

Audit Committee Terms of Reference

Version 4

**Better health
and wellbeing for all...**

Version Control

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4	16 April 2026	Kate Sutherland Governance Lead	Amendments to membership and titles following restructure

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Integrated Care Board

AUDIT COMMITTEE – TERMS of REFERENCE

1. Constitution

The North East and North Cumbria Integrated Care Board (NENC ICB) was established by statute on 1st July 2022.

The Audit Committee (the Committee) is established by the Integrated Care Board (the Board or ICB) as a Committee of the Board in accordance with its Constitution.

These terms of reference, which must be published on the ICB website, set out the membership, the remit, responsibilities and reporting arrangements of the Committee and may only be changed with the approval of the Board.

The Committee is a non-executive committee of the Board and its members, including those who are not members of the Board, are bound by the Standing Orders and other policies of the ICB

2. Authority

The Committee is authorised by the Board to:

- Investigate any activity within its terms of reference
- Seek any information it requires within its remit, from any employee or member of the ICB (who are directed to co-operate with any request made by the Committee) within its remit as outlined in these terms of reference
- Commission any reports it deems necessary to help fulfil its obligations
- Obtain legal or other independent professional advice and secure the attendance of advisors with relevant expertise if it considers this is necessary to fulfil its functions. In doing so the Committee must follow any procedures put in place by the ICB for obtaining legal or professional advice.
- Create task and finish sub-groups in order to take forward specific programmes of work as considered necessary by the Committee's members. The Committee shall determine the membership and terms of reference of any such task and finish sub-groups in accordance with the ICB's constitution, standing orders and Scheme of Reservation and Delegation (SoRD) but may not delegate any decisions to such groups.

For the avoidance of doubt, the Committee will comply with the ICB Standing Orders, Standing Financial Instructions, and the Scheme of Reservation and Delegation.

The Committee may establish any subcommittees without prior Board approval as stated in the Constitution and Scheme of Reservation and Delegation.

3. Purpose

The principle purpose of the Audit Committee is to support the Board by:

- Contributing to the overall delivery of the ICB objectives by providing oversight and assurance to the Board on the adequacy of governance, risk management and internal control processes within the ICB.

The duties of the Committee will be driven by the organisation's objectives and the associated risks. The Committee will agree an annual programme of business, however this will be flexible to new and emerging priorities and risks.

The Committee will contribute to the overall delivery of the ICB objectives by delivering its remit as set out in these Terms of Reference.

The Committee has no executive powers, other than those delegated in the SoRD and specified in these terms of reference.

4. Membership and attendance

All members of Committees and subcommittees that exercise the ICB commissioning functions will be approved by the ICB Chair. The ICB Chair will not approve an individual to such a Committee or subcommittee if they consider that the appointment could reasonably be regarded as undermining the independence of the health service because of the candidate's involvement with the private healthcare sector or otherwise.

4.1 Chair and Vice Chair

In accordance with the Constitution, the Committee will be chaired by an independent non-executive member of the Board appointed on account of their specific knowledge skills and experience making them suitable to chair the Committee.

The Chair of the Committee shall be independent and therefore may not chair any other committees. In so far as it is possible, they will not be a member of any other committee.

The Committee will agree the vice chair from amongst its members. However, the vice chair must be an independent non-executive member of the Board.

The Chair will be responsible for agreeing the agenda and ensuring matters discussed meet the objectives as set out in these terms of reference.

4.2 Membership (subject to ICB Chair's approval as above)

The Committee members shall be appointed by the Board in accordance with the ICB constitution.

The Board will appoint no fewer than four independent members of the Committee including at least two non-executive members of the Board. Other independent members of the Committee need not be non-executive members of the Board.

Members will possess between them knowledge / skills / experience in accounting, integrated governance, risk management and internal control, internal / external audit, and technical or specialist issues pertinent to the ICB's business. When determining the membership of the Committee, active consideration will be made to diversity and equality.

Neither the Chair of the Board, nor employees of the ICB will be members of the Committee.

4.3 Attendees

Only members of the Committee have the right to attend committee meetings however all meetings of the Committee may also be attended by the appropriate nominated individuals who are not members of the Committee. The following individuals who are not members of the Committee are regularly in attendance:

- Chief Finance Officer (or their nominated deputy)
- Chief Executive to discuss at least annually with the Committee the process for assurance
- Representatives of both internal and external audit
- Individuals who lead on risk management and counter fraud matters
- Other relevant attendees as agreed by the Committee Chair.

The Chair may ask any or all of those who normally attend, but who are not members, to withdraw to facilitate open and frank discussion of particular matters.

Other individuals may be invited to attend all or part of any meeting as and when appropriate to assist it with its discussions on any particular matter including representatives from the Health and Wellbeing Board, secondary and community providers.

The Chair of the ICB may also be invited to attend one meeting each year in order to gain an understanding of the Committee's operations.

4.4 Attendance

Where a member of the Committee is unable to attend a meeting, a nominated deputy may be agreed with the Chair. Once agreed, that person will have the same voting rights and responsibilities as the member.

Where an attendee of the Committee (who is not a member of the Committee) is unable to attend a meeting, a nominated alternative may be agreed with the Chair.

4.5 Access

Regardless of attendance, external audit, internal audit, local counter fraud and security management providers will have full and unrestricted rights of access to the Committee.

5 Meetings, Quoracy and Decisions

The Committee will meet in private.

The Committee will meet a minimum of four times a year and arrangements and notice for calling meetings are set out in the Standing Orders. Additional meetings may take place as agreed by the Chair (or Vice Chair in his/her absence).

The Board, Chair or Chief Executive may ask the Committee to convene further meetings to discuss particular issues on which they want the Committee's advice.

In accordance with the Standing Orders, the Committee may meet virtually when necessary and members attending using electronic means will be counted towards the quorum.

5.1 Quorum

For a meeting to be quorate, a minimum of two independent non-executive members of the Board are required, including either the Chair or Vice Chair of the Committee.

If any member of the Committee has been disqualified from participating on an item in the agenda, by reason of a declaration of conflicts of interest, then that individual shall no longer count towards the quorum.

In the event that the quorum cannot be achieved due to a member or members being disqualified from taking part in a vote or discussion due to a declared interest the Chair of the meeting will determine the action to be taken in accordance with the constitution.

In these circumstances, an alternative quoracy of one third of the non-conflicted members will apply.

5.2 Decision-making and Voting

Decisions will be taken in according with the Standing Orders. The Committee will ordinarily reach conclusions by consensus. When this is not possible the Chair may call a vote.

Only members of the Committee may vote. Each member is allowed one vote and a majority will be conclusive on any matter.

Where there is a split vote, with no clear majority, the Chair of the Committee will hold the casting vote.

If a decision is needed which cannot wait for the next scheduled meeting, the Chair may conduct business on a 'virtual' basis in consultation with one other member of the Committee (i.e. a quorum) through the use of telephone, email or other electronic communication.

6 Responsibilities of the Committee

The Committee's duties can be categorised as follows:

6.1 Integrated Governance, Risk Management, and Internal Control

- To review the adequacy and effectiveness of the system of integrated governance, risk management and internal control across the whole of the ICB's activities that support the achievement of its objectives, and to highlight any areas of weakness to the Board
- To recommend SFIs, financial delegations* and limits to the Board for approval.
*The financial delegations include approval of Non-Audit Services
- To recommend the Scheme of Reservation & Delegation to the Board for approval.
- To ensure that financial systems and governance are established which facilitate compliance with Department of Health and Social Care's Group Accounting Manual
- To review the adequacy and effectiveness of the assurance processes that indicate the degree of achievement of the ICB's objectives, the effectiveness of the management of principal risks
- To have oversight of system risks where they relate to the achievement of the ICB's objectives
- To ensure consistency that the ICB acts consistently with the principles and guidance established in HM's Treasury's Managing Public Money
- To seek reports and assurance from directors and managers as appropriate, concentrating on the systems of integrated governance, risk management and internal control, together with indicators of their effectiveness
- To identify opportunities to improve governance, risk management and internal control processes across the ICB.

- To ensure resources are being allocated appropriately and are consistent with the Scheme of Reservation and Delegation and within financial delegations and financial limits.

6.2 Internal audit

To ensure that there is an effective internal audit function that meets the Public Sector Internal Audit Standards and provides appropriate independent assurance to the Board. This will be achieved by:

- Considering the provision of the internal audit service and the costs involved
- Approving the appointment of Internal Auditors
- Review and approval of the annual internal audit plan and more detailed programme of work, ensuring that this is consistent with the audit needs of the organisation as identified in the assurance framework
- Considering the major findings of internal audit work, including the head of internal audit opinion, (and management's response), and ensure coordination between the internal and external auditors to optimise the use of audit resources
- Ensuring that the internal audit function is adequately resourced and has appropriate standing within the organisation
- Monitoring the effectiveness of internal audit and carrying out an annual review.

6.3 External audit

To review and monitor the external auditors' independence and objectivity and the effectiveness of the audit process. In particular, the Committee will review the work and findings of the external auditors and consider the implications and management's responses to their work. This will be achieved by:

- Considering the appointment and performance of the external auditors, as far as the rules governing the appointment permit
- Discussing and agreeing with the external auditors, before the audit commences, the nature and scope of the audit as set out in the annual plan
- Discussing with the external auditors their evaluation of audit risks and assessment of the organisation and the impact on the audit fee

- Reviewing all external audit reports, including to those charged with governance (before its submission to the Board) and any work undertaken outside the annual audit plan, together with the appropriateness of management responses
- Ensuring that there is in place a clear policy for the engagement of external auditors to supply non-audit services.

6.4 Other Assurance Functions

To review the findings of assurance functions in the ICB and consider the implications for the governance of the ICB.

To review the work of other committees in the ICB, whose work can provide relevant assurance to the Committee's own areas of responsibility.

To review the assurance processes in place in relation to financial performance across the ICB including the completeness and accuracy of information provided.

To review the findings of external bodies and consider the implications for governance of the ICB. These will include, but will not be limited to:

- Reviews and reports issued by arm's length bodies or regulators and inspectors: e.g. National Audit Office, Select Committees, NHS Resolution, Care Quality Commission; and
- Reviews and reports issued by professional bodies with responsibility for the performance of staff or functions (e.g. royal colleges and accreditation bodies).

6.5 Counter Fraud

To assure itself that the ICB has adequate arrangements in place for counter fraud, bribery and corruption (including cyber security) that meet NHS Counter Fraud Authority's (NHSCFA) standards and shall review the outcomes of work in these areas.

To review, approve and monitor counter fraud work plans, receiving regular updates on counter fraud activity, monitor the implementation of action plans, provide direct access and liaison with those responsible for counter fraud, review annual reports on counter fraud, and discuss NHSCFA quality assessment reports.

Ensure that the Counter Fraud Service provides appropriate progress reports and that these are scrutinised and challenged where appropriate.

To be responsible for ensuring that the counter fraud service submits an annual report and self-review assessment, outlining key work undertaken during each financial year to meet Government Functional Standard 013 Counter Fraud: NHSCFA requirements.

To report concerns of suspected fraud, bribery and corruption to the NHSCFA.

The Committee recommend the ICB's counter fraud and security management arrangements to the Board for approval.

6.6 Freedom to speak up

To review the adequacy and security of the ICB's arrangements for its employees, contractors and external parties to raise concerns, in confidence, in relation to financial, clinical management, or other matters. The Committee shall ensure that these arrangements allow proportionate and independent investigation of such matters and appropriate follow up action.

6.7 Information governance (IG)

To receive regular updates on IG compliance, including uptake and completion of data security training, data breaches and any related issues and risks.

To review the annual Senior Information Responsible Officer report, the submission for the data security and protection toolkit / cyber assurance framework and relevant reports and action plans.

To receive reports on audits to assess information and IT security arrangements, including the annual data security and protection toolkit / cyber assurance framework audit.

To provide assurance to the Board that there is an effective framework in place for the management of risks associated with information governance.

6.8 Financial reporting

To monitor the integrity of the financial statements of the ICB and any formal announcements relating to its financial performance.

To ensure that the systems for financial reporting to the Board, including those of budgetary control, are subject to review as the completeness and accuracy of the information provided.

To review the annual report and financial statements (including accounting policies) before submission to the Board focusing particularly on:

- The wording in the governance statement and other disclosures relevant to the terms of reference of the Committee
- Changes in accounting policies, practices and estimation techniques
- Unadjusted mis-statements in the financial statements
- Significant judgements in preparing of the financial statements

- Significant adjustments resulting from the audit
- Letter of representation; and
- Qualitative aspects of financial reporting
- Explanations for significant variances

6.9 Conflicts of interest

The Chair of the Committee will be the nominated Conflicts of Interest Guardian.

Whilst the Board approves the- ICB arrangements for managing conflicts of interest, the Committee shall satisfy itself that the ICB's policy, systems and processes for the management of conflicts, (including gifts and hospitality and bribery) are effective including receiving reports relating to non-compliance with the ICB policy and procedures relating to conflicts of interest.

6.10 Management

To request and review reports and assurances from directors and managers on the overall arrangements for governance, risk management and internal control.

The Committee may also request specific reports from individual functions within the ICB as they may be appropriate to the overall arrangements.

To receive reports of breaches of policy and normal procedure or proceedings, including such as suspensions of the ICB's Standing Orders, in order provide assurance in relation to the appropriateness of decisions and to derive future learning.

6.11 Communication

To support communications on governance, risk management and internal control with stakeholders internally and externally as required.

To develop an approach with other committees, including the Integrated Care Partnership Board, to ensure the relationship between them is understood.

6.12 Auditor Panel

In order to meet the requirements of the Local Audit and Accountability Act 2014, the Committee shall also perform the role of the Auditor Panel for the ICB. The Chair and members of the Committee will also be the Chair and members of the Auditor Panel.

The Auditor Panel shall:

- advise the Board on the maintenance of an independent relationship with external auditors;
- advise the Board on the selection and appointment of external auditors;
- if asked advise the Board on any proposal to enter into a limited liability agreement.
- Utilise the appropriate expertise within the ICB to support the Panel in its role and responsibilities.

To ensure the activities of the Auditor Panel are distinctive to the other activities of the Committee, the Chair of the Auditor Panel shall arrange separate Auditor Panel meetings as required, ensure minutes of meetings are formally recorded and submitted to the Board and provide a separate annual report to the Board of the panel's activities and decisions.

7 Behaviours and Conduct

7.1 ICB Values

Members will be expected to conduct business in line with the ICB values and objectives. Members of, and those attending, the Committee shall behave in accordance with the ICB's Constitution, Standing Orders, and Standards of Business Conduct Policy.

7.2 Conflicts of Interest

In discharging duties transparently, conflicts of interest must be considered, recorded and managed. Members should have regard to the NHS guidance on managing conflicts of interest and the ICB Standards of Business Conduct and Declarations of Interest Policy. Conflicts of interest must be declared and recorded at the start of each meeting. A register of interests must be maintained by the by the ICB and a Committee extract is considered before and during each meeting. If a conflict of interest arises, the Chair may require the affected member to withdraw at the relevant point.

7.3 Equality and Diversity

Members must demonstrably consider the equality and diversity implications of decisions they make.

8 Accountability and Reporting

The Committee is accountable to the Board and shall report to the Board on how it discharges its responsibilities.

The confirmed minutes of meetings shall be formally recorded and submitted to the Board, in private or public as appropriate.

The Committee will submit to the Board a decision and assurance report,, summarising key decisions and shall draw to the attention of the Board any issues that require disclosure to the Board or require action.

The Committee will provide the Board with an annual report, timed to support finalisation of the accounts and the governance statement. The report will summarise its conclusions from the work it has done during the year specifically commenting on:

- The fitness for purpose of the assurance framework
- The completeness and ‘embeddedness’ of risk management in the organisation
- The integration of governance arrangements
- The appropriateness of the evidence that shows the organisation is fulfilling its regulatory requirements; and
- The robustness of the processes behind the quality accounts.

9 Secretariat and Administration

The Committee shall be supported with a secretariat function which will ensure that:

- i). The agenda and papers are prepared and distributed in accordance with the Standing Orders having been agreed by the Chair with the support of the relevant executive lead.
- ii). Attendance of those invited to each meeting is monitored and highlighting to the Chair those that do not meet the minimum requirements.
- iii). Any additional conflicts of interest are recorded.
- iv). Good quality minutes are taken in accordance with the standing orders and agreed with the chair and that a record of matters arising, action points and issues to be carried forward are kept and taken forward between meetings.
- v). The Chair is supported to prepare and deliver reports to the Board.

10 Review

The Committee will review its effectiveness at least annually.

These terms of reference will be reviewed at least annually and more frequently if required. Any proposed amendments to the terms of reference will be submitted to the Board for approval.