THE BOARD AND ITS COMMITTEES/GROUPS

6.1 Although the Board has delegated authority to the Committee for the exercise of certain functions as set out within these Terms of Reference, it retains overall responsibility and accountability for ensuring the quality and safety of healthcare for its citizens through the effective governance of the organisation.

6.2 The Committee is directly accountable to the Board for its performance in exercising the functions set out in these Terms of Reference.

6.3 The Committee, through its Chair and Members, shall work closely with the Board’s other Committees, including joint (sub) Committees and groups to provide advice and assurance to the Board through the:

* joint planning and co-ordination of Board and Committee business; and
* sharing of information

in doing so, contributing to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board’s overall risk and assurance framework.

6.4 The Committee will consider the assurance provided through the work of the Board’s other committees and sub groups to meet its responsibilities for advising the Board on the adequacy of the UHB overall framework of assurance.

6.5 The Committee shall embed the UHB’s corporate standards, priorities and requirements, e.g., equality and human rights through the conduct of its business.

**7. REPORTING AND ASSURANCE ARRANGEMENTS**

7.1 The Committee Chair shall:

* report formally, regularly and on a timely basis to the Board and the Accountable Officer on the Committee’s activities. This includes verbal updates on activity and the submission of committee minutes and written reports throughout the year;
* bring to the Board and the Accountable Officer’s specific attention any significant matters under consideration by the Committee;
* ensure appropriate escalation arrangements are in place to alert the UHB Chair, Chief Executive (and Accountable Officer) or Chairs of other relevant committees of any urgent/critical matters that may affect the operation and/or reputation of the UHB.

7.2 The Committee shall provide a written, annual report to the board and the Accountable Officer on its work in support of the Annual Governance Statement, specifically commenting on the adequacy of the assurance framework, the extent to which risk management is comprehensively embedded throughout the organisation, the integration of governance arrangements and the appropriateness of self-assessment activity against relevant standards. The report will also record the results of the committee’s self-assessment and evaluation.

7.3 The Board may also require the Committee Chair to report upon the committee’s activities at public meetings or to community partners and other stakeholders, where this is considered appropriate, e.g., where the committee’s assurance role relates to a joint or shared responsibility.

7.4 The Director of Corporate Governance, on behalf of the Board, shall oversee a process of regular and rigorous self-assessment and evaluation of the Committee’s performance and operation including that of any sub committees established. In doing so, account will be taken of the requirements set out in the NHS Wales Audit Committee Handbook.

8. APPLICABILITY OF STANDING ORDERS TO COMMITTEE BUSINESS

8.1 The requirements for the conduct of business as set out in the UHB Standing Orders are equally applicable to the operation of the Committee, except in the following areas:

* quorum (set within individual Terms of Reference)
* Notifying and equipping Committee members – Committee members shall be sent an Agenda and a complete set of supporting papers at least seven (7) clear days before a formal Committee meeting (unless specified otherwise in law).
* Notifying the public and others – at least seven (7) clear days before each Committee meeting a public notice of the time and place of the meeting, and the public part of the agenda, shall be displayed on the Health Board’s website together with the papers supporting the public part of the agenda (unless specified otherwise in law).

**9. REVIEW**

9.1 These terms of reference and operating arrangements shall be reviewed annually by the Committee with reference to the Board.