

**Audit Committee**  
**Part 1 meeting**  
**Held on 28 May 2025**  
**1030-1230hrs**

*Via MS Teams*

[Chair: Cynthia Conquest, Non-executive Director]

**MINUTES**

<b>Present</b>		
C Conquest (Chair)	CC	Non-executive Director
D Jones	DJ	Non-executive Director
D Leacock	DL	Non-executive Director
<b>In attendance</b>		
S Brown	SB	Head of Digital
A Colling	AC	Executive Assistant ( <i>minutes</i> )
M Evans	ME	BDO, Local Counter Fraud
A Hadjirousos	AH	BDO, Internal Auditors
S Harrison	SH	Chief Finance Officer (Interim)
K Mensa-Bonsu	KMB	Associate Director of Corporate Governance
H McEnroe	HMc	Chief Operating Officer
E Midlane	EM	Chief Executive
O Monkhouse	OM	Director of Workforce & Organisation Dev ( <i>to 11am</i> )
G Robert	GR	Non-executive Director (for item 6.1)
P Saini	PS	BDO, Internal Auditors
M Screaton	MS	Chief Nurse
I Smith	IS	Medical Director
M Twyford	MT	KPMG, External Auditors
A Winter	AW	BDO, Internal Auditors
<b>Apologies</b>		
V Bush	VB	Public Governor (Observer)
T Glenn	TG	Deputy CEO and Director for Strategy & Innovation
E Larcombe	EL	KPMG External Auditors
A Mason-Bell	AMB	BDO, Internal Auditors
A Nyama	AN	Deputy Chief Finance Officer (Interim)
H Perkins	HP	Public Governor (Observer)
A Raynes	AR	Director of Digital/CIO
J Shortall	JS	BDO, Local Counter Fraud

The minutes are noted as per order of discussion, which may differ from Agenda order.

Agenda Item		Action by Whom	Date by When
<b>1</b>	<b>WELCOME, APOLOGIES AND OPENING REMARKS</b>		
25/73	The Chair opened the meeting, and apologies were noted as above		

[illegible]

Agenda Item		Action by Whom	Date by When
1054hrs GR left	<p>from this, where this emphasises the importance of recovery plan and response plans.</p> <p>GR agreed, noting the importance of the Trust's revised Business Continuity Plan (BCP) to be finalised shortly. He also referred to a recent desk top exercise following a crisis scenario which has identified actions going forward. This is a further piece of assurance to PC.</p> <p>CC thanked GR for his presentation. It was noted that Amanda Fadero, NED and Chair of Workforce Committee is scheduled to present to the July Audit Committee.</p> <p><b>Noted:</b> The Audit Committee noted the assurance update from the Chair of Performance Committee.</p>		
<b>6.1</b>	<b>Chair's Reports – Governance Assurance</b>		
25/76	<p><b>Received:</b> Chair's reports from the Committees below, which have been submitted to Board of Directors'/Trustee Board meetings, since those last reported to the Audit Committee meeting on 13 March 2025:</p> <p>6.2a Quality &amp; Risk Committee 6.2b Performance Committee 6.2c Strategic Projects Committee 6.2d Charitable Funds Committee 6.2e Workforce Committee</p> <p><b>Discussed:</b> The report was taken as read with no comments.</p> <p><b>Noted:</b> The Audit Committee noted the Governance Assurance Overview.</p>		
<b>3</b>	<b>MINUTES OF MEETINGS held on 13 March 2025</b>		
25/77	<p><b>Approved:</b> The Audit Committee approved the Minutes of the Part 1 meeting held on 13 March 2025 and authorised these for signature by the Chair as a true record.</p> <p>The Part 2 minutes were circulated separately with no comments, the Chair therefore approved these.</p>	Chair	28.05.25
<b>4</b>	<b>ACTION CHECKLIST</b>		
25/78	The Committee reviewed the Action Checklist and updates were noted.		
<b>5.1</b>	<b>BOARD ASSURANCE FRAMEWORK (BAF)</b>		
25/79	<p><b>Received:</b> Assurance around the operation of the Board Assurance Framework (BAF) since the last report in March 2025.</p> <p><b>Reported:</b> KMB BAF has been discussed at Board of Directors meeting and other Board sub-committees.</p> <p><b>Discussed:</b> CC referred to Appendix 2 on Cyber Security – where the report was not brought today as there is no Part 2 confidential meeting scheduled. She also noted that Cyber Security is discussed in detail at PC and did not want to duplicate this discussion.</p>		

Agenda Item		Action by Whom	Date by When
1108hrs HMc left	<p>Overall, CC noted positive improvements; today the meeting will concentrate on when those risks rated 20 will reduce in rating.</p> <p><u>Waiting List (WL) risk</u> (HMc) HMc explained the detail of some improvement in key measures on access standards on WL. The current risk rating will remain until three core milestones are achieved (the risk rating will be aligned as these milestones progress). (1) 5% national recovery standard, (2) 10% stretch set by Executive Directors and (3) 92% national delivery of RTT standard,</p> <p>This recovery will take 13-18 months. HMc agreed as part of work going through Access Board, that he will bring back milestone trajectories; the detail will be taken at PC with assurance then reported to this committee. Currently we are seeing month by month sustainable improvement.</p> <p><u>Cyber Security</u> (SB) Actions taken since March this year were noted. SB gave an overview of actions completed along with new actions being added. He referred to the BCP and work with EPRR (Emergency Preparedness Resilience &amp; Response) team. He noted work on Data Security Protection Toolkit (DSPT) to link in with this. He is keen to ensure measures and metrics are in place to manage cyber risk and gave some examples of these measures.</p> <p>DJ asked how do we know that those actions have made a meaningful difference to the risk position, exposure and profile? SB referred to internal and external audits. He referred to completed actions which gives assurance of work done.</p> <p>CC asked when will this risk change from a 20 rating. SB would need to confirm this with AR.</p> <p>DJ asked how do we know that our investments/actions have put us in a better position. SB noted recommendations given via the internal audit report and completion of this, gives reassurance towards ongoing improvement. He also explained that learnings from the simulation exercise helps improve the position.</p> <p>DJ specifically referred to password changes – do we think there is a way to set this process in policy? SB agreed this is a good suggestion and would need to go through governance channels to put in place. He will take this action away to review.</p>	SB	17.07.25
	<p><u>Industrial Action</u> (OM) This risk relates to industrial relations re. pay landscape. This is mainly set by external factors, which are not favourable currently. There is a ballot underway on resident doctors on pay and RCN and Unison are also in discussions on pay.</p> <p>The risk still sits at the same level ; the Trust is putting in place mitigating actions where possible. This will be further scrutinised at Workforce Committee on the control of this risk vs external sources. CC felt it would be useful for Workforce Committee to discuss this risk and asked for OM to escalate for discussion at tomorrow's meeting.</p>	OM	29.05.25 WF Cttee

Agenda Item		Action by Whom	Date by When
	<p>CC referred to the BAF tracker, where five assurances are inadequate. She would like to see detailed text included in the report on those inadequate assurances.</p> <p>CC referred to Risk 3433 – CT backlog : ‘gaps in assurance’ is marked as none, but the level of assurance been marked as ‘inadequate’. Could this be reviewed and updated to PC tomorrow.</p> <p><b>Noted:</b> The Audit Committee noted the Board Assurance Framework.</p>	<p>KMB</p> <p>HMc</p>	<p>17.07.25</p> <p>29.05.25 PC</p>
5.2	<b>BOARD ASSURANCE MAP</b>		
25/80	<p><b>Received:</b> Board Assurance Map on risks.</p> <p><b>Reported:</b> KMB There are gaps in places with work to do, and work to align with the new BAF being developed.</p> <p><b>Discussed:</b> DL referred to Risk 3449 partnership working, requesting that when the BAF is revised, could we look at the level of assurance on this. This risk is noted to cover the biomedical campus and other partners, who all need to be included, but not all are currently included.</p> <p>CC noted the gaps which seems to be dependent on review of BAF. Although the assurance map is not due until March 2026, she suggested bringing this forward to the January 2026 meeting following review of the BAF. AC to adjust on the Forward Planner.</p> <p><b>Noted:</b> The Audit Committee noted the Board Assurance Map.</p>	<p>KMB</p> <p>AC</p>	<p>17.07.25</p> <p>17.07.25</p>
7	<b>LOCAL COUNTER FRAUD – BDO</b>		
7.1	<b>Progress Report</b>		
25/81	<p><b>Received:</b> Counter Fraud Progress Report to May 2025</p> <p><b>Reported:</b> ME highlighted:</p> <ul style="list-style-type: none"> <li>• The report covers the period from mid-February to the end of March.</li> <li>• It includes a link to the national report on landscape reporting on fraud over £500k from December 2023 to November 2024.</li> <li>• There is one national alert shared regarding a bank mandate fraud attempt.</li> <li>• The case listed on Page 35 is one that had been reported previously to the Audit Committee but the close off should have been included on a previous report. He explained that this related to an employee overwriting a job application for a relative. However, this was resolved via the Human Resources team with a verbal warning as there was no financial loss to the Trust</li> <li>• All work has been completed in line with the workplan and any variations discussed with SH.</li> </ul> <p><b>Discussed:</b> The report was taken as read.</p> <p><b>Noted:</b> The Audit Committee noted the Local Counter Fraud Progress Report.</p>		

Agenda Item		Action by Whom	Date by When
<b>7.2</b>	<b>Counter Fraud Functional Standard Return 2024/25</b>		
25/82	<p><b>Received:</b> Draft Counter Fraud Functional Standard Return (CFFSR) 2024/25</p> <p><b>Reported:</b> ME Received an overall green rating. This will be noted in the BDO annual report. There is one variation on page 43 to the draft submitted to the March 2025 meeting. This refers to a change in the case management administrative process and relates to the case mentioned under the progress report. He explained this showed a discrepancy between the CLUE system and where the incident was reported. This has now been corrected. Two areas in the CFFSR have an amber rating as reported to the March meeting.</p> <ol style="list-style-type: none"> <li>1. Reporting identified loss – this is where the Trust has agreed that where it is known that the fraud investigation was due to a malicious allegation this would not be reported on CLUE as it disadvantages staff where there is no basis for the claim still being stigmatised because the NHSCFA will hold that data on the system. This is still being discussed with NHSCFA with us and other Trusts.</li> <li>2. Access to training. Previously flagged that this would likely be amber. For green to be attained the Trust needs to evidence that 90% of the workforce have undertaken Counter Fraud training in year. It is felt that this could only be achieved by making the training mandatory. Again, as a Trust we have agreed not to do so. We are in line with other Trusts.</li> </ol> <p><b>Discussed:</b> CC referred to the change referred to above since March draft, does this need re-signing off? ME explained that this related to an administrative technicality with has been updated, thus does not need to be re-signed off.</p> <p><b>Approved:</b> The Audit Committee approved the draft Counter Fraud Functional Standard Return 2024/25.</p>		
<b>8</b>	<b>INTERNAL AUDIT – BDO</b>		
<b>8.1</b>	<b>Progress Report</b>		
25/83	<p>AR introduced AH, Senior IT Audit Manager, who will present Item 8.5 on Data Security Protection Toolkit (DSPT)</p> <p><b>Received:</b> Internal Audit Progress report. <b>Reported:</b> AW highlighted:</p> <ul style="list-style-type: none"> <li>• This is the conclusion of 2024/25 internal audit plan.</li> <li>• Final Head of Internal Audit Opinion is included and gives an overall Moderate Assurance.</li> <li>• Q1 2025/26 reviews are underway, and work is profiled across the year to ensure regular reports to the committee.</li> <li>• Attached, in the reference pack for information, is the NHS Green Plan Guidance issued in February 2025; where BDO has reflected and reported.</li> <li>• Sector updates. The KPI indicators are being reset for 2025/26. 2024/25 is included in the annual report.</li> </ul>		

Agenda Item		Action by Whom	Date by When
	<p><b>Discussed:</b> The report was taken as read.</p> <p><b>Noted:</b> The Audit Committee noted the Internal Audit Progress Report.</p>		
<b>8.2</b>	<b>Internal Audit Follow Up of Recommendations Report</b>		
25/84	<p><b>Received:</b> Update on Internal Audit Recommendations</p> <p><b>Reported:</b> AW Status since the last meeting: 7 recommendations are complete, 8 are in progress and 6 are overdue, giving an implementation rate of 84%. There is good engagement from the Trust, and BDO have assurance of completion by the next Committee. Overdue items are consistent with previous reporting, noting that some of these were overdue at the March meeting with anticipated completion dates then extended further, such as Private Patients.</p> <p><b>Discussed:</b> DL noted the update. Referring to Private Patients, she is not assured that the September 2025 deadline will be achieved, as its reliant on the new Private Patient Manager arriving who does not start until August. Can there be a realistic timeframe on when the action can be closed.</p> <p>There are many overdue actions expected for July 2025, is this realistic or if not, can realistic dates be added in. CC agreed on this point as dates do keep being pushed from one Committee to the next. She would like better assurance on this. EM will pick up with Executive Directors and apologised for the slip on dates.</p> <p>MS added that it would be useful to have an action owner rather than the action assigned to a group where it can become lost. CC noted that this had been discussed previously and agreed to have the Executive Director as the lead. She requested BDO add into the recommendation the named Executive lead.</p> <p>CC referred to 'in progress' actions, (agency expenditure and temporary staffing) which are all complete except for 1c (marked as 'not yet due') – she feels this was harsh to mark 'under progress' when it should be 'not yet due'. AW understood the comment noting that it is difficult to split out but will consider reviewing this process for 2025/26 reporting.</p> <p>CC referred to the recommendations on CIP which is awaiting an update. CC is concerned about CIP for 2025/26 and worried that staff are not responding on this. SH will review this explaining that the CIP PMO lead has been away on leave. These are corporate related schemes; SH and HMc are picking this up with the team. CC – asked for review of action date on this.</p> <p>EM referred to an outstanding action from 2023/24 on EDI and asked if there was an update to close this off. OM explained that this is still in the workplan and not straightforward to close off. OM explained some of the work undertaken on this noting that the objective is slightly different to that written.</p> <p>CC noted that the problem was getting technical fixes which were outside of the control of the Trust.</p>	<p>HMc</p> <p>Execs</p> <p>BDO</p> <p>BDO</p> <p>HMc/SH</p>	<p>17.07.25</p> <p>17.07.25</p> <p>17.07.25</p> <p>17.07.25</p> <p>17.07.25</p>

Agenda Item		Action by Whom	Date by When
	<b>Noted:</b> The Audit Committee noted the update on Internal Audit Recommendations.		
<b>8.3</b>	<b>Final Annual Audit Report 2024/25</b>		
25/85	<p><b>Received:</b> Final Annual Audit Report as at May 2025 <b>Reported:</b> AW</p> <p>BDO have completed a total of eight reviews (six assurance audits and two advisory reviews). Overall, the Head of Internal Audit will remain at a Moderate assurance considering the final two reviews.</p> <p><b>Discussion:</b> The item was taken as read.</p> <p><b>Noted:</b> The Audit Committee noted the Final Annual Audit Report.</p>		
<b>8.4</b>	<b>Electronic Patient Record (EPR) Advisory Review</b>		
25/86	<p><b>Received:</b> Electronic Patient Record (EPR) system advisory review May 2025.</p> <p><b>Reported:</b> AW The report was taken as read. This report provides a high-level advisory review on governance, risk management and budget approvals established and planned to date on the EPR solution and project. This report does not offer an opinion but gives insight and oversight on the assurance of the EPR process. This resulted in a positive outcome showing areas of strength, clear monitoring and reporting. Areas of improvement were also noted which the Trust were already aware of and actioning.</p> <p><b>Discussed:</b> CC was concerned to read the statement 'inconsistent engagement with and understanding of the EPR programme by the Executive Directors', followed by suggested mitigations for this. EM was also unclear on this statement. For context, AW explained that the report was completed in January 2025, where progress has been made since then.</p> <p>CC referred to costs where it was noted that there will be unanticipated costs. SH advised that costs are being reviewed currently on 'worst case/best case/most likely case' scenario. SH has discussed this with BDO.</p> <p>CC expressed thanks to AMB for the excellent work and engagement on this review.</p> <p>DL added it was an excellent paper showing good governance, observations and learning continues.</p> <p><b>Noted:</b> The Audit Committee noted the EPR advisory review.</p>		
<b>8.5</b>	<b>Internal Audit Report – final: Data Security Protection Toolkit (DSPT)</b>		
25/87	<p><b>Received:</b> Report as above - May 2025 <b>Reported:</b> AH</p>		



Agenda Item		Action by Whom	Date by When
	<ul style="list-style-type: none"> <li>• The DSPT is now more aligned to the cyber framework.</li> <li>• He explained the NHSE methodology to which the Trust measures are aligned ; further work was identified and addressed.</li> <li>• He explained how the report is compiled and the summary of work with two findings raised.</li> <li>• A key change being seen is the NHSE reference to high risk and how these impacts on reporting outcomes, which is under NHSE's control.</li> <li>• The BDO and Trust assessment aligned well.</li> <li>• Some findings were identified and highlighted to the Committee.</li> <li>• SB confirmed actions have been discussed and are being picked up.</li> </ul> <p><b>Discussed:</b> SH appreciated seeing the detail setting out the change in NHSE process. Where we have partially achieved, are these common themes in the sector or unique to RPH? Is a high risk rating being seen overall across BDO clients or is RPH an outlier?</p> <p>AH advised that many reports are coming out as high risk, due to the change in NHSE measures. A 'partially achieved' outcome is also commonly seen, and the Trust is not an outlier. AW gave some further information regarding the high risk ratings and how this is measured under the NHSE controls. CC was aware of the NHSE rating system and asked how can we now get to 'fully achieved' and what would be a realistic date for this? DL also queried how do we get the granular information to enable the Trust to achieve a good rating?</p> <p>EM advised that this has been discussed at Executive committee. HMc noted that the Trust EPRR lead is working on the key supplier list to bring this together, but we do not have a definite timeline for this – it is likely to be months, and this timeline will be reported back to the Committee at some point.</p> <p>CC felt that it would be useful for the Audit Committee to understand how will 'partially achieved' status move to 'achieved' status before next year; or if not, declare that this is not possible. She requested a clear update to the January 2026 meeting on what can be achieved and the barriers against not achieving.</p> <p>AH gave a further explanation of NHSE 'partially achieved' status. AW added that it is not known whether NHSE will move these status markers.</p> <p>CC noted that as this covers cyber risk, we should aim to 'achieve ' and have action plans accordingly. If not achievable, then this should be made clear.</p> <p>SB gave an update on the DSPT actions and timescale for actions to move from 'partially achieved' to 'fully achieved'.</p> <p><b>Noted:</b> The Audit Committee noted the Internal Audit Report – final: Data Security Protection Toolkit (DSPT)</p>	Execs/ EM	22.01.26
8.6	<b>NHS Green Plan Guidance – April 2025 Briefing</b>		
25/88	<b>Received:</b> NHS Green Plan Guidance – 2025 updates (BDO key takeaways and key questions).		

Agenda Item		Action by Whom	Date by When
	<p><b>Reported:</b> AW The report was included in the Reference Pack for information and was taken as read and has been shared with RPH management.</p> <p><b>Discussed:</b> CC referred to the Trust's Green Plan and asked how visible is this? SH advised that a six-monthly update goes to Performance Committee, with a governance process including Sustainability Board which is chaired by EM. This is the main route to update the Green Plan, and the Trust is keen to develop this further. Currently the Green Plan Strategy is under refresh and will come to Performance Committee in June 2025.</p> <p><b>Noted:</b> The Audit Committee noted the NHS Green Plan Guidance Briefing.</p>		
<b>9</b>	<b>EXTERNAL AUDIT</b>		
<b>9.1</b>	<b>Draft ISA 260 (including draft Letter of Representation and draft Formal Independence Letter)</b>		
25/89	<p><b>Received:</b> Verbal update <b>Reported:</b> MT</p> <ul style="list-style-type: none"> <li>• The valuation is in hand and on track</li> <li>• MT explained the detailed work on journals/risk sampling which is in its final process.</li> <li>• There is a key piece of work on accruals which is in hand.</li> <li>• Other audit work continues and is finalised work on payroll and income.</li> <li>• The 2<sup>nd</sup> round of agreement of balances has come through and this is being worked through.</li> <li>• Cash profile is complete pending one confirmation.</li> <li>• PFI work is 80% complete, with the aim to finish today.</li> </ul> <p>He suggested that we are in a good position with work and on course for the end of June submission date.</p> <p><b>Discussed:</b> No items were raised.</p> <p><b>Noted:</b> The Audit Committee noted the update from KPMG.</p>		
<b>10</b>	<b>WAIVER TO STANDING FINANCIAL INSTRUCTIONS</b>		
	Deferred to July meeting		
<b>11</b>	<b>BAD DEBT WRITE OFF</b>		
25/90	<p><b>Received:</b> Report to the Committee on the debts written off in the financial year 2024/25.</p> <p><b>Reported:</b> SH The report was taken as read</p> <p><b>Discussed:</b> No items were raised.</p> <p><b>Noted:</b> The Audit Committee noted the update on Bad Debt Write Off.</p>		

Agenda Item		Action by Whom	Date by When
<b>12</b>	<b>LOSSES AND SPECIAL PAYMENTS</b>		
25/91	<p><b>Received:</b> Report to the Committee of the losses and special payments made for the period 1st April 2024 to 31st March 2025 in line with the Trust's Standing Financial Instructions.</p> <p><b>Reported: SH</b> The report shows a wrap-up of the position at year-end 2024/25. SH highlighted at item 4, where there are two additional write-offs re. inventory stock (non-capital items) which is referred to this Committee for oversight. This will be addressed via clearer Standing Financial Instructions (SFIs) for 2025/26. A root cause analysis will be undertaken with the procurement team, cardiology and theatre teams and head of supply chain, to improve the process.</p> <p><b>Discussed:</b> CC hoped that with lessons learned, these instances will decrease.</p> <p><b>Approved:</b> The Audit Committee noted the update on Losses and Special Payments.</p>		
<b>13</b>	<b>ANNUAL REPORT AND ACCOUNTS 2024/25</b>		
<b>13.1</b>	<b>Review of Annual Accounts</b>		
25/92	<p><b>Received:</b> Draft Annual Accounts 2024/25 <b>Reported:</b> SH The first draft is here for comments. There is a separate Audit Committee NED session in June to run through in detail. Any comments please send through to SH.</p> <p>CC requested that the reports are issued as 'Word' documents to allow revisions by tracked changes.</p> <p><b>Noted:</b> The Audit Committee noted the draft Annual Report &amp; Accounts.</p>	AC	28.05.25
<b>13.2</b>	<b>Review Annual Report</b>		
<b>25/93</b>	<p><b>Received:</b> Draft Annual Report 2024/25 <b>Reported:</b> KMB</p> <ul style="list-style-type: none"> <li>• Good progress is being made, with only minor work to complete.</li> <li>• The draft Annual Report will be sent out in 'Word' document format to enable revisions via tracked changes.</li> </ul> <p><b>Discussed:</b> No items were raised.</p> <p><b>Noted:</b> The Audit Committee noted the draft Annual Report 2024/25</p>		
<b>13.2.1</b>	<b>Annual Governance Statement</b>		
25/94	<p><b>Received:</b> The Annual Governance Statement is included within the Annual Report 2024/25. <b>Reported:</b> KMB Covered under Review of Annual Report. No items were raised.</p> <p><b>Noted:</b> The Audit Committee noted the Annual Governance Statement.</p>		

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<b>14</b>	<b>ANY OTHER BUSINESS</b>																																														
25/95	CC noted this was SH last meeting before her forthcoming maternity leave; CC thanked SH from the Audit Committee for all her hard work which has kept us on track. Thank you again and best wishes for the future.																																														
<b>15</b>	<b>FORWARD PLANNER AND MEETING REVIEW</b>																																														
<b>15.1</b> 25/96	<b>Discussion:</b> One review to the planner noted earlier on BAF Assurance Map to bring forward from March to January 2026.  <b>Noted:</b> The Audit Committee noted the meeting forward planner																																														
<b>15.2</b>	<b>Review of meeting agenda and objectives / Escalations</b>																																														
25/97	<ul style="list-style-type: none"> <li>Meeting objectives were met, and no new items were raised for the for July agenda.</li> <li>BAF risk on Industrial relations escalated to Workforce Committee for scrutiny.</li> </ul>																																														
<b>15.3</b>	<b>Next meeting:</b> 19 June 2025, 1000-1100hrs via MS Teams (NEDS/RPH only) – final review/sign-off Annual Report & Accounts 2024/25)  - 17 July 2025 0900-1100hrs, standard Audit Committee meeting.																																														
25/98	The meeting finished at 1126hrs																																														
<table border="1"> <thead> <tr> <th colspan="4">FUTURE MEETING DATES 2025</th></tr> </thead> <tbody> <tr> <td>23 January</td><td>0930-1130hrs</td><td>MS Teams</td><td></td></tr> <tr> <td>13 March</td><td>0930-1130hrs</td><td>F2F</td><td>HLRI building room 89</td></tr> <tr> <td>13 March (NEDS Private meeting with Auditors)</td><td>1130-1200hrs</td><td>F2F</td><td>HLRI building room 89</td></tr> <tr> <td>28 May (AR &amp; A/cs sign off)</td><td>0930-1130hrs</td><td>MS Teams</td><td></td></tr> <tr> <td>12 June (Audit Cttee NEDs review Accounts)</td><td>1000-1030</td><td>MS Teams</td><td></td></tr> <tr> <td>19 June (AR &amp; A/cs sign off final)</td><td>1000-1100hrs</td><td>MS Teams</td><td></td></tr> <tr> <td>24 June (Board sign off AR &amp; A/cs)</td><td>1230-1330hrs</td><td>MS Teams</td><td></td></tr> <tr> <td>17 July</td><td>0900-1100hrs</td><td>MS Teams</td><td></td></tr> <tr> <td>16 October</td><td>0900-1100hrs</td><td>MS Teams</td><td></td></tr> <tr> <td>20 November (approve Charity Annual Report &amp; Accounts)</td><td>0930-1000hrs</td><td>MS Team</td><td></td></tr> </tbody> </table>				FUTURE MEETING DATES 2025				23 January	0930-1130hrs	MS Teams		13 March	0930-1130hrs	F2F	HLRI building room 89	13 March (NEDS Private meeting with Auditors)	1130-1200hrs	F2F	HLRI building room 89	28 May (AR & A/cs sign off)	0930-1130hrs	MS Teams		12 June (Audit Cttee NEDs review Accounts)	1000-1030	MS Teams		19 June (AR & A/cs sign off final)	1000-1100hrs	MS Teams		24 June (Board sign off AR & A/cs)	1230-1330hrs	MS Teams		17 July	0900-1100hrs	MS Teams		16 October	0900-1100hrs	MS Teams		20 November (approve Charity Annual Report & Accounts)	0930-1000hrs	MS Team	
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13 March (NEDS Private meeting with Auditors)	1130-1200hrs	F2F	HLRI building room 89																																												
28 May (AR & A/cs sign off)	0930-1130hrs	MS Teams																																													
12 June (Audit Cttee NEDs review Accounts)	1000-1030	MS Teams																																													
19 June (AR & A/cs sign off final)	1000-1100hrs	MS Teams																																													
24 June (Board sign off AR & A/cs)	1230-1330hrs	MS Teams																																													
17 July	0900-1100hrs	MS Teams																																													
16 October	0900-1100hrs	MS Teams																																													
20 November (approve Charity Annual Report & Accounts)	0930-1000hrs	MS Team																																													

*CB Conquest*

[Chair authorised electronic signature to be added]

**Signed:** ..... **19 June 2025**

**Royal Papworth Hospital NHS Foundation Trust  
Audit Committee meeting  
28 May 2025**

Trust Board of Directors as at 01 June 2025

Employee Name	Position Title	Interest Category	Interest Situation	Interest Description	Comments	Col Date From	Col Date To
Ahluwalia, Dr Jagjit Singh (Jagjit)	Chairman	Financial interests	Outside employment	Fellow at the Cambridge Judge Business School. This is an honorary position, I am not on faculty and not paid for this role. However I do deliver occasional lectures for CJBs, some of which are remunerated.		01/01/2018	
Ahluwalia, Dr Jagjit Singh (Jagjit)	Chairman	Financial interests	Outside employment	Non-Executive Director on board of THISLabs. Chair of Board of THISLabs from 11.03.24		27/11/2023	
Ahluwalia, Dr Jagjit Singh (Jagjit)	Chairman	Financial interests	Outside employment	With effect from 16.02.2022 I became an employee of the Eastern Academic Health Science Network as their Chief Clinical Officer. This is the same role as I held since April 2019 until 15.02.2022 but during these dates it was as a secondee from CUH Foundation Trust.		16/02/2022	
Ahluwalia, Dr Jagjit Singh (Jagjit)	Chairman	Financial interests	Shareholdings and other ownership interests	Co-director and shareholder in Ahluwalia Education and Consulting Limited. I undertake private work in the field of healthcare management, reviews and healthcare related education and training through this company for a range of clients including but not limited to the NHS, pharmaceuticals and charities.	Estimated date of start as initially undertook no work through it.	01/10/2018	
Ahluwalia, Dr Jagjit Singh (Jagjit)	Chairman	Financial interests	Shareholdings and other ownership interests	I have been appointed as a director of Hazelwick Management Company Limited. This is a small private company that oversees a block of property in which my wider family and I have an interest. There are no NHS connections.		06/04/2022	
Ahluwalia, Dr Jagjit Singh (Jagjit)	Chairman	Non-financial professional interest	Outside employment	Member C & P Clinical Ethics Committee. Not remunerated so not employed.	Estimated date.	01/05/2020	
Ahluwalia, Dr Jagjit Singh (Jagjit)	Chairman	Non-financial professional interest	Outside employment	Member Eastern Region Clinical Senate (since March 2020 - this is within my role at Eastern AHSN. Not remunerated for this role specifically.		01/03/2020	
Ahluwalia, Dr Jagjit Singh (Jagjit)	Chairman	Non-financial professional interest	Outside employment	Trustee on the main board of Macmillan Cancer Support	This is a pro-bono role	01/02/2017	
Ahluwalia, Dr Jagjit Singh (Jagjit)	Chairman	Non-financial professional interest	Shareholdings and other ownership interests	Director of Cambridge University Health Partners. This directorship is to be formally confirmed by CUHP but would in practice have come into effect only assuming the role of Chair at Royal Papworth with effect 01.02.24	Formal documentation still pending from CUHP	01/02/2024	
Conquest, Mrs. Cynthia Bernice	Non-Executive Director	Non-financial personal interests	Loyalty interests	I am a school Governor for North East Essex Co-operative Academy which is a school in Colchester which provides Alternative Provision School for children aged 5 - 16, most of whom have found it difficult to be successful in a mainstream school.		01/09/2023	
Conquest, Mrs. Cynthia Bernice	Non-Executive Director	Non-financial professional interest	Loyalty interests	Member of the Seacole Group - Network for BAME NEDs in the NHS	Chair of their Governance Group wef 9 May 2023	25/02/2021	
Fadero, Mrs. Amanda Therese	Non-Executive Director	I have no interests to declare				01/10/2013	
Fadero, Mrs. Amanda Therese	Non-Executive Director	Indirect interests	Loyalty interests	I am an Non Executive Director at East Sussex Healthcare NHS Trust		01/07/2020	30/06/2026

Employee Name	Position Title	Interest Category	Interest Situation	Interest Description	Comments	Col Date From	Col Date To
Fadero, Mrs. Amanda Therese	Non-Executive Director	Indirect interests	Outside employment	Consilium Partners is a specialist health consultancy working with health and care organisations to help them plan, improve and deliver successful and sustainable futures		11/10/2021	
Fadero, Mrs. Amanda Therese	Non-Executive Director	Indirect interests	Sponsored research	My brother Matthew Wakefield has recently been appointed as the Chairman of Oxford BioDynamics PLC- a biotechnology company developing personalised medicine tests based on 3D genomic biomarkers		14/12/2020	
Glenn, Mr. Timothy John	Chief Finance Officer	Non-financial personal interests	Loyalty interests	I am a governor at William Westley Primary School		05/10/2022	
Glenn, Mr. Timothy John	Chief Finance Officer	Non-financial professional interest	Loyalty interests	My wife is ICS development lead for the East of England. Currently on secondment to Cambridge University Hospitals, working on their OBC/FBC for the Cambridge Cancer Hospital		31/03/2020	
Harrison, Mrs. Sophie Ann	Chief Finance Officer	Financial interests	Donations	I am a donor to the Royal Papworth Charity and sit on the Board of Trustees in the role of CFO. I do not oversee direct spending of the donation and it is not material to the Charity overall.		06/11/2023	
Harrison, Mrs. Sophie Ann	Chief Finance Officer	Non-financial personal interests	Loyalty interests	Husband is the Chief Finance Officer at North West Anglia NHS FT		01/12/2020	
Jones, Mr. David Ian	Non-Executive Director						
Leacock, Ms. Diane Eleanor	Non-Executive Director	Financial interests	Loyalty interests	Portfolio Finance Director working on behalf of the CFO Centre through my limited company, ADO Consulting Ltd	Name change from FD & CFO Centre to CFO Centre	26/09/2022	
Leacock, Ms. Diane Eleanor	Non-Executive Director	Financial interests	Outside employment	Director, ADO Consulting Ltd	I am a self-employed finance consultant operating through my company, ADO Consulting Ltd	01/12/2020	
Leacock, Ms. Diane Eleanor	Non-Executive Director	Financial interests	Outside employment	Non Executive Director, Essex Partnership University NHS Foundation Trust		04/12/2023	
Leacock, Ms. Diane Eleanor	Non-Executive Director	Indirect interests	Loyalty interests	Daughter works as an Audit Assistant Manager with KPMG London		01/10/2024	
Leacock, Ms. Diane Eleanor	Non-Executive Director	Non-financial personal interests	Loyalty interests	Trustee, Benham-Seaman Trust		01/12/2020	
Leacock, Ms. Diane Eleanor	Non-Executive Director	Non-financial personal interests	Loyalty interests	Trustee. Firstsite	Voluntary position	01/12/2020	
Leacock, Ms. Diane Eleanor	Non-Executive Director	Non-financial professional interest	Loyalty interests	Member of the Seacole Group, a network for BAME NEDs in the NHS		01/12/2020	
McEnroe, Mr. Harvey Lee Anthony	Chief Operating Officer	Non-financial personal interests	Donations	Member of the Labour Party		04/07/2023	
McEnroe, Mr. Harvey Lee Anthony	Chief Operating Officer	Non-financial personal interests	Outside employment	I am Deputy Chair of Governors for Acorn Federation of Primary Schools and a Parent Governor for the Ambition Federation of Primary Schools.		05/10/2023	

Employee Name	Position Title	Interest Category	Interest Situation	Interest Description	Comments	Col Date From	Col Date To
McEnroe, Mr. Harvey Lee Anthony	Chief Operating Officer	Non-financial professional interest	Loyalty interests	deputy chair of governors and chair of resources committee - Acorn Schools Federation		03/07/2016	
Midlane, Mrs. Eilish Elizabeth Ann	Chief Executive	Indirect interests	Loyalty interests	Chair of the C&P Diagnostic Board		29/03/2022	
Midlane, Mrs. Eilish Elizabeth Ann	Chief Executive	Indirect interests	Loyalty interests	Holds an unpaid Executive Reviewer role with CQC		03/08/2020	
Midlane, Mrs. Eilish Elizabeth Ann	Chief Executive	Non-financial professional interest	Loyalty interests	Director at CBC Ltd. on behalf of Royal Papworth.	CBC Ltd. is a limited company owned and representing the interests of partners on the Biomedical campus.	06/11/2023	
Midlane, Mrs. Eilish Elizabeth Ann	Chief Executive	Non-financial professional interest	Outside employment	I am a voting member, representing NHS providers and Trusts, on the Cambridge and Peterborough Integrated Trust Board. This includes attendance at the Board, and a number of Board sub-committees.		01/09/2022	
Midlane, Mrs. Eilish Elizabeth Ann	Chief Executive	Non-financial professional interest	Outside employment	I am an unpaid Director of CUHP		01/09/2022	
Monkhouse, Ms. Oonagh Jane	Director of Workforce and Organisational Development	Non-financial professional interest	Outside employment	I am employer side lead and co-chair of the NHS Staff Council. This is a non-remunerated role. The NHS Staff Council is the negotiating body for Agenda for Change Terms and Conditions.		01/04/2023	31/03/2026
Paddison, Dr Charlotte Anna Mary	Non-Executive Director	Non-financial professional interest	Outside employment	I am employed by the Nuffield Trust as a Senior Fellow (Policy and Research)	I have been employed by the Nuffield Trust, a politically independent research and policy organisation (think tank) based in London since April 2017.	12/03/2024	
Paddison, Dr Charlotte Anna Mary	Non-Executive Director	Non-financial professional interest	Outside employment	Member of the British Medical Association Patient Liaison Group	This is a voluntary role with the British Medical Association, appointed to the patient liaison group August 2023	12/03/2024	
Raynes, Mr. Andrew Duncan (Andrew)	Chief Information Officer	Financial interests	Hospitality	Evening meal following Go-live of ShCR with Orion Health	Hospitality for 6 members of staff for one meal only (each under £25 p/p)	23/02/2025	23/02/2025
Raynes, Mr. Andrew Duncan (Andrew)	Chief Information Officer	Financial interests	Patents	CIS UCQ is a Trademark for health and care IT courses established under my consultancy ADR Health Care Consultancy Solutions Ltd		05/04/2021	
Raynes, Mr. Andrew Duncan (Andrew)	Chief Information Officer	Financial interests	Shareholdings and other ownership interests	Owner of ADR Health Care Consultancy Solutions Ltd		02/05/2017	
Raynes, Mr. Andrew Duncan (Andrew)	Chief Information Officer	Non-financial professional interest	Loyalty interests	Spouse works for Royal College of Nursing (I cant see a situation from the drop down pertinent to this declaration so have selected the most likely reflecting the circumstances)		01/06/2017	

Employee Name	Position Title	Interest Category	Interest Situation	Interest Description	Comments	Col Date From	Col Date To
Raynes, Mr. Andrew Duncan (Andrew)	Chief Information Officer	Non-financial professional interest	Sponsored events	Chair of Healthcare Strategy Forum, stay over in hotel and meals provided	As Chair of this years forum, the event was paid for by the sponsors including my room stay and meals.	18/11/2024	20/11/2024
Raynes, Mr. Andrew Duncan (Andrew)	Chief Information Officer	Non-financial professional interest	Sponsored events	Presentation on Closed loop meds at the GS1 Regional Forum, Hong Kong	Flights, overnight stay and meals paid for by GS1 Global.	28/10/2024	29/10/2024
Raynes, Mr. Andrew Duncan (Andrew)	Chief Information Officer	Non-financial professional interest	Sponsored events	RPH Staff Awards sponsorship Cyferd, Celerity Idox CMR	Partner Sponsorship of the staff awards.	12/12/2024	12/12/2024
Raynes, Mr. Andrew Duncan (Andrew)	Chief Information Officer	Non-financial professional interest	Sponsored events	RPH Staff awards sponsorship	Four tech sponsorship opportunities helped fund the Staff awards this year from Celerity, Cyferd, Idox and CMR Surgical.	12/12/2024	12/12/2024
Screaton, Mrs. Maura Bernadette (Maura)	Chief Nurse	Financial interests	Loyalty interests	My husband has set up a limited company, Cambridge Clinical Imaging Ltd., which provides professional imaging services. This is outside the scope of his Royal Papworth employment. I am a named Director and shareholder in Cambridge Clinical Imaging.		02/08/2021	30/01/2030
Screaton, Mrs. Maura Bernadette (Maura)	Chief Nurse	Financial interests	Shareholdings and other ownership interests	Shareholdings in unit trusts		02/08/2021	30/01/2030
Screaton, Mrs. Maura Bernadette (Maura)	Chief Nurse	Indirect interests	Loyalty interests	My husband is a Consultant Radiologist at Royal Papworth Hospital.		02/08/2021	30/01/2030
Smith, Dr Ian Edward (Ian)	Consultant	Non-financial professional interest	Clinical private practice	I undertake private clinical practice in the hospital. All appointments are booked through Lorenzo and appropriate fees paid for the use of Trust resources.	Update 2025 - no changes to declare	14/09/2020	
Wilkinson, Dr Ian Boden	Non-Executive Director	Indirect interests	Clinical private practice	Private health care at the University of Cambridge;		01/03/2021	01/03/2035
Wilkinson, Dr Ian Boden	Non-Executive Director	Non-financial professional interest	Loyalty interests	President of the British and Irish Hypertension Society		31/10/2021	
Wilkinson, Dr Ian Boden	Non-Executive Director	Non-financial professional interest	Outside employment	Hon Consultant CUHFT and employee of the University of Cambridge		01/03/2021	01/03/2035
Wilkinson, Dr Ian Boden	Non-Executive Director	Non-financial professional interest	Shareholdings and other ownership interests	Director Cambridge Cardiovascular Clinics	This is a group private practice that is not yet trading	13/11/2023	