

**COFNODION Y CYFARFOD PWYLLGOR ARCHWILIO A SICRWYDD RISG
CYMERADWYO / APPROVED MINUTES OF THE AUDIT AND RISK ASSURANCE
COMMITTEE MEETING**

Date and Time of Meeting:	9.30am, 16 th August 2022
Venue:	Microsoft Teams

Present:	Mr Paul Newman, Independent Member (Committee Chair) Mr Winston Weir, Independent Member (Committee Vice-Chair) Associate Professor Chantal Patel, Independent Member Mr Maynard Davies, Independent Member Mrs Judith Hardisty, Vice-Chair, HDdUHB
In Attendance:	Mr James Johns, Head of Internal Audit, NWSSP Ms Sophie Corbett, Deputy Head of Internal Audit, NWSSP Mr Martyn Lewis, IM&T Audit Manager Mrs Joanne Wilson, Board Secretary Mr Huw Thomas, Director of Finance Mrs Charlotte Beare, Assistant Director of Assurance & Risk Ms Clare James, Audit Wales Ms Rhian Bond, Assistant Director of Primary Care, deputising for Ms Jill Paterson, Director of Primary Care, Community & Long Term Care Mr Ben Rees, Head of Local Counter Fraud Services (part) Mr John Evans, Assistant Director, Medical Directorate (part) Mrs Lisa Gostling, Director of Workforce and Organisational Development Ms Liz Carroll, Director of Mental Health and Learning Disabilities (part) Mrs Karen Amner, Directorate Business Support Manager (part) Mr Murray Gard, NSSWP (part) Ms Amanda Legge, All Wales, Post Payment Verification Manager (part) Mr Rob Elliott, Director of Estates, Facilities and Capital Management (part) Ms Felicity Quance, NSSWP (part) Ms Katie Lewis, Committee Services Officer (minutes)

Agenda Item	Item	
AC(22)138	Introductions and Apologies for Absence Mr Paul Newman, Audit & Risk Assurance Committee (ARAC) Chair, welcomed everyone to the meeting, and extended a warm welcome to Professor Chantal Patel, attending her first ARAC meeting. Apologies for absence were received from: <ul style="list-style-type: none"> Ms Anne Beegan, Audit Wales Mrs Eifion Jones, NWSSP Ms Jill Paterson, Director of Primary Care, Community & Long Term Care 	
AC(22)139	Declaration of Interests No declarations of interest were made.	

AC(22)140	<p>Minutes of the Meetings Held on 9th and 21st June 2022</p> <p>The Minutes from the meetings held on 9th and 21st August 2022 were approved as an accurate record.</p>	
AC(22)141	<p>Table of Actions</p> <p>AC(21)118: To explore other digital solutions for obtaining and collating information for Declaring, Registering and Handling Interests, Gifts, Hospitality, Honoraria and Sponsorship: Mr Huw Thomas apologised for the delay in progressing this action due to capacity challenges within the Digital Solutions team, with the small team deployed to clinical projects. A revised date will be provided at the next meeting, following a timescale feasibility discussion with the team.</p>	
AC(22)142	<p>Matters Arising</p> <p>Mr Andrew Carruthers provided an update regarding a recent cyber-attack on the provider of the Primary Care, Out of Hours and 111 electronic data system. It was initially advised that the outage would last a few days; however, it is now expected to last for a number of weeks. A national response is underway via Digital Health and Care Wales (DHCW) and a Health Board response group has been established to mitigate risks and track the actions taken, with Members noting that the impact on front door services has not occurred as anticipated. Recognising the significant operational challenges the outage has caused, Mr Thomas suggested that a robust review is undertaken by Audit Wales on lessons learned and the potential consequences of an ongoing relationship with the supplier of the system.</p>	
AC(22)143	<p>Tackling the Planned Care Backlog in Wales</p> <p>Mr Carruthers presented the Auditor General's report on Tackling the Planned Care Backlog in Wales, advising the Committee that the report does not offer any surprises, with the recommendations being fairly consistent with the Health Board's ongoing response.</p> <p>Referring to Recommendation 3 within the report, which advises Welsh Government to work with relevant NHS bodies to develop a workforce plan to build and maintain planned care capacity to support recovery and tackle the waiting list backlog by Autumn 2022, Mrs Hardisty noted that the restricting factor in the staffing shortfall is workforce availability and allocating additional funding may not resolve the gap. Mr Carruthers assured the Committee that the workforce challenges are being fed through to Welsh Government and the National Recovery Director on a monthly basis and undertook to explore Professor Chantal Patel's suggestion regarding consulting with the Ethics Committee. To mitigate the shortfall, Mr Thomas raised the significance of ensuring staff are working in the most efficient and effective way, utilising digital systems such as the Lightfoot System to support waiting list management, and reviewing ways of working in line with Value Based Health Care principles.</p> <p>In response to a suggestion made regarding exploring opportunities to refer patients to private sector services, Mr Carruthers highlighted the national pressures, and also raised potential sustainability challenges if the Health Board was to go down this route.</p>	AC

	<p>Referencing the modelling assumptions on Exhibit 8 of the report, Mr Davies enquired whether the indication of timescales for recovery are fair from the Health Board's point of view. In response, Mr Carruthers advised that they are fairly consistent with the Health Board's anticipated level of activity to enable recovery from the backlog, if slightly lower; however, highlighted the unknown impact of 'missing' referrals which were not carried out due to the COVID-19 pandemic and which have yet to emerge. Also, the question of how long this needs to be considered a risk.</p> <p>Members were pleased to note the national workforce plans in development and the discussions underway with Welsh Government, and offered support to raise awareness of the workforce availability challenges if required. Mr Carruthers assured the Committee of regional work underway to maximise resources and facilities to reduce waiting times and exploring all opportunities to work more efficiently.</p>	
	<p>The Committee NOTED the update provided on the All Wales Report on Tackling the Planned Backlog in Wales.</p>	

<p>AC(22)144</p>	<p>Withybush Fire Precautions Phase 1</p> <p><i>Mr Rob Elliott joined the Committee meeting.</i></p> <p>Ms Felicity Quance presented an update on the review of delivery and management arrangements of the Phase 1 Withybush Fire Precautions works, which is contributing to addressing the fire safety notices at Withybush General Hospital (WGH) within a timescale agreed with the Mid & West Wales Fire Rescue Services (MWWFRS).</p> <p>The report provides a reasonable level of assurance, with an implementation date allocated to the majority of the 14 recommendations. An interim cost marking exercise will take place to review affordability going forward, with the required field work delayed to September 2022.</p> <p>The Committee received an update on an issue with a Supply Chain Partner, with a delay in the architect providing costing on completion of works on a zone basis as part of the evidence base for value reporting. Mr Rob Elliott advised the Committee that a meeting has been scheduled with the directors of the company, and the Health Board will continue to monitor and escalate issues accordingly with performance measures being fed to Welsh Government via KPI's. Mr Thomas added that improvements are required in post project assessments and reporting to Shared Services and undertook to liaise with Mr Elliott to suggest a deep dive into Specialised Estates Services at the Shared Services Partnership Committee.</p> <p>The Committee NOTED the Withybush Fire Precautions Phase 1 (Reasonable Assurance) report.</p>	<p>HT</p>
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<p>AC(22)145</p>	<p>Fire Governance Update</p> <p>Ms Corbett presented the Fire Governance Update and the action plan developed to address the recommendations identified in the Fire Safety Governance review, which is being monitored at the Health & Safety</p>	
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	<p>Committee. All actions were reported as complete in July 2022; however, the full benefits of these actions have not yet been realised in three cases which are explained within the report.</p> <p>Mr Carruthers commended the Estates Team who have implemented proactive measures to improve and monitor fire safety, including undertaking internal inspections, managing risk and addressing before issues materialise.</p> <p>Mr Thomas presented the proposed changes for the Oracle Financial system's scheme of delegation for the Fire Schemes at WGH and Glangwili General Hospital (GGH) and the Committee agreed to recommend the updates to Public Board, due to the specialised nature of the works and appropriate budget monitoring.</p> <p><i>Mr Elliot left the meeting.</i></p>	<p>PN/JW</p>
	<p>The Committee NOTED the Fire Governance Update (Substantial Assurance) Report</p>	

<p>AC(22)146</p>	<p>Counter Fraud Update</p> <p><i>Mr Ben Rees joined the meeting.</i></p> <p>Mr Ben Rees presented the Counter Fraud (CF) Update report, highlighting the following:</p> <p>Inform and Involve – Three CF presentations were delivered to three of the Overseas Nurses cohorts to raise awareness of fraud, bribery, corruption and recent scams involving immigration and rental properties.</p> <p>Prevent and Deter – the CF Department has commenced two exercises into overpayments of salary. The first exercise will review the 2021/22 overpayment data and establish which of the directorates / supervisors had the most overpayments linked to them. And secondly, a review of staff who were recruited in response to the pandemic and are still showing as in post (as of July 2022). Over 300 such employees were identified as being paid in July 2022. Each of the employees' supervisors will be contacted and asked to confirm that the subject is still in post and on the appropriate contract.</p> <p>Mr Rees updated Members on the Declaration of Interest exercise undertaken which identified that a number of individual staff members are linked to organisations providing services to the Health Board, the risks were highlighted to supervisors following assessment; however, no inappropriate procurement of services were apparent.</p> <p>Referring to the imminent challenges with the rising cost of living, Mr Thomas highlighted the potential for an increase in fraudulent activity in regards to mileage claims and timesheets and undertook to explore ways to raise awareness, support staff and mitigate the potential risks with Mrs Lisa Gostling and Mr Rees.</p>	<p>HT/ LG/ BR</p>
	<p>The Committee RECEIVED for information the CF Update Report and appended items.</p>	

AC(22)147	<p>Counter Fraud, Bribery and Corruption Policy Review</p> <p>The Committee received and approved the Counter Fraud, Bribery and Corruption Policy, noting additional information contained within on the new Government Functional Standards and the role of the Fraud Champion, which is undertaken by Mrs Joanne Wilson, Board Secretary.</p> <p><i>Mr Rees left the Committee meeting.</i></p> <p>The Committee APPROVED the Counter Fraud, Bribery and Corruption Policy</p>	
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AC(22)148	<p>Financial Assurance Report</p> <p>Mr Thomas introduced the Financial Assurance Report, highlighting the following updates:</p> <p>2.2.1 Breaches of the No PO, No Pay Policy – At the end of June and July 2022 there were a total of 83 breaches with a combined value of £168k. The Procurement Team are putting in place measures to ensure due processes are followed and Purchase Order numbers are being referenced on invoices and not created retrospectively.</p> <p>2.2.3 Single Tender Actions (STA) – The Committee noted a period of low numbers and value of STAs being awarded, which will be monitored.</p> <p>2.2.7 Blackline – The account reconciliation module has been successful with ongoing work in the implementation of the project phase for the transaction matching module.</p> <p>2.3.1 Overpayment of Salaries – Mr Thomas updated Members that there is now a period of steady decline in balances outstanding from overpayment of salaries. The new Underpayments and Overpayments of Salary Policy is now in operation, effective from 29th June 2022 and the Overpayments Task and Finish Group is undertaking a number of actions to reduce the financial impact.</p> <p>In response to a comment from Mr Winston Weir, Mr Thomas clarified that the contract awarded to CP Plus for the management of the car parking extension programme is for a one year period and undertook to check any potential inflation consequences. Mr Thomas further agreed to clarify the details for the MITIE Grounds and Gardens Maintenance contract extension and establish which sites are included for the £46,969.00 costing, and also noted feedback from the Committee regarding the social enterprise opportunities in using more local providers.</p> <p>In response to Mr Maynard Davies’ query in regards to the underpayment of salaries, and the number of individual members of staff the total value is referring to, Mr Thomas recognised the lack of detail provided within the report in regards to the individual impact and also explained a number of reasons why emergency payments are</p>	<p>HT</p> <p>HT</p>
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	<p>made, such as post commencement following payroll processing deadline.</p> <p>With reference to the STA awarded for specialist training and test of competence for internationally registered nurses as part of a recruitment campaign, Mr Davies highlighted a comment within the report that states ‘the Health Board does not have time to go through the usual three month procurement process’ and in response Mr Thomas acknowledged the frequent delay in escalating requests and assured Members that the Procurement Team have been asked to consider an alternative process which can support the limited timeframes.</p> <p>In response to a comment made regarding the exploration of local provision for competence testing for nurses, Mr Thomas explained that the examinations are undertaken at centres of excellence which are not currently available locally. Health Education and Improvement Wales are looking in to a more sustainable solution; however, currently, the facilities are not in place.</p> <p>The Committee received the Heat Map for End of Year Processing for the Pension Scheme. Mr Thomas undertook to raise with Mrs Gostling the potential risks of staff withdrawing from the Pension Scheme, due to the imminent cost of living challenges, for discussion at the People, Organisational Development & Culture Committee (PODCC).</p> <p>Concerns were raised about the projected level of overspend which is contributed to by the re-allocation of approximately £27m of expenditure that had previously been considered to be COVID-19 related expenditure. The logic for this was noted and appreciated but the treatment of this expenditure by the Health Board seems to be different from the approach being taken by other Health Boards. AW were asked to comment and agreed to make further enquiries and consider the position.</p>	<p>HT</p> <p>AW</p>
	<p>The Committee DISCUSSED and NOTED the Financial Assurance report.</p>	

<p>AC(22)149</p>	<p>Post Payment Verification (PPV) End Of Year Report</p> <p><i>Ms Amanda Legge joined the Committee meeting.</i></p> <p>Ms Amanda Legge presented the PPV End of Year Report with the following key updates highlighted:</p> <ul style="list-style-type: none"> • PPV reviews have been successfully carried out via MS Teams for a number of services that store patient records electronically, including the Ophthalmic Service. • NWSSP is currently introducing a pilot for two new pharmacy service checks by PPV, the Quality and Safety Scheme and the Collaborative Working Scheme. Once approved by the Management Board, the process will be implemented nationally. • A national pilot for checking eligibility of patients who qualify for Dispensing is underway with the aim to roll out in the coming year. 	
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	<ul style="list-style-type: none"> • PPV Roadshow events will take place in the autumn 2022 to engage with and gather feedback from services. <p>Ms Legge apologised for an error in the GMS snapshot shared with Members and committed to share the revised report with Members.</p> <p>In response to Mrs Judith Hardisty’s request for clarification on the RAG banding within the PPV report, Ms Legge explained that the rating is explained on page 4.</p> <p>In light of the imminent new contracts for Primary Care providers and the Accelerated Cluster programme, Mrs Hardisty enquired whether the PPV snapshot reporting process should be revised. It was agreed that PPV monitoring is an essential management tool for the Primary Care Directorate and Ms Rhian Bond undertook to discuss with the Director of Primary Care, Community & Long Term Care reviewing Committee reporting arrangements, to ensure that appropriate updates are provided going forward.</p>	<p>AL</p> <p>RB</p>
	<p>The Committee RECEIVED ASSURANCE from the PPV End of Year Report.</p>	

<p>AC(22)150</p>	<p>General Medical Services (GMS) PPV Update</p> <p>Ms Rhian Bond provided an update on General Medical Services (GMS) PPV, informing the Committee that focused work will take place to limit re-occurrence of errors, recognising unavoidable human error. The Directorate would welcome rolling out the PPV process to other services as a management tool.</p> <p>In response to a comment made on Practice D within the report and the new Practice Manager who has been unable to verify the accuracy of historical claims, Ms Bond assured Members that the team work closely with Counter Fraud colleagues, keen to identify issues as early as possible and the risk would have been reviewed as part of the process.</p> <p><i>Ms Legge left the meeting.</i></p> <p>The Committee NOTED the contents of the report.</p>	
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<p>AC(22)151</p>	<p>Audit Wales Update Report.</p> <p>Ms Clare James provided the key updates from the Audit Wales Update Report:</p> <ul style="list-style-type: none"> • Orthopaedics Review: The work will inform the recovery planning discussions which are starting to take place locally and help identify where there are opportunities to do things differently as the service looks to tackle the significant elective backlog challenges. • Review of operational governance arrangements – Mental Health & Learning Disabilities: An update on the review of governance arrangements within the MH&LD directorate will be reported towards the end of the year. • A review of the unscheduled care system and an analysis of how actions impact on patient flow: A web based project briefing 	
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	<p>has taken place and the review is due to commence in September 2022.</p> <ul style="list-style-type: none"> • Workforce planning review: Arrangements are being made to analyse national and local actions to mitigate the shortfall, with a commencement date of the review to be confirmed. 	
	The Committee NOTED the update provided.	

AC(22)152	<p>The Welsh Community Care Information System (WCCIS) Report</p> <p>Ms James presented the Welsh Community Care Information System (WCCIS) Update Report from Audit Wales, which provides details regarding the challenges being faced in the national roll out of the system, a number of which are summarised below:</p> <ul style="list-style-type: none"> • Ongoing performance issues • The staggered implementation across Health Boards nationally has meant that the functionality is not being used to its full potential • Value for money, with the system proving costly <p>The Committee shared the concerns regarding a system that is not robust or user-centric, with Mr Thomas commenting that those organisations who have not yet adopted the system have been wise in their hesitancy. Mr Davies shared feedback from the Digital Director that alternative systems are being explored internally, with similar information-sharing functions.</p> <p>Concerns were conveyed at a Regional Partnership Board meeting that key Local Authority partners were not aware of the system roll out and that the apparent disconnect and lack of engagement contradicts the findings of the report.</p> <p>The Committee agreed with concerns raised by Mr Thomas and noted that the Health Board’s response will be prepared by the Digital Director and shared with ARAC at the next meeting.</p>	
	The Committee NOTED the update provided.	HT/AT

AC(22)153	<p>Internal Audit Plan Progress Report</p> <p>Mr James Johns presented the Internal Audit Plan Progress Report and the outcome of the finalised audits, noting that certain management responses have been received since publication of this report. Members noted that the IT Infrastructure and the Directorate Governance audits have not met the allocated deadline and, in the absence of key individuals, responsibility has been delegated to alternative members of staff to progress actions.</p> <p>Requesting clarification on the request for a follow up audit on the Blackline Financial System, Mr Thomas explained that the previous report was advisory and a finalised report is required with the inclusion of an assurance rating.</p>	
	The Committee RECEIVED ASSURANCE with regard to the delivery of the Internal Audit plan for 2022/23 year, the outcomes from individual audit reports and approve updates to the plan as required.	

AC(22)154	Overpayment of Salary	
	<p>Ms Sophie Corbett presented the Overpayment of Salary Update Report and highlighted a significant increase in overpayments in 2021/22, primarily due to the late submission of payroll documentation and management submitting paper based payroll changes as opposed to utilising ESR Manager Self Service portal, for example the termination of COVID-19 fixed term contracts. The Overpayments Policy has been updated to deal with the cause of overpayments rather than the process for recovery, and Internal Audit observed examples of recent engagement with directorates to reinforce the need for timely changes to payroll data.</p> <p>Ms Corbett updated Members that common feedback from managers includes service pressures and uncertainty around the termination process. The Committee received assurance that a recommendation has been made for the Workforce and Organisational Development colleagues to scrutinise the monthly under and overpayment of salaries reports to identify themes and trends and engage with managers to identify the root causes of overpayments, and provide the necessary support and guidance to prevent recurrence which will be picked up via the Operational Managers Group.</p> <p>In response to a request for clarity on managers' responsibility in monitoring payroll expenditure, Mr Thomas suggested that the expectation for management is reviewed at an Executive Team meeting.</p> <p>Referencing the monitoring of overpayments and the management response to the requirement to provide an SBAR report to be submitted to the Workforce & OD Business Group on a quarterly basis, Mr Weir asked whether there is scope to make the reporting more frequent for tracking purposes and also whether the Business Group includes financial and payroll colleagues. Mrs Gostling confirmed that the report can be submitted more frequently if required, that there is financial representation on the group and that the meeting feeds into the operational business group.</p>	HT
	The Committee NOTED the Overpayment of Salaries (Limited Assurance) report.	
AC(22)155	Public Enquiry Preparedness	
	<p>Ms Corbett presented the Public Enquiry Preparedness review, which provides substantial assurance for the resources and robust arrangements in place for the storage of evidence relating to the Health Board's COVID-19 response. The Prime Minister published 'UK Covid-19 Terms of Reference' in June 2022, and the Inquiry team will now begin contacting relevant organisations to request evidence, with public hearings expected to be held in 2023.</p>	
	The Committee NOTED the Public Enquiry Preparedness Report.	
AC(22)156	Deployment of Welsh Patient Access System (WPAS) in to Mental Health and Learning Disabilities (MHL D)	

	<p>Mr Martyn Lewis presented the WPAS report and provided an update on the follow-up review of the local deployment of the WPAS into the MHLD directorate following a request by the Executive Director and an evaluation of progress against outstanding recommendations from the initial review. The findings provide substantial assurance with significant progress from the 2021/22 audit, with three of the four remaining actions carried out and one action remaining which is to progress the testing plan.</p> <p>Mrs Karen Amner updated Members that the testing plan is being finalised, in partnership with Informatics colleagues following a number of required changes, with a further 6 services on schedule to be implemented by the end of the calendar year. Due to the ongoing work to finalise the testing plan, no definitive target date has been agreed for the next stage of the roll out. The Committee received assurance that the system will improve reporting mechanisms in the service areas with the largest waiting times, and administrative support will be provided to introduce the system.</p> <p>In response to an enquiry as to whether the Children’s Neurodevelopmental Service will form part of MHLD or the Community Paediatrics Service, Mrs Amner explained to Members that the pathways will be mapped out to ensure system interaction. The complexities involved with implementing the pathway interaction operationally were noted by the Committee, and despite teething problems with management of waiting times, specifically in Psychology Services, the improving position was recognised and it was agreed that the system will provide better intelligence going forward.</p> <p><i>Ms Liz Carroll and Mrs Karen Amner left the meeting.</i></p> <p>The Committee NOTED the Deployment of WPAS into the MHLD Directorate (substantial assurance) Report</p>	
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AC(22)157	National Internal Audit Reports	
	None to report.	

AC(22)158	<p>The Outcome of the Committee's Self-Assessment of Effectiveness 2021/ 22</p> <p>Mrs Joanne Wilson presented the outcome of the Committee’s Self-Assessment of Effectiveness report 2021/22, thanking Members for the feedback provided. Members attention was drawn to key areas for improvement, such as assurance mechanisms for reporting risk management at other committees, attendance management and to utilise the audit tracker for an improved focus on outstanding recommendations.</p> <p>Highlighting feedback received that questioning can become challenging towards staff who are invited to the Committees, which may cause a risk that issues do not get escalated, Mr Newman suggested some self-reflection for more effective discussions.</p> <p>The Committee RECEIVED ASSURANCE that any actions from the ARAC Self-Assessment 2021/22 are being progressed within the agreed timescales</p>	
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AC(22)159	Audit & Risk Assurance tracker	
	<p>Mrs Charlotte Wilmshurst presented an update on the Audit and Risk and Assurance Tracker and progress in respect of the implementation of recommendations from audits and inspections. The following was highlighted:</p> <ul style="list-style-type: none"> • The details of the recommendations for each service are included within the Audit Tracker Summary Per Service / Directorate' table, with a decrease highlighted in the number of recommendations that have gone beyond six months of their original completion date to 30 from 36 reported in June 2022 • MHLD and Women's and Children's Services are highlighted as areas of performance concern with overdue recommendations. The recommendations will be raised with the Executive Leads and the Committee noted estates reliant updates and the revision of governance arrangements within MHLD as mitigating factors. • An annual review of the Audit Tracker with Executive Leads is planned for late autumn, to review the current relevancy of audit recommendations given the age of some the recommendations and the context the Health Board is currently working within. 	
	The Committee RECEIVED ASSURANCE on the rolling programme to collate updates from services on a bi-monthly basis in order to report progress to the Committee.	
AC(22)160	Any Other Business	
	There was no other business reported.	
AC(22)161	Date and Time of Next Meeting	
	9.30am, 18 th October 2022	