

# NHS Ayrshire & Arran



<b>Meeting:</b>	<b>Ayrshire and Arran NHS Board</b>
<b>Meeting date:</b>	<b>Monday 8 June 20206</b>
<b>Title:</b>	<b>Audit and Risk Committee meeting on 19 May 2026 – Chair's report to NHS Board</b>
<b>Responsible Director:</b>	<b>David Stonehouse – Interim Director of Finance</b>
<b>Report Author:</b>	<b>Sukhomoy Das, Non-Executive Director/Committee Vice-Chair</b>

## 1. Purpose

This is presented to the Board for: Discussion.

This paper relates to: Local policy to ensure good governance practice in reporting from board committees

This aligns to the NHS Scotland quality ambitions of Safe, Effective and Person Centred. Good governance practice supports the effective delivery of services across the organisation.

## 2. Report summary

### 2.1 Situation

This report provides information to Board Members on key items discussed within the Governance Committee's remit, in order to provide assurance to the Board that those matters have been identified and are being addressed, where required.

### 2.2 Background

The Board Model Standing Orders advises that Board meeting papers will include the minutes of committee meetings which the relevant committee has approved. To ensure that there is no delay in reporting from committees this paper provides a timely update on key items from committees.

### 2.3 Assessment

Key items discussed/agreed by Committee are noted below.

- The final completed Internal Audit reports from the 2025/26 Plan were received:
  - IJB Review – Community Equipment Store (Rated – Amber – Substantial Improvement Required).

This report will be shared with the Integrated Joint Board to highlight and follow through on the actions.

- Follow up CRES Plan audit (Rated – Amber - Significant Improvement Required)

This evidenced progress since the previous report which was positive.

Further actions were raised to ensure further controls are in place over developing and tracking savings and these are to be addressed in the short term and will continue to be monitored via the Audit and Risk Committee.

- Pharmacy Stock Management (Rated – Yellow – Minor Improvement Required).

This report will be shared with the Healthcare Governance Committee for monitoring of actions.

- The Internal Audit Annual Report and Conclusion for 2025/26 was received. The Conclusion is based on work completed during the year and gave assurance that NHS Ayrshire and Arran has a framework of governance, risk management and controls that provides reasonable assurance regarding the effective and efficient achievement of objectives, except in relation to aspects of Financial Sustainability and Health and Safety. This was in line with expectations and reflects the severity of issues raised in the Non-pay Expenditure and Health & Safety audits completed during the year.
- Members received an update on the National Finance System Assurance Report – ISAE3402 covering the system which NHS AA manage on behalf of all Boards. Issuing of the final report had been delayed due to both BDO and Atos being involved in the Audit process in order to ensure a full audit is completed. A draft has been received by the Assistant Director of Finance and it is likely that a clean audit will be received in due course with only one exception highlighted which has been addressed. Once received this report will be circulated to members and agreed for sharing with all other Boards.
- An update was received on Counter Fraud Services with no material issues evident. The annual Counter Fraud Standards Self-Assessment for 2025/26 was approved for submission to Counter Fraud Services. NHS AA are now meeting 8 of the 12 Standards which is comparable with other Boards. Actions are in place to address the gaps.

## **2.4 Recommendation**

The Board is asked to be aware of and discuss the key items highlighted and receive assurance that issues are being addressed, where required.