NHS
Blood and Transplant

Audit, Risk and Governance Committee

Tuesday, 29 September 2026

Title of Paper	Audit, Risk and Governance Committee Report	**Agenda No.**	5.2.1
Nature of Paper	☒ Official	☐ Official Sensitive	
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Presenter(s) at Meeting	Ian Murphy, Chair of Audit, Risk and Governance Committee		
Presented for	☐ Approval ☒ Assurance	☐ Information ☐ Update	
Is there a plan to communicate this to the organisation?	☐ Yes ☒ No ☐ Yet to be determined		

Executive Summary

This report is submitted to the Board to draw attention to the main items discussed at the Audit, Risk and Governance Committee (ARGC) meeting held on 23 July 2026.

Previously Considered by

N/A

Recommendation

The Board is asked to note the report.

Risk(s) identified (Link to Board Assurance Framework Risks)

Strategic Objective(s) this paper relates to:

☐ Collaborate with partners ☐ Invest in people and culture ☐ Drive innovation
☐ Modernise our operations ☐ Grow and diversify our donor base

Appendices:	None

1. Background

This report is submitted to the Board to draw attention to the main items discussed at the Audit, Risk and Governance Committee (ARGC) meeting held on 23 July 2026.

2. Risk

Board Assurance Framework

The Committee reviewed the Corporate Risk Register and noted four principal risks currently above risk appetite. Assurance was provided that mitigating actions for all risks exceeding appetite remained on track and that overdue or extended risk actions are subject to ongoing scrutiny and challenge through established governance arrangements. The Committee also discussed the benefit of targeted reviews based on insight from assurance mapping to identify emerging or previously unidentified risks. A future update on the outcomes of this work was requested.

Transformation Delivery Report

The Committee received the Transformation Delivery Report and welcomed the revised reporting approach aligned to the organisation's strategic priorities and transformation agenda. Members discussed the overall health of the transformation portfolio and noted that organisational capacity and capability remained the principal delivery risk. The Committee welcomed plans to enhance reporting further. Assurance was provided that appropriate governance and escalation arrangements were in place.

Principal Risk Deep Dive Reviews

The Committee completed two reviews of principal risks as follows:

P-10 Failure to Deliver Transformational Change - The Committee received a deep dive review of the risk. Members noted progress in strengthening governance, controls and mitigating actions. Members emphasised the need for ongoing monitoring of key milestones, dependencies and benefits realisation (both financial and non-financial), and noted the importance of embedding learning across programmes and ensuring appropriate foresight for support services to allow adequate planning. Assurance was provided that governance and oversight arrangements continued to mature and support delivery of the transformation portfolio.

P-09 Regulatory Compliance (primary regulators) Deep Dive - The Committee received a deep dive of the risk and noted that the risk remained stable and within the organisation's risk tolerance. Assurance was provided that the risk continued to be actively managed through established controls, including incident management, internal quality audits and ongoing engagement with regulators. Members discussed the management of regulatory risks arising from interactions with external partners and suppliers and emphasised the importance of identifying and embedding learning from incidents occurring across organisational boundaries. The Committee noted that findings from ongoing reviews would inform future risk assessments, assurance activities and audit planning, and received assurance that NHSBT continued to work collaboratively with regulators and partner organisations to strengthen controls and maintain stakeholder confidence.

Data Security and Protection Toolkit

The Committee received an update on Data Security and Protection, including the outcome of the independent audit of NHSBT's 2025/26 Data Security and Protection Toolkit (DSPT) submission. Members welcomed the achievement of 'Standards Met' and the substantial assurance opinion received from the independent audit, recognising progress made and the strong alignment between self-assessment and audit findings. Assurance was provided that key cyber security controls, including patch management, remained effective and continued to meet national standards.

3. Audit

Internal Audit Annual Opinion 2025/26

The Committee noted the positive Internal Audit Opinion for 2025/26. Whilst last year's rating of 'moderate' had been maintained the report reflected continued improvement in the organisation's control environment. Members welcomed the positive direction of travel in audit outcomes, including an increase in substantial and moderate assurance ratings. The Committee acknowledged the strong collaborative relationship between management and the Government Internal Audit Agency (GIAA) Internal Audit team, noting that constructive engagement had supported the timely resolution of issues and delivery of audit actions. Members also recognised the organisation's commitment to implementing agreed actions and maintaining a strong control environment. The Committee thanked the GIAA Internal Audit team and management for their work during the year.

Internal Audit Annual Performance Report

The Committee noted the Internal Audit Performance Report of GIAA, including the challenges experienced during 2025/26 and the actions taken to strengthen quality assurance, resourcing and the audit operating model. While some performance standards were not achieved during the year, assurance was provided that improvement measures were in place. Members welcomed the positive start to 2026/27 and noted confidence in the successful delivery of the current year's Internal Audit Plan.

Internal Audit Action Update

The Committee received an update on the status of internal audit actions and noted continued improvement in action management. Members were pleased to note that there were no high-priority actions outstanding and no overdue actions, reflecting the organisation's strong focus on timely action delivery and effective issue resolution.

External Audit Reports

The Committee received an update from the National Audit Office (NAO) and Forvis Mazars and noted that all remaining audit procedures had been completed with no significant issues identified. Members were advised that the audit opinion had been signed. The Committee welcomed the successful conclusion of the audit ahead of the Parliamentary recess, recognising this as a positive achievement in the context of a challenging year-end process.

Annual Report and Accounts Update

The Committee received an update on the Annual Report and Accounts, noting that the accounts had been certified by the Comptroller and Auditor General, laid before Parliament on 13 July 2026 and subsequently published.

4. Governance

Modern Slavery Statement and Supply Chain Policy

The Committee reviewed the updated Modern Slavery Statement and Supply Chain Modern Slavery Policy and approved the Policy for submission to the Board.

5. Reports

The Committee reviewed the following Reports:

- Counter Fraud
- Losses and Special Payments
- Debts Management

6. Sub-Committees / Sub-Group Reports

The Committee received reports/minutes from the following sub-committees/sub-group:

- NHSBT Finance Oversight and Scrutiny Sub-Group Meeting
- Risk Management Committee
- Information Governance Committee
- Security Governance Executive Committee:

7. Item for escalation to the Board

The following item was agreed to be presented to the Board for approval:

- Modern Slavery Statement