

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 12th September 2026
Title:	Audit and Risk Committee meeting on 22 September 2026 – Chair's report to NHS Board
Responsible Director:	David Stonehouse – Interim Director of Finance
Report Author:	Jean Ford, Non-Executive Director/Committee Chair

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.

This supports the following Corporate Objective:

- Better Value – Delivering innovative and sustainable services for everyone.
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.

Internal Audit

- The committee received the Internal Audit and Follow Up actions report. The 2026/27 Internal Audit plan is on track for completion and actions are being followed up appropriately. Several longstanding actions are overdue in relation to GP Sustainability Audit from 2024/25 and a detailed update on these has been requested at next Committee.
- The Property Transaction Monitoring Internal Audit report (rated green – effective) was received. Some minor recommendations were made however the property transactions reported within the period demonstrated compliance with the mandatory requirement of the Property Transaction handbook.

Risk

- The revised version of the Strategic Risk Register was received after having been presented at the other governance committees. Some comments and suggestions were made in relation to enhancements to format however it was deemed that the new report was much improved to the previous version.
- It was noted that the risk profile appears skewed with the vast majority of risks being rated high or very high and the risk target ratings projected to only marginally change the position. This seems at variance to the levels of controls and actions in place, suggesting that it may be appropriate to revisit ratings. Some individual residual ratings within risk domains also seem high. This feedback will be provided to RARSAG for consideration.

Other Items

- The annual update on the register of Gifts, Hospitality and Interests and detail of the Corporate Governance Controlled Document Framework were received and the committee were assured by the processes in place to record and monitor activity. Further enhancements to create additional ‘central’ oversight were welcomed.
- Members considered a paper proposing a further one year extension to the contract with Azets as defined in the original contract. The contract is joint with 3 other NHS Boards and all are happy with service received to date and this coupled with the extant operating environment gives good justification for each recommending the extension to their relevant for Boards for approval.

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.