

CTMUHB Audit and Risk Committee – Part 2
Assurance Report

Reporting Committee	CTMUHB Audit and Risk Committee – Part 2
Chaired by	Patsy Roseblade, Chair of the Audit & Risk Committee
In attendance for WHSSC	Stuart Davies, Director of Finance Helen Tyler, Corporate Governance Manager
Date of Meetings	22 August 2022
Report Author	Committee Secretary
Summary of key matters considered by the Committee and any related decisions made	
<p>The CTMUHB Audit & Risk Committee (ARC) provide assurance to the Joint Committee (JC) of the effectiveness of its arrangements for handling reservations and delegations. The Memorandum of Agreement states that the Audit Lead will provide reports to the JC following the Host Audit & Risk Committee meetings. This assurance report sets out the key areas of discussion and decision.</p>	
22 August 2022 – Audit & Risk Committee CTM Hosted Bodies – Part 2	
<p>1. National Imaging Academy Wales Risk Register (NIAW) Risk register Phillip Wardle (PW), Academy Director, presented the NIAW’s Risk Register and highlighted the three ongoing high risks which related to:</p> <ul style="list-style-type: none"> • Commissioned number of CR Specialist Trainees for Training at NIAW, • Amber/Red status in Gateway 5 Review related to NIAW’s Delivery Confidence Assessment for its future developments; and • NIAW’s access to capital funding. <p>The Committee noted the report.</p>	
<p>2. WHSSC Corporate Risk Assurance Framework (CRAF) Helen Tyler (HT), WHSSC Corporate Governance Manager, provided an update on the Corporate Risk and Assurance Framework (CRAF), which had been received by the Integrated Governance Committee and Quality & Patient Safety Committee on 9 August 2022. Members noted that as at 31 July 2022 there were 18 risks; 16 commissioning risks and two organisational risks.</p> <p>There were no commissioning risks that were either escalated or de-escalated since the last meeting. There was one new commissioning risk - Risk 38 (P/21/06) Neonatal Cots. It was reported that this was a new risk due to there</p>	

being insufficient neonatal cot availability across the south Wales region because of significant neonatal nursing shortages. **Risk (27) (P/21/15)** regarding Neonatal Cots had been closed as the cots that were previously closed at CVUHB had now re-opened.

HT explained that the rationale for closing the Neonatal cot risk and opening what may appear to be a similar risk was that the new risk was a much broader risk across the network and the previous risk was linked to the availability of cots in CVUHB.

HT also highlighted that following discussion at the Cardiac Commissioning Team on 27 July 2022 it was agreed to merge **risk 17 (CT045) Weight Loss Surgery** and **(CT047) Tier 4 Obesity Surgery** into **risk 19 (CT047) Tier 4 Obesity Surgery** due to the overlap of risks.

There were no organisational risks that were either escalated or de-escalated since the last meeting.

Risk 29 (CS/08) WHSSC Individual Patient Funding Request (IPFR) Terms of Reference (ToR) and governance – It was reported that a response was received from Welsh Government (WG) on 28 July 2022 confirming agreement for WHSSC to proceed with a review of the WHSSC ToR and a limited review of the All Wales IPFR policy. Progress has been made with the ToR engagement plan, which will be presented to JC on 6 September 2022.

Risk 33 (CS/10 CD03) Welsh Government Priority Delivery Measures – It was reported that the JC held a recovery workshop on 12 July 2022 where comprehensive presentations were received from providers on recovery trajectories across NHS Wales. These trajectories will be kept under review.

It was reported that a risk management workshop is planned for 20 September 2022 to review how the Risk Scrutiny Group process is working, to consider risk appetite and tolerance levels across the organisation and to discuss developing a Joint Assurance Framework (JAF).

The Committee **noted** the report.

3. WHSSC Internal and External Audit Recommendations Tracker

Stuart Davies (SD), WHSSC Director of Finance, gave a progress report on the implementation of internal and external audit recommendations and members noted:

- Two recommendations regarding the Positron Emission Tomography (PET) Scanner service were now past their planned due dates, both of which have revised due dates, while a further two recommendations have not yet fallen due,
- The one outstanding recommendation concerning the Women's and Childrens Commissioning Team had been completed; and

- Three recommendations were outstanding in relation to the report on Risk Management. However, two of these had not reached their planned due dates.

Members noted the positive progress made against the seven external audit recommendations outlined in the Audit Wales report "WHSSC Committee Governance Arrangements".

The Committee **noted** the report.

4. WHSSC Progress report on the PET Scanner

SD provided an update on progress to implement the recommendations from the Internal Audit Report on the Positron Emission Tomography (PET) Scanner Programme. Members noted that 11 out of the 15 recommendations had been achieved and closed. Four recommendations had passed their planned due dates and two of these actions had revised due dates of September 2022 due to delays in receiving plans from Health Boards. Two further recommendations were removed from the register to be managed through the PET Programme. Members were assured on the progress made and in particular the project support resources now agreed and in place. The Chair requested a further update on progress in 6 months.

5. Emergency Ambulance Services Committee (EASC)/National Collaborative Commissioning Unit (NCCU) Update

Stephen HARRY (SH), Chief Ambulance Services Commissioner (CASC), presented the EASC Risk Register and highlighted that there were two ongoing risks which scored 15 and above, and that three ongoing red risks which included ambulance performance and handover delays. The EASC risk register had been received and endorsed by the EASC Management Group in June 2022 and approved by the EASC Joint Committee in July 2022. SH also presented the EASC action plan which captures all key activities in one document with a RAG rating and provided some updates on key activities being undertaken. The actions were allocated to the Welsh Ambulance Service NHS Trust (WAST), Health Boards and combined Health Board and WAST Actions and members found the table to be a helpful addition to the report.

Gwenan Roberts (GR), EASC Committee Secretary/Assistant Director Corporate, gave an update on the following;

- EASC Assurance Framework,
- EASC Audit Recommendations tracker; and
- NCCU Risk Register.

GR advised that the EASC risk register had been received and endorsed by the EASC Management Group in June 2022 and approved by the EASC Joint Committee in July 2022. Members noted that there were two ongoing risks which scored 15 and above, and that three ongoing red risks.

GR presented the EASC Assurance Framework. This Framework had been developed incorporating the host body approach and had been received and endorsed at the EASC Management Group in June 2022 and was approved by the EASC Joint Committee in July 2022.

GR gave a progress report on the implementation of audit recommendations and members noted that there were four areas outstanding, which were being progressed.

GR presented the NCCU risk register.

The Committee **noted** the report.

SD noted that WHSSC were currently reviewing its Financial Limits and Scheme of Delegation and this would be presented to a future meeting.

Matters referred to other Committees

None

Date of next scheduled meeting	11 October 2022
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