

TIAN News

April 2024



Introduction

I am delighted to welcome you to our eighth edition of TIAN News as we enter another new financial year. This edition spans a wide range of articles covering some important risk and governance issues, including:

- Brilliant, award-winning, work by ASW Assurance to develop and support NHS Counter Fraud Champions.
- A briefing produced by MIAA to support Audit Committees to get assurance over data quality. This is a critically important area, and one where the HSJ seems to regularly highlight NHS organisations losing grip – often impacting large numbers of Patients on Waiting Lists.
- Helpful new guidance from the Information Commissioner’s Office to help employers support staff experiencing Mental Health crisis.
- Plus, details of recent and upcoming events provided to help support our NHS clients to keep abreast of new developments.

Leanne Hawkes, Director of 360 Assurance and Chair of TIAN

Data Quality - Board Performance Reporting

During 2021, MIAA produced an Insight publication CQC Inspections through an Audit Committee Lens which provided information to support audit committees in reviewing their operation through the lens of the CQC’s regulatory regime. This Insight included the following key question:

- Does the audit committee receive and discuss information covering quality, operations and finance to support the committee in meeting the requirements of its Terms of Reference?

In January MIAA issued a new *“Through the Audit Committee Lens”* briefing for Audit Committees to which can be used to inform assessment against the challenge posed in the 2021 briefing.

Background:

High quality data is important to the NHS as it helps to identify trends and patterns, draw comparisons and predict future events and outcomes. Quality data underpins effective decision making, and its use can lead to improvements in patient care and patient safety.

Performance reports should provide the Board with the information and analysis necessary to carry out its role and make effective decisions, through data which enables them to understand and challenge how the organisation is performing. This not only relies upon the quality of data collected, but also the indicators that are reported and the way in which they are presented.

Audit Committee’s Role regarding Board Performance Reporting

The Audit Committee is responsible for providing assurance to the Board on the organisation’s systems and processes of internal control and should have oversight and challenge of the processes within the organisation to ensure that performance reporting meets the six key data quality domains (accuracy, completeness, consistency, timeliness, validity and uniqueness).

The following key questions and prompts are designed to help Audit Committees to collate evidence to provide assurance to the Board:

Quality of Data

- Do all indicators undergo robust validation processes before being included in the organisation's Integrated Performance Report and these processes are defined and documented?
- Where relevant, is the data being reported valid according to national definitions?
- Is the data which supports performance reporting complete, with no significant gaps, and does it contain the latest validated position?
- Is data subject to a robust sign-off process prior to reporting?
- Do appropriate sub-committees have sight of performance reports before they are presented to Board, and is discussion focussed on key achievements and critical areas of performance?
- Are the figures being reported to Board consistent with those being reported to sub-committees?
- Does the data being presented fit with what you would expect to see?
- Do relevant groups/committees and the Board dedicate time on their agenda to discuss data quality issues?

Design of Reporting

- Are the right performance metrics in place to ensure the organisation understands how it is performing against nationally set targets and the delivery of its objectives and strategy. Do metrics define:
 - Purpose, demonstrating alignment with objectives.
 - Responsibility (e.g. owner, meeting, division)
 - Frequency of reporting in line with requirements?
- Have rules for each key operating standard been developed to support identification of early warning signs and triggers for escalation?
- Does the report provide trends and cumulative comparative data? How does performance look compared to the historic picture?
- Can performance be analysed in comparison to data from similar organisations? Is benchmarking utilised as a driver to identify best practice and means of performance improvement?
- Do performance reports make use of 'Kite Marks' to indicate the level of confidence in the data quality of each indicator, and is this defined on at least an annual basis?

If you have any queries or feedback on this briefing, please contact: Sarah Dowbekin, Head of R&D, QA & Professional Standards at MIAA. (M: 07788 308 155; E: sarah.dowbekin@miaa.nhs.uk)

New guidance on sharing information relating to mental health emergencies at work

The Information Commissioner's Office (ICO) has just published [guidance](#) aimed at giving employers greater certainty regarding sharing information about their workers in the event of a mental health emergency. It provides advice on when and how it is appropriate to share workers' information in such an emergency.

The NHS employs over 1 million people, many of whom work in highly stressful and potentially traumatic roles, and it is important organisations take steps to safeguard both their mental and physical safety. Data protection law allows organisations to share personal information in an urgent

or emergency situation, including to help them prevent loss of life or serious physical, emotional or mental harm. It is good practice to plan ahead, as this helps support more timely and better informed decisions. The guidance therefore provides advice on how to think in advance about sharing workers' information in a mental health emergency.

Guidance Summary:

The ICO guidance answers the following questions:

- What is a mental health emergency?
- Is mental health information different to health information under data protection law?
- Can we share workers' information in a mental health emergency?
- How can we plan for information sharing in a mental health emergency?
- What lawful basis and special category condition is most likely to apply?

As part of transparency obligations, employers must let workers know that they may share their information in a health emergency – including a mental health emergency. Organisations must ensure that workers are aware of any policy for sharing personal information in a health emergency, and that it is available to them. This information must be provided to your existing workers as soon as possible; and to new workers within one month of obtaining their information. With a new worker, this could be done when asking them to identify an emergency contact.

As part of general processes on the everyday handling of workers' health information, all employers should carry out a data protection impact assessment (DPIA). Part of that process should include the sharing of information in a mental health emergency. (If an organisation has not carried out a DPIA in advance however, then this does not stop them from sharing information in a mental health emergency.)

Employers should also take the following steps:

- Develop a policy on sharing personal information in a mental health emergency. Think about the types of information you may need to share, who you may need to share it with and how you will share it securely.
- Ensure that workers are aware of the policy and make it available to them.
- Train staff on how to handle personal information in a mental health emergency situation. If you have designated people who will respond in such situations, ensure the rest of your staff know who they are and how to contact them. This could be included within broader training and awareness raising you may have in place around mental health.
- Ensure workers keep details of their next of kin and emergency/mental health emergency contacts on file up to date through regular review. Consider giving your workers the opportunity to identify separate emergency contacts for general emergencies and mental health emergencies on an emergency contact form.

Audit Committee Action: The whole area of mental health and staff wellbeing has received greater recognition and increasing importance over recent years. Audit Committees should consider what assurances they receive on this area, and the effectiveness of policies and arrangements put in place.

Please contact your local TIAN audit lead to discuss how internal audit can provide assurance over how complete and embedded your organisation's arrangements are in this area.

Supporting Counter Fraud Champions

Background

The concept of a Counter Fraud Champion (CFC) has been in use within central Government since 2011 and was launched within all NHS bodies in January 2021. The NHS Counter Fraud Authority states that the role and duties of a CFC include the following:

- Providing a senior strategic voice within the organisation to champion the counter fraud agenda and to enable and support the counter fraud programme of work.
- Promoting and embedding an awareness of fraud, bribery, and corruption across the organisation at a strategic level.
- Enabling, facilitating, and supporting fraud prevention work at a senior strategic level.
- Removing any blocks to the progress of counter fraud work and driving forward a counter fraud culture across the organisation.
- Providing additional fraud fighting capability at a senior/strategic level which can support the Counter Fraud Functional Lead and the LCFS(s) in delivering their counter fraud work (extracted from <https://cfa.nhs.uk/fraud-prevention/NHS-counter-fraud-champion-31/7/23>).

The CFC should not be someone's entire role. It is intended to be an additional responsibility to their main job, with the stipulation that the CFC must be an employee of the organisation and should be in a senior and influential position within the organisation i.e. Deputy Director of Finance, Director of Risk, HR director, Operations Lead, a senior governance lead. However, there has been much debate about the nature of the CFC role, and which are the most appropriate job roles within an NHS organisation for the role to be linked to.

Development of the CFC Role

ASW Assurance established a CFC network and hosted virtual meetings to give a forum for CFC's to share learning, good practice and mutual support. The network has grown and been a great success over the last couple of years. A small working group from that network, has have achieved better clarity about the role. The original vision for the CFC role created two distinct strands:

- Raising fraud awareness, including a potential additional point of contact for staff to find out more about fraud, raise fraud awareness and be a point of contact for staff who may prefer to speak to someone other than their Local Counter Fraud Specialist (LCFS) i.e. traditional LCFS "inform and involve" activity.
- Being a "strategic voice" of Counter Fraud at Board level.

It was quickly identified that there is duplication between the CFC role and that of an organisation's Chief Finance Officer (CFO) and LCFS. It was also identified that someone likely to be in a position of influence at Board level, might not be someone staff find easy to discuss matters with, in place of their LCFS (and vice versa).

ASW carried out a survey across the CFC network in 2022, and took the approach of listing a set of activities in line with the original vision of the role, and sought respondents' assessment of the value of each of these activities. This was further refined within a working party, drawn from the network and with NHS Counter Fraud Authority (NHSCFA) input, in July 2023. From the perspective of the NHSCFA, it is important that a suitable individual is nominated and that they are engaged with the counter fraud work at the organisation. Although there is no stipulation about what the CFC should do, there is a clear steer that the role is bespoke to each organisation. The level of involvement needed of the CFC appears to be inversely proportional to the level of (positive) engagement between the LCFS and Audit Committee/CFO.

Findings from the July 2023 meeting are summarised below. A key outcome from this meeting, was that the CFC role should not be prescriptive, and the role of the CFC should be tailored to best fit the needs of the individual organisation:

Suggested Activity	July 2023 Meeting View
Input into Counter Fraud newsletters (e.g. articles, contact details, commentary on newsletter content).	Not generally appropriate.
Provide Counter Fraud Champion articles within your organisation's other newsletters.	Not generally appropriate.
Counter Fraud Champion presence on your organisation's public website.	Not generally appropriate.
Counter Fraud Champion presence on your organisation's intranet.	Not generally appropriate.
Global emails within your organisation introducing and explaining the Counter Fraud Champion role.	Not generally appropriate.
Participate in Fraud Awareness presentations/sessions alongside the Local Counter Fraud Specialist.	Not generally appropriate.
Participate at Fraud Awareness stands alongside the Local Counter Fraud Specialist.	Not generally appropriate.
Provide quotes for use in advertising Fraud Awareness events.	Not generally appropriate.
Suggested Activity	July 2023 Meeting View
Include reference to the Counter Fraud Champion and their role in locally produced leaflets and posters etc.	Not generally appropriate.
Fraud "spokesperson" for media enquiries - Provide an official comment on behalf of the organisation.	Inappropriate – all communications of this nature require Comms team input.
Gaining an understanding of the Audit Committee/Board's view on counter fraud work to share with the LCFS.	Appropriate, especially if there appears to be a disconnect between the LCFS/NHSCFA and the CFO and/or Board.
Engaging at Audit Committee and Board level regarding counter fraud work.	By exception only, not appropriate where the Audit Committee is well engaged with its Counter Fraud provider.
Specific Counter Fraud Champion slot at Audit Committee and/or Board meetings.	By exception only, not appropriate where the Audit Committee is well engaged with its Counter Fraud provider.
Would you support a change of Terms of Reference for Audit Committee to encourage and include Counter Fraud Champion participation?	By exception only, not appropriate where the Audit Committee is well engaged with its Counter Fraud provider.
Counter Fraud Champion involvement in NHSCFA engagement exercises at the NHS organisation.	This would be helpful.
Counter Fraud Champion inclusion in meetings between the Director of Finance/Chief Financial Officer and the LCFS.	By exception only, not appropriate where there is good engagement between DoF/CFO and LCFS.
Counter Fraud Champion inclusion in developing Counter Fraud work plans for the NHS organisation.	Plans should be clearly risk based and should not require CFC intervention.
Counter Fraud Champion involvement in the completion of the annual Counter Fraud Functional Standard Return.	Value is limited and should take the form of whether the CFC is satisfied but would not expect to be involved in completing the return.
Working with the LCFS to identify and record fraud related risks.	There should be no need for this where a comprehensive fraud risk assessment is in place.
Working with the LCFS to resolve weaknesses in Trust systems.	CFC should only be involved if there is a lack of traction to acknowledge the weakness(es) and/or implement recommendations.

Summary

From our research, it was clear that the CFC role should not be based on raising the profile of Counter Fraud, it is more focussed on the strategic element of Counter Fraud work. Even then, in a mature and "pro-Counter Fraud" environment where there is good engagement between the LCFS and CFO/Board, there should be very little required of the CFC. It was noted that, as personnel change, the nature and extent of the CFC input may also change.

The value of the CFC primarily lies in being an effective conduit between the LCFS and most senior levels of the organisation and may act as an enabler in situations where the LCFS feels that their professional view is not gaining traction with senior figures at the organisation and/or those senior figures have concerns about the Counter Fraud service being provided.

If you would like to find out more about the Counter Fraud Champion's Network, or join a future meeting, then please contact Gareth Cottrell, Counter Fraud Manager at ASW Assurance (gareth.cottrell@nhs.net)

Consultant Job Planning

MIAA recently issued a checklist on [Consultant Job Planning](#) designed to support organisations in providing assurance on Consultant Job Planning systems and processes in line with best practice guidance previously issued by NHS Improvement.

Background/Context:

The need for effective and efficient use of consultants' time and resources is critical in the current demanding environment within the NHS. Job planning has therefore become essential for organisations to plan activities and review performance, maximising results and the resources available. In addition, it offers consultants clarity and an effective tool to plan professional development.

Job Planning was outlined in Schedule 3 of the Terms and Conditions – Consultants' Contract (England, 2003) as part of the contractual obligations for consultants and employers. It sets out the requirements that in 2011 the British Medical Association (BMA), along with NHS Employers, detailed in A Guide to Consultant Job Planning. BMA's guide expands on best practice standards for effective job planning, advocating for a collaborative approach. Job Planning should be:

- Undertaken in a spirit of collaboration and cooperation
- Completed in good time
- Reflective of the professionalism of being a doctor
- Focused on measurable outcomes that benefit patients
- Consistent with the objectives of the NHS, the organisation, teams and individuals
- Transparent, fair and honest
- Flexible and responsive to changing service needs during each job plan year
- Fully agreed and not imposed
- Focused on enhancing outcomes for patients whilst maintaining service efficiency

Best practice standards were reviewed and issued by NHS Improvement in July 2017, Consultant Job Planning: A Best Practice Guide, highlighting electronic systems to capture job plans, the monitoring arrangements of consistency committees and the importance of annual reviews of job plans against planned activities.

The Checklist:

The guidance produced by MIAA is designed to support organisations in providing assurance on Consultant Job Planning systems and processes and mirrors the best practice guidance. The briefing provides 34 key challenge questions across each of the core areas:

- Policies and procedures
- Approval of Job Plans
- Electronic Systems
- Job Plans
- Monitoring & Reporting

The briefing can be used to undertake a self-assessment, however please contact your local TIAN audit provider if you would like independent assurance over this area. If you have any specific queries or feedback on the guide then please contact: Sarah Dowbekin, Head of R&D, QA & Professional Standards at MIAA. (M: 07788 308 155; E: sarah.dowbekin@miaa.nhs.uk)

Events Round Up

TIAN members organise and facilitate a number of Groups and Forums across the country to support and develop NHS governance. e.g. Regional Audit Committee Chair meetings. A wide range of other education, training and networking events are also run, with many of these sessions now held virtually and being accessible to all TIAN member's NHS clients.

Upcoming Events:

April 18, 2024 - Outlook for the Public Sector - What is the outlook for health & social care in an election year? Hear from our panel of experts, including Matthew Taylor, CEO, NHS Confed & Sarah Woolnough, CEO Kings Fund as they analyse current economic challenges and look at the opportunities ahead. [Book here.](#) More [upcoming events](#) from the North West Collaborative Partnership.

June 13, 2024 - Hearing the Staff Voice. This half-day virtual event will focus on topics related to hearing the staff voice. The session is aimed at Board members, and particularly those who sit on People Committees.

September 12, 2024 - Financial Planning at System Level. This half-day virtual event will focus on topics related to financial planning at a system level. The session is aimed at Board members, and particularly those who sit on Finance Committees.

Details of planned and past events organised by Audit Yorkshire and 360 Assurance are available at <https://www.360assurance.co.uk/events/> and <https://www.audit-yorkshire.nhs.uk/events/archive-events/>. These include slides from a recent half-day session on “Hearing the Patient Voice” held on 11th March aimed at Board members (particularly those who sit on Quality Committees). Presentations covered topics including: expectations around patient experience, and involvement and engagement from Internal Audit and the CQC, plus Case Studies from different NHS organisations, including PENNA 2023 overall award winners Walsall Healthcare.

Watch Back:

You can watch back recordings of MIAA NW Collaborative Masterclasses or read about all the previous sessions by visiting the [North West Collaborative YouTube channel](#). This includes a recording of their latest webinar on 23rd of February 2024 which covered “*Trauma Informed Leadership*”. This webinar covered what trauma is and how it can be experienced in many different ways and from very diverse perspectives. Sessions included how to develop a practical toolkit to help prepare, protect and care for yourself as a leader, and what compassionate leadership means in practice.

And Finally..... 2024 Public Sector Counter Fraud Award Winners!

Recognising their great work developing and supporting Counter Fraud Champions, ASW Assurance were delighted to pick up the win for “Outstanding NHS Initiative” recently at the national Public Sector Counter Fraud Awards held in London at the end of February.



Gareth Cottrell, Counter Fraud Manager, ASW Assurance, winning the award for **Development of the Counter Fraud Champion role in the NHS**

WINNER: Outstanding NHS Initiative 2024

This award is given for exemplifying innovation, dedication, and effectiveness in tackling fraud-related challenges within the NHS, and the judges summary [citation](#) stated:

Gareth, the Counter Fraud Manager for ASW Assurance (who covers most NHS organisations in Devon, Cornwall and Avon), has done ground-breaking work in developing the Counter Fraud Champion role within the NHS, including his launch of the NHS Counter Fraud Champions Network. Originally intended for the South West region it quickly expanded to other areas as well as representatives from Local Authorities. The initiative has truly taken the value of the Counter Fraud Champion role beyond the requirement of the Government Functional Standard G05: Counter Fraud and has greatly assisted in facing the challenges this presents. Gareth's leadership and innovative approach have facilitated collaboration across the public sector and translated government standards into tangible benefits for NHS bodies.

About Us:

TIAN is the collaborative network of NHS based audit and assurance providers – see www.tian.org.uk for further details. Together our members deliver assurance services to almost half of all NHS bodies across the country, as well as helping to support a range of other clients across the wider public sector. The member organisations comprising TIAN are:



Get in touch: To find out more, or if you have feedback on any areas covered in this edition, please contact: **Mike Townsend, Managing Director of Barts Assurance | M: 07523 933348 | E: michael.townsend@nhs.net | www.bartsassurance.net | [@bartsassurance](https://www.linkedin.com/company/bartsassurance)**