## Audit & Risk Assurance Committee TABLE OF ACTIONS

## Arising from Meeting held on 20th April and 5th May 2021

Minute No.	Meeting Date	Subject	Action	Lead	Timescale	Progress/Date Achieved
AC(20)175	20/10/2020	Update on Escalation/Targeted Intervention Status	To provide a six monthly assurance report.	SM	April June 2021	No further update to report at this time.  Forward planned for 22 <sup>nd</sup> June 2021 meeting.
AC(20)186	20/10/2020	Bronglais General Hospital Directorate Governance Follow-up (Reasonable Assurance)	To discuss the reporting arrangements across all directorates to ensure there is a standardised approach that provides assurance without causing unnecessary additional work.	AC	April August 2021	Being taken forward. To be addressed by April 2021.  Update for April 2021 ARAC meeting: Deferred due to the second wave of COVID-19 Pandemic. Governance structures and development work within Operational functions will be reviewed after completion of the Annual Recovery Plan in June 2021.  Update to be obtained for 24th August 2021 meeting.
AC(20)190	20/10/2020	Internal Audit RCP Medical Records Keeping Standards (Reasonable Assurance) Update	To provide a progress update in 9 to 12 months' time.	PK	October 2021	Forward planned for 19 <sup>th</sup> October 2021 meeting.

Minute No.	Meeting Date	Subject	Action	Lead	Timescale	Progress/Date Achieved
AC(21)08	23/02/2021	Financial Assurance Report	To present a strategy document to Finance Committee around encouraging the purchase of products and services from local firms.	HT	March April June 2021	Not currently included on the Finance Committee work programme; further discussion scheduled for May 2021.
AC(21)25	23/02/2021	Capital Assurance Follow-up (Reasonable Assurance)	To take forward the suggestion that Post Project Evaluations be considered at the Capital Estates and IM&T Sub-Committee.	HT	April 2021	Update for April 2021 ARAC meeting: Post Project Evaluations form part of the remit of the CEIM&T Sub- Committee and this will be discussed further at the meeting scheduled for 30 <sup>th</sup> March 2021.  See further update under AC(21)43, below.
AC(21)27	23/02/2021	Radiology Directorate (Reasonable Assurance) Update	<ul> <li>To discuss with the         Executive Team the         proposals and their         financial implications.</li> <li>To provide an update in</li> </ul>	AC	April August 2021 August	SBAR to be submitted to Executive Team to review in July 2021.  Forward planned for 24 <sup>th</sup>
AC(21)43	20/04/2021	Table of Actions: AC(21)25 - Capital Assurance Follow- up (Reasonable Assurance)	August 2021.  To clarify whether the Post Project Evaluations had been discussed at the Capital Estates and IM&T Sub-Committee meeting on 30 <sup>th</sup> March 2021.	НТ	2021 June 2021	August 2021 meeting.  There was discussion at the March 2021 meeting of the CEIM&TSC, as part of the Capital Governance update. Post Project Evaluation is the subject of a substantive agenda item and presentation for the 24 <sup>th</sup> May 2021 meeting of the CEIM&TSC.

Minute No.	Meeting Date	Subject	Action	Lead	Timescale	Progress/Date Achieved
AC(21)46	20/04/2021	Financial Assurance Report	To review STA HDD553 (University of Warwick Business School) and provide an update at the next meeting.	HT	June 2021	Warwick Business School (WBS) presented to the Transformation Steering Group (TSG) in November 2020. WBS are global leading experts in the field having set up the Cabinet Office Nudge Unit. Following the presentation to TSG, the Director of Finance was under the impression that the UHB was tasked with working with WBS. WBS had a worked-up package of support, whilst other universities were developing their offers.  WBS has agreed to work with the UHB's university partners to develop a more local offer, upon which the UHB can draw in the longer term. The
						UHB will close down its work with WBS once it comes to the end of the contracted period.
AC(21)53	20/04/2021	Internal Audit Plan 2021/22	To include the number of days/hours anticipated for each audit;	JJ	June 2021	A meeting is scheduled for 21st June 2021 with the ARAC Chair and Board Secretary to discuss the requirements further.

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Minute No.	Meeting Date	Subject	Action	Lead	Timescale	Progress/Date Achieved
			To discuss with NWSSP and Audit Wales the potential value of an audit assurance programme jointly commissioned through the RPB.	HT	June 2021	Meeting arranged between the Director of Audit at NWSSP and the HDdUHB Director of Finance, Board Secretary and Vice-Chair (RPB Chair).
AC(21)56	20/04/2021	Patient Experience (Reasonable Assurance)	To share the Internal Audit report with the Chair of QSEAC.	СМ	April 2021	Completed.
AC(21)57	20/04/2021	Management of Fire Enforcement Notices (Substantial Assurance)	To highlight to Board the positive findings of this report, whilst noting that significant challenges and risks remain.	PN/JW	May 2021	Completed. Included in ARAC Update Report to 27 <sup>th</sup> May 2021 Public Board meeting.
AC(21)78	05/05/2021	Women & Children's Phase 2 (Limited Assurance)	To highlight to Board the need for lessons to be learned from this project and the risks associated with the contractor being expected to complete work after payment has ceased.	PN/JW	May 2021	Completed. Included in ARAC Update Report to 27 <sup>th</sup> May 2021 Public Board meeting.
AC(21)80	05/05/2021	Health & Safety (Reasonable Assurance)	To provide further evidence regarding monitoring via the Table of Actions;	MR/TH	October 2021	Update to be obtained for 19 <sup>th</sup> October 2021 meeting.
			To amend the management response to Recommendation 2;	TH	June 2021	Completed. Amended management response attached at Appendix 1.
			<ul> <li>To amend the management response to Recommendation 7.</li> </ul>	TH	June 2021	Completed. Amended management response attached at Appendix 1.
AC(21)82	05/05/2021	Digital Modelling (Substantial Assurance)	To consult Digital Health & Care Wales (DHCW) regarding which code	HT	June 2021	The Health Analytics Team are in discussion with DHCW to ascertain

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Minute No.	Meeting Date	Subject	Action	Lead	Timescale	Progress/Date Achieved
			hosting platforms they recommend.			which package they use; however, the coding is currently stored within the Health Board's infrastructure, and therefore backed up daily. Where there is necessity to share with other Health Boards, the code is shared in a secure manner.
AC(21)88	05/05/2021	Draft Head of Internal Audit Opinion & Annual Report 2020/21	To establish previous outcome when the issue of sharing audit reports relating to national bodies with Health Boards has been raised.	JW	June 2021	When this was raised previously, it was agreed that any Limited Assurance reports for other relevant organisations would be shared with ARAC for information. This will be implemented going forward.
AC(21)92	05/05/2021	Draft Performance Overview	To consider applying a corporate style to all HDdUHB documents.	HT/JW	June 2021	Completed. All sections of annual report reviewed.

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Finding 2 – Reporting of Local Health and Safety Issues (O)	Risk
A review of the minutes for the Women and Child Health Quality & Safety meetings highlighted that there was no agenda items or discussions specifically around health and safety. We also note that there was no representative present from the Health and Safety Team.	The Health Board is not aware of any Health & Safety issues.
We noted good practice within the Scheduled Care Quality, Safety and Experience Group whereby a dedicated section for 'Items for Escalation' to the statutory committees, including the HSAC, has been implemented.	
Recommendation 2	Priority level
Recommendation 2	
Management should review the Women and Child Health Quality & Safety Group agenda to ensure health and safety is a standing item, and to ensure the attendance of a Health and Safety Team representative at future meetings.	MEDIUM
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Finding 7 – Training Compliance Reporting (D)	Risk		
A review of the HSAC papers and Directorate/Service level papers highlighted that there has been no reporting or discussion of training compliance rates, in particular poor performing areas.	The Health Board is not aware of any Health & Safety issues.		
Recommendation 7	Priority level		
Management should ensure that training compliance figures are reported at directorate/service quality and safety meetings and the Health & Safety Assurance Committee to allow for the identification of risks, trends and actions.	MEDIUM		
reported at directorate/service quality and safety meetings and the Health & Safety Assurance Committee to allow for the identification of	MEDIUM  Responsible Officer/ Deadline		

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