

**Audit & Risk Assurance Committee**  
**TABLE OF ACTIONS**  
**Arising from Meeting held on 15 April and 8 May 2025**

Minute No.	Meeting Date	Subject	Action	Lead	Timescale	Progress/Date Achieved
AC(25)04	11/02/2025	<b>Mortuary Services (Limited Assurance)</b>	To report the outcome of discussions at the Regional Management Meeting and Regional Mortuary Operations meeting around key issues and lessons learnt relating to the programme	<b>AC</b>	<b>April June 2025</b>	<p><u>15 April 2025</u> Regional ODN Operations Group has been unable to meet due to quoracy. A review of that is being undertaken. The Mortuary Management Group continues to meet to progress the actions arising from the audit.</p> <p><u>24 June 2025</u> The Regional Pathology Programme has revised its governance arrangements to reflect discussions held at both the Hywel Dda and Swansea Bay UHB Public Board Meetings in May 2025. The Vice-Chairs of both Health Boards meet with the senior team involved in progressing the Pathology Programme on a fortnightly basis, to gain assurance on progress and pace. The focus is currently on developing a set of options to address the immediate estate issues in Cellular Pathology, which will influence how the ODN model will progress.</p>

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AC(25)37	15/04/2025	Table of Actions	AC(25)04 – to provide a further update to the June 2025 meeting	AC	June 2025	See AC(25)04, above.
AC(25)39	15/04/2025	Escalation Status Update Report	To add to future iterations of the report details of any deteriorating measures	SA	June 2025	<b>Complete</b> Future reports will reflect this aspect.
AC(25)41	15/04/2025	Standing Orders, Standing Financial Instructions and Scheme of Delegation	Standing Orders: To consider whether any changes can be made to clarify the statements around numbers of IMs	JW	May 2025	<b>Complete</b> As HDdUHB is required to follow the Model Standing Orders issued by Welsh Government, it will not be possible to amend the potentially contradictory statements in paragraphs 1.1.4 and 1.1.9; however, the HDdUHB website will make it clear that there are 9 Independent Members, not including the Chair and Vice-Chair.
			Scheme of Delegation: To check the implications of the proposed change regarding Commissioning of CHC and FNC (removal of the wording 'outside panel')	JW	June 2025	<b>Complete</b> Responsibility for authorising emergency care packages or changes to care packages outside of panel lies with the Director of Primary Care, Community Strategy and Long Term Care, hence removal of the term 'outside panel' for those entries in the Scheme of Delegation where responsibility is further delegated.
AC(25)43	15/04/2025	Audit Wales Audit Plan 2025/26	To forward plan the indicative reporting dates onto ARAC's Workplan for 2025/26	CM	June 2025	<b>Complete</b>

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AC(25)46	15/04/2025	Cancer Services in Wales	To obtain more detail around the availability of Cancer data/information	UP	June 2025	<p><b>Complete</b></p> <p>The report explains that there are gaps in published data across the patient pathway including:</p> <ul style="list-style-type: none"> <li>• ‘open’ pathway waiting time to show how many patients are currently waiting for treatment;</li> <li>• activity and timeliness leading up to referral;</li> <li>• activity and timeliness after first treatment starts, including follow-up tests, ongoing treatment and access to palliative and end-of-life care;</li> <li>• data to track progress against the ambitions in the Quality Statement for Cancer – particularly prevention and early detection of cancer;</li> <li>• data to understand how equitable cancer services are, including ethnicity of patients, and patient outcomes and experience by sex and for children and young people; and</li> <li>• timeliness data for Powys resident treated by other providers.</li> </ul> <p>Individual health boards may have additional unpublished data to understand cancer services.</p>

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			To clarify with colleagues what other methodologies/ performance measures were considered and whether the one selected was felt to be the best	UP	June 2025	<b>Complete</b> The cancer services report focuses on national arrangements to drive improvements in cancer services. A key part of the national approach is the Welsh Government's target that 75% of cancer patients start treatment within 62-days of the first suspicion of cancer. The report examines performance against the target alongside demand and activity trends. The report explains that the Welsh Government's oversight is narrowly focused on the 62-day target. The target is a useful barometer to understand cancer services but there are no measures to understand other aspects of cancer services including achievement of the principles in the Welsh Government's Quality Statement for Cancer.
AC(25)47	15/04/2025	Clinical Audit Update	To discuss with the Medical Director the issue of ongoing funding to support the AMAT system	SD	June 2025	<b>Complete</b> Discussed with the Medical Director, who will consider this requirement and review opportunities within the Medical Directorate. It is noted that this funding stream is supplying a number of Corporate and Operational functions. If there are challenges identifying the ongoing

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						budget, the Medical Director will liaise with the Director of Finance.
			To consider how Clinical Audit might contribute to a wider piece of work around inefficiencies in Patient/ Clinical Pathways and to discuss this with the Chair of QSEC	JW/SD/ HT	June 2025	<b>In Progress</b> Meeting scheduled for 16 June 2025.
AC(25)49	15/04/2025	Internal Audit Plan 2025	To change (under Appendix C, para 5.1) 'nominated executive lead' to 'nominated director lead'	JJ	June 2025	<b>Complete</b> Noted in IA Plan and Charter.
AC(25)63	15/04/2025	Financial Assurance Report	To include in future reports details of losses and write offs under £5k	HT	June 2025	<b>Complete</b> Future reports will reflect all losses and write offs.
			To confirm the amount paid to the Health Board's Tax Advisors in resolving the BGH Front of House Scheme VAT issue	HT	June 2025	<b>Complete</b> Fees of £78,500 were paid to the Health Board's Tax Advisors in respect of this VAT issue.
AC(25)74	08/05/2025	Internal Audit Plan Progress Report	To schedule a meeting between Cllr. Evans, Mr Johns and Mrs Wilson to discuss the Draft HOIA Opinion, when available	JW	June 2025	<b>Complete</b> Meeting held 22 May 2025 to discuss the Draft Head of Internal Audit Opinion.
AC(25)75	08/05/2025	Executive Team Governance (Substantial Assurance)	To check whether there is a Workplan for the V&S Group	HT	June 2025	<b>Complete</b> Workplan has been shared with Internal Audit.
			To consider whether, for the AHMWW Group, Deep	LD	June 2025	<b>Complete</b>

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			Dives into specific areas would be appropriate.			Draft work programme is scheduled for discussion at the next AHMWW Group meeting on 3 July 2025, where this action will be discussed.
AC(25)85	08/05/2025	Assurance Report on Board Effectiveness	To seek clarity from Welsh Government whether there will be a national Self-Assessment tool	JW/SA	June 2025	Complete Email sent to Welsh Government on 20 May 2025. Response awaited.
AC(25)87	08/05/2025	Draft Performance Overview	To send notes of thanks to Ms Hughes Moakes, Ms Tracy Price and Ms Hancock	HT/JW	June 2025	Complete
AC(25)88	08/05/2025	Draft Accountability Report	To consider using a different photograph on the front page, and (on page 12) to amend 'Finance and Planning Committee' to read 'Finance and Performance Committee'	JW/CW	June 2025	Complete
AC(25)90	08/05/2025	Draft Annual Accounts 2024/25	To investigate and advise Members further regarding the increase in provision for Clinical Negligence (Primary Care)	HT	June 2025	Complete Email circulated to Members on 13 May 2025.
			To update Audit Wales regarding progress on the HOIA Opinion	JW	June 2025	Complete