Report To	Board meeting in Public	**Agenda Item**	13
Title of Paper	Board Assurance Report: Audit and Risk Committee	**Date of Meeting**	4 November 2026
Purpose of Paper	For Assurance		
Author	Martin Spencer, Non-Executive Director and Chair of the Audit and Risk Committee	**Presenter**	Martin Spencer, Non-Executive Director and Chair of the Audit and Risk Committee
Executive Sponsor	Alastair Groom, Chief Finance Officer	**Clinical Sponsor**	If applicable

Prior Discussion	
Meeting Name	**Meeting Date**
	Click or tap to enter a date.
Recommendations/Comments	

Executive Summary

This escalation and assurance report is submitted by the Audit and Risk Committee to inform the Board of the key matters considered, the level of assurance obtained, and areas where further evidence or follow-up has been identified following their most recent meeting.

This report reflects the key discussions and outcomes from the Committee's meeting held on 28 September 2026.

Recommendation(s)	The Board is asked to: 1. Note the contents of this report from the Chair of the Audit and Risk Committee; and 2. Advise on any further areas where it requires the Committee to seek assurance on its behalf.

Link to Strategic Objectives

This paper links to the following Strategic Objectives

Improving Personalised Neighbourhood Care

Greater prevention

Smarter Use of Technology and Data

Better Value

Thriving Workforce

Impact Assessments Completed

Please include outcome from Assessment Panel in body of report

Not applicable

NHS Hampshire and Isle of Wight

Board Assurance Report – Audit and Risk Committee

Committee meeting held on 28 September 2026

Key escalation and discussion points from the meeting

ALERT

1. The Committee draws the Board's attention to the following matters requiring oversight or monitoring:

1.1 Counter Fraud - Fraud, Bribery and Corruption Report

The Committee discussed an ongoing investigation relating to a Personal Health Budget (PHB) arrangement and received an update on the circumstances surrounding the case. Whilst no evidence of fraud had been identified and there was insufficient evidence to support criminal proceedings, the case had highlighted weaknesses in historical oversight and monitoring arrangements relating to Personal Health Budgets.

The Committee expressed concern regarding the potential impact on the individual concerned and questioned whether the support and care intended to be funded through the Personal Health Budget had been delivered. The Committee were assured post meeting that the support and care had been provided.

The Committee emphasised the importance of ensuring that Personal Health Budgets were appropriately monitored and managed to support patient outcomes and safeguard public funds. The Committee understands that action has been taken and is ongoing to address this and the Committee will revert to this matter to confirm in due course.

1.2 Business Continuity and Emergency Planning audit recommendation

The Committee received an update regarding the Internal Audit recommendation arising from the Business Continuity and Emergency Planning audit. Whilst progress had been made in strengthening business continuity arrangements and testing processes, the recommendation relating to Business Continuity Plans for high-risk providers had progressed more slowly due to resource pressures within the Emergency Preparedness, Resilience and Response team. The Committee expressed concern that the implementation date had previously been revised and emphasised that whilst moving an implementation date once may be reasonable, it would not be acceptable for a revised date to be missed without clear explanation and accountability. It was agreed that the outstanding Business Continuity and Emergency Planning recommendation would be raised with the responsible team to determine whether additional support, resource or reprioritisation is required to ensure delivery of the revised implementation timetable.

ADVISE

2. The Committee provides the following advice to the Board:

2.1 Internal Audit Progress Report

The 2026/27 Internal Audit Programme comprises nine audits. Four audits are currently in progress, covering Strategic Commissioning, All Age Continuing Care, Cyber Security and the Model ICB review. The Strategic Commissioning, All Age Continuing Care and Cyber Security audits are expected to be reported to the November 2026 meeting. An HR Systems audit has been deferred at management's request to allow further discussion regarding the scope of the review. It remains expected that the audit will be reported during 2026/27.

2.2 Artificial Intelligence

The Committee discussed the increasing use of Artificial Intelligence across the NHS and the opportunities this presented to improve efficiency and productivity. The Chief Finance Officer advised that the NHS finance community was actively encouraging greater use of Artificial Intelligence tools and that local work was underway to understand how such technologies could support operational and analytical activity. The Committee agreed that whilst Artificial Intelligence presented significant opportunities, appropriate governance, assurance and validation processes would be required to ensure outputs remained reliable and that organisational accountability was maintained. The Committee discussed the importance of understanding how risks associated with Artificial Intelligence would be managed, including governance arrangements, cyber security implications, data protection considerations and the assurance processes required where staff develop automated tools and workflows. The Committee received assurance that discussions were already underway through Finance and Digital transformation groups to consider appropriate controls, governance arrangements and opportunities for shared learning. The Committee agreed that Artificial Intelligence represented an emerging area of strategic risk and that future assurance arrangements should be considered as part of development of the 2027/28 Internal Audit Plan.

2.3 Single Tender Waivers

The Committee noted three Single Tender Waivers were approved during the reporting period. Two related to Executive and Board development programmes where the organisation had elected to continue working with existing providers due to previous success and continuity of approach. The third related to specialist support for the Digital Enablement Programme associated with transition from Commissioning Support Unit arrangements and alignment with approaches adopted across a number of Integrated Care Boards. The Committee reflected on the continued reduction in the number of Single Tender Waivers reported to the Committee and welcomed the positive trend. Whilst acknowledging that a small increase in activity may occur during the current year, the Committee received assurance that robust scrutiny and challenge continued to be applied before waivers were approved.