

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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	13 August 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Audit and Risk Assurance Committee (ARAC) Self-Assessment Outcome Report 2023/24 – Progress Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Rhodri Evans, ARAC Chair Joanne Wilson, Director of Corporate Governance/Board
SWYDDOG ADRODD: REPORTING OFFICER:	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 provide an update to the actions agreed by the Audit and Risk Assurance Committee (ARAC) in response to the outcomes from the ARAC Self-Assessment 2023/24 process.

Cefndir / Background

In February 2024, ARAC received a [report](#) which presented the outcomes of the ARAC Self-Assessment 2023/24 process. 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

Asesiad / Assessment

The following actions were agreed in response to the outcomes of the ARAC Self-Assessment 2023/24:

Action	By whom	By when	
Review report template to simplify reporting and strengthen focus on delivery, impacts and outcomes.	Director of Corporate Governance	Not Completed – revised date January 2025	This was delayed due to start of new Chair in May 2024. Feedback from the 2023/24 Self-Assessment process will be presented to the Board Seminar in August and this will inform the development of the future reporting template.
Update report writing guidance for authors to reflect the need to focus less on process and more on delivery, impacts and outcomes	Director of Corporate Governance	Not Completed – revised date January 2025	This was delayed due to start of new Chair in May 2024. Report writing guidance (Do's and Don'ts) is circulated with the call for papers, however guidance will be reviewed when new reporting template has been developed. The Health Board is also looking to outsource training for writing reports which will be informed by the outcomes of the 2023/24 Self-Assessment process.
Review the Committee Update Report to strengthen reporting to the Board on the key discussion points of the meeting, and the areas it needs to advise, assure and escalate to the Board.	Director of Corporate Governance	Completed	3As Report template has been developed and is used for Board reporting since May24.
Continue to meet weekly with Internal Audit and Audit Wales to oversee progress of reviews and take appropriate action to reduce delays.	Director of Corporate Governance	Completed	Weekly meetings are scheduled.
Discuss the deliverability of audit plans with both Internal Audit and Audit Wales, taking account of their staffing and resource, prior to approval by the Committee.	Director of Corporate Governance	Completed	This is undertaken at regular weekly meetings.
Consider developing a periodic legal and regulatory issues report for reporting to ARAC	Director of Corporate Governance	Not Completed	This requirement has been assessed, and any legal and regulatory issues will be included in the CEO Report to Board.

Support the Committee to handover matters to relevant Committees, where necessary, including internal and external reports.	Director of Corporate Governance	Completed	IA of Cleaning Standards was recently handed over to the Quality, Safety and Experience Committee.
<p>Committee workplan for 2024/25 to include suggested areas from digital form.</p> <ul style="list-style-type: none"> Continue to scrutinise and maintain our current governance, scrutiny and risk management Productivity, planned care and financial performance Targeted Intervention status, in particular the delivery of savings Governance of fragile services and operational governance Risk 	Committee Services Officer	Completed	These areas will be picked up through both the Audit Wales and Internal Audit plans. For example, through AW Structured Assessment, and reviews of operational governance arrangements, cost savings arrangements, planned care and management of outpatients. A Risk Assurance report is also provided regularly to ARAC.
Review Targeted Intervention (TI) Report to strengthen the assurance provided to ARAC on the delivery against WG directives and that they are delivering the intended outcomes for the organisation	Programme Director - Targeted Intervention	Completed	ARAC will be provided with an update on progress against all WG TI criteria and where possible, whether they are delivering the intended outcome, as part of the regular Escalation Update Report.

Argymhelliad / Recommendation

The Committee is asked to take an assurance from the progress made against the actions being undertaken 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 Committee's 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.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:	Not applicable

Datix Risk Register Reference and Score:	
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	Not Applicable
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	Not Applicable
Amcanion Strategol y BIP: UHB Strategic Objectives:	3. Striving to deliver and develop excellent services
Amcanion Cynllunio Planning Objectives	Not Applicable Choose an item.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:

Ar sail tystiolaeth: Evidence Base:	ARAC Terms of Reference ARAC Self-Assessment Outcome Report
Rhestr Termiau: Glossary of Terms:	Included within report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg Parties / Committees consulted prior to Audit and Risk Assurance Committee:	Not applicable

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.
Risg: Risk:	No direct impacts.
Cyfreithiol: Legal:	No direct impacts.

Enw Da: Reputational:	No direct impacts.
Gyfrinachedd: Privacy:	No direct impacts.
Cydraddoldeb: Equality:	No direct impacts.