

**PWYLLGOR ARCHWILIO A SICRWYDD RISG  
AUDIT AND RISK ASSURANCE COMMITTEE**

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	10 December 2024
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Audit and Risk Assurance Committee (ARAC) Self-Assessment Outcome Report 2024/25
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Rhodri Evans, ARAC Chair Joanne Wilson, Director of Corporate Governance/ Board Secretary
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Charlotte Wilmshurst, Assistant Director of Assurance and Risk

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA  
SBAR REPORT**

**Sefyllfa / Situation**

The purpose of this report is to present the outcome of the Audit and Risk Assurance Committee (ARAC) Self-Assessment 2024/25 process to the Committee.

**Cefndir / Background**

In line with Section 10.2.1 of Standing Orders, the Board is required to introduce a process of regular and rigorous self-assessment and evaluation of its own operations and performance and that of its Committees and Advisory Groups. Section 10.2.2 also states that each Committee must also submit an annual report to the Board through the Chair within 6 weeks of the end of the reporting year setting out its activities during the year and including the review of its performance and that of any sub-Committees it has established.

A refreshed approach to the Committee self-assessment process was developed in 2023 which was intended to be proportionate, achievable and add value to the organisation's governance capability. For ARAC, this involved:

- Short digital form which requested feedback on the following areas:
  - Governance and administration
  - Committee's inputs
  - Conduct of Committee meetings
  - Interface with other Committees, including the Board
  - Committee's impact
  - Individual role on Committee

The feedback from this form was considered alongside other information, such as:

- Matters escalated to the Board
- IM Reflective sessions
- Auditor/Regulator feedback

The ARAC Chair and Lead Executive met to consider the Committee's effectiveness to date based on responses from the above digital form and feedback from auditors/regulators and other intelligence on how the Committee currently operates, where it has made an impact and what it has shone a light on, and the areas where it could have done better.

### **Asesiad / Assessment**

The ARAC Chair and Lead Director met to consider the responses from the digital form, completed by Committee members, along with feedback from auditors/regulators and other intelligence on how the Committee currently operates. The various forms of feedback have been collated and analysed to ascertain where the Committee has made an impact and what it has shone a light on, and the areas where it could have done better.

### **Look back at Committee's effectiveness over previous 12 months...**

The below analysis was based on responses from the digital form and feedback from auditors/regulators and other intelligence on how the Committee currently operates:

#### **What we want to continue to do next year**

- The governance and administration of Committee, agendas and meeting flow.
- Good support from EDs/Deputies, clinical workforce attendance, good understanding of risks, concise papers.
- Effective chairing, conducive to open, transparent and productive debate with constructive challenge from IMs.
- Clear boundaries with other Committees, provides the Board with clear, concise information and gaps in assurance.
- Private meetings used appropriately.
- Questioning is robust and proportionate
- Improvements on specific matters during the year (2023/24: Improvements in audit recommendation responsiveness, job planning, cleanliness standards, NICE)
- Positive atmosphere at meetings
- Good attendance and contribution from the multi-disciplinary clinical workforce
- Discussions reflected our Duty of Candor and [STEEP principles](#)
- Referring of items to other Committees

#### **What we want to change going forward**

- Targeted Intervention (TI) reporting focus on ARAC specific criteria and overall assurance arrangements
- Having larger agendas some months due to deferral of items
- Getting into operational detail (to be addressed through IM Development)
- Reviewing how alert items are reported and actioned by the Board
- Ensure single ownership of items across committees
- Working with report authors to improving the content of reports to ARAC

#### **Suggested areas of focus for 2025/26**

- TI governance and assurance
- Audit work that supports the delivery of TI domains
- Risks associated with financial loss, patient safety and operation effectiveness
- Operational governance and effectiveness of the operational structure, and its responsiveness to TI status

- Assurance on areas such as Transforming Urgent and Emergency Care (TUEC), discharge planning, cleanliness and the Health Board's overall internal audit assurance which deteriorated last year
- Continued scrutiny of audit and risk across all areas of the health board to drive improvement and compliance with agreed timeframes
- Re-looking at our risk appetite (*This will be done with Board in December 2024 and January 2025*)
- Financial position (*This will be overseen by Sustainable Resources Committee*)

**Actions to be taken forward:**

The following actions will be taken forward by the Director of Corporate Governance/Board Secretary:

Action	By whom	By when
To improve TI reporting to ensure focus is on areas aligned to ARAC and receiving assurance on TI governance reporting and arrangements	Director of Strategy and Planning	Jan 25
To focus on matters of alert and advise when reporting to the Board	ARAC Chair	Jan 25
To provide report writing and presenting guidance to operational teams as part of the implementation of the Operational Governance Structure	Director of Corporate Governance/Board Secretary	Apr 25
To consider including suggested areas of focus for 2025/26 on Committee Workplan	Director of Corporate Governance/Board Secretary/ Committee Services Officer	Feb 25
To undertake discussions with auditors on the focus of audit plans that supports the delivery of TI Domains and risks associated with financial loss, patient safety and operation effectiveness	Director of Corporate Governance/Board Secretary	Mar 25

**Argymhelliad / Recommendation**

The Audit and Risk Assurance Committee is asked to consider the outputs from the Committee Self-Assessment process, and to agree the actions to be taken to improve its effectiveness.

**Amcanion: (rhaid cwblhau)**

**Objectives: (must be completed)**

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	10.6 The Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous self-assessment and evaluation of the Committees performance and operation, including that of any sub-committees established. In doing so, account will be taken of the requirements set out in the NHS Wales Audit Committee Handbook.
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Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Parthau Ansawdd: Domains of Quality <a href="#">Quality and Engagement Act (sharepoint.com)</a>	Not Applicable
Galluogwyr Ansawdd: Enablers of Quality: <a href="#">Quality and Engagement Act (sharepoint.com)</a>	Not Applicable
Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable
Amcanion Cynllunio Planning Objectives	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a>	10. Not Applicable

**Gwybodaeth Ychwanegol:  
Further Information:**

Ar sail tystiolaeth: Evidence Base:	ARAC Terms of Reference ARAC Self-Assessment digital form results Auditor and Regulator feedback through Structured Assessment and Internal Audit reports
Rhestr Termau: Glossary of Terms:	Included within the report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg Parties / Committees consulted prior to Audit and Risk Assurance Committee:	ARAC Chair Director of Corporate Governance/Board Secretary

**Effaith: (rhaid cwblhau)  
Impact: (must be completed)**

Ariannol / Gwerth am Arian: Financial / Service:	No direct impacts
Ansawdd / Gofal Claf: Quality / Patient Care:	No direct impacts
Gweithlu: Workforce:	No direct impacts

<b>Risg: Risk:</b>	No direct impacts
<b>Cyfreithiol: Legal:</b>	No direct impacts
<b>Enw Da: Reputational:</b>	No direct impacts
<b>Gyfrinachedd: Privacy:</b>	No direct impacts
<b>Cydraddoldeb: Equality:</b>	No direct impacts