

**Audit & Risk Assurance Committee**  
**TABLE OF ACTIONS**  
**Arising from Meeting held on 25<sup>th</sup> August 2020**

Minute No.	Meeting Date	Subject	Action	Lead	Timescale	Progress/Date Achieved
AC(19)222	22/10/2019	Radiology Directorate (Reasonable Assurance) Update	To provide to the next meeting, via the Table of Actions, a clear plan (agreed by the Executive Team) of timescales for implementation of Recommendations 3 and 8.	AC	December 2019 April May August October 2020	<p><i>A transformation project team has been established between the Head of Radiology, Workforce and OD and the Project Management Office (PMO) which met in February 2020 and devised a transformation project plan (please see attached) in relation to Radiology staffing levels including on-call arrangements. A second meeting was due to take place in March 2020 but was suspended due to preparing for the COVID-19. The project plan was discussed with members of the executive team who are part of the Holding to Account process in the March 2020, where it was agreed Radiology would present new costings for improved staffing levels to the Executive Team. A model was developed and costed although due to</i></p>

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						<p><i>COVID-19 this has not been presented to the Executive Team. Currently, during the pandemic, staff have been working differently to accommodate the patient flow and it is anticipated that some of the adjustments will continue when returning to what will be a new normal. The transformation project plan is currently a minimum of 3 months behind schedule. It is anticipated for a further meeting to be arranged in June 2020 to establish revised timescales against the remaining actions, including the implementation of the recommendations from the Internal Audit report.</i></p> <p><u>Update for August 2020 ARAC meeting:</u>  <i>Further meetings have been held with leads from the programme management office in an effort to maintain momentum. A further meeting is scheduled for August 2020.</i></p>

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						<p><i>In addition, discussions have been held during July 2020 with Workforce and Organisational Development regarding bespoke leadership training for the radiology site leads. Any changes to current staging rotas have taken into consideration new ways of working.</i></p> <p><i>However, there has not been an opportunity to present developments to date or the revised staffing models to the Executive Team, due to the response to COVID-19. A revised Gantt chart around the project is attached at Appendix 1.</i></p> <p><u>Update for October 2020 ARAC meeting:</u>  Agreement between the Chair of ARAC and Director of Operations that a full update report would be presented to 15<sup>th</sup> December 2020 meeting.</p>

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AC(19)223	22/10/2019	WAO Review of Estates 2016 Update	To provide a further update to a future meeting.	RE	April October 2020	Forward planned for 20 <sup>th</sup> October 2020 meeting.
AC(19)256	19/12/2019	Counter Fraud Update	To discuss with the Director of Workforce & OD whether Counter Fraud Awareness E-Learning should be made mandatory.	HT	February April August October 2020	<p><i>The Local Counter Fraud Specialist is attending the Mandatory Training Group meeting on 15/06/20 to present the application for the Counter Fraud Awareness E-Learning module to be made mandatory. A decision will be made shortly after this meeting.</i></p> <p><i>The Approval Panel has been disbanded and the authorisation process handed back to the Executive Team. Efforts will be made to progress with the Executive Team in the coming month.</i></p> <p><u>Update for October 2020 ARAC meeting:</u> Following on from the Audit Wales report, which recommends that consideration is given to mandatory Counter Fraud training within the organisation, The Head of</p>

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						<p>LCFS has discussed the matter with the Director of Workforce &amp; OD, who has confirmed that we would need to discuss how best to progress the matter. It is the Counter Fraud department's opinion that mandatory training will play a significant role in educating staff on the risks associated with Fraud in the NHS and will complement existing measures that are in place to reduce the Health Board's liability under section 7 of the Bribery Act, which places a requirement on an organisation to have adequate measures in place to prevent Bribery. A further meeting has been arranged for 28<sup>th</sup> October 2020, following which it is hoped that an action plan to implement Mandatory training will have been agreed, with a view to finalising these actions prior to year-end.</p>
<b>AC(20)42</b>	<b>21/04/2020</b>	<b>Internal Audit RCP Medical Records</b>	To provide a further update in six months.	PK	October 2020	Forward planned for 20 <sup>th</sup> October 2020 meeting.

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		<b>Keeping Standards (Reasonable Assurance) Update</b>				
<b>AC(20)43</b>	<b>21/04/2020</b>	<b>WAO Clinical Coding Follow-up Update</b>	To provide a further update in six months.	KM	October 2020	Forward planned for 20 <sup>th</sup> October 2020 meeting.
<b>AC(20)84</b>	<b>05/05/2020</b>	<b>Draft Head of Internal Audit Annual Report &amp; Opinion 2019/20</b>	To discuss further the distribution and consideration of IA reports on other NHS organisations;	JJ/JW/HT	June August October 2020	<p><i>Discussions are ongoing with individual organisations regarding the appropriate process for this, with a view to including an update within regular progress reports to ARAC in addition to the information contained within the annual report.</i></p> <p><u>Update for August 2020 ARAC meeting:</u>  <i>As part of their work to review and update their audit methodology and approach, Internal Audit are looking at the role national audits have in providing assurance to individual health bodies (national audits here refers to work undertaken at HEIW, NWIS, NWSSP, EASC and WHSSC that covers services provided on behalf</i></p>

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						<p><i>of other health bodies). A sub-group of Board Secretaries has been created to support Internal Audit with this wider work. One approach being worked through is to: provide Audit Committees with a list of all national audits at the start of the year (once plans have been approved); provide updates on progress, outcomes and key messages as a part of each progress report to Audit Committees; and having the auditors who undertook the national audits attend other Audit Committees if requested to. The Chairs of Audit meetings could also be a potential focus of discussion on the outcome of national audits and the shaping of future work programmes. Audit Committee members at each health body would also be able to access reports once they have been received by the relevant Audit Committee. Please note that if matters were to</i></p>

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						<p><i>arise during the course of an audit that had immediate and/or significant impact on health bodies more widely then this would be reported at the time (and this approach has always been the case).</i></p> <p>As reported at August 2020 ARAC meeting, this matter will be considered by the national Audit Chair's Group, where a national approach will be agreed.</p>
<b>AC(20)112</b>	<b>23/06/2020</b>	<b>Table of Actions: AC(19)222 – Radiology Directorate (Reasonable Assurance) Update</b>	To obtain an update from the Director of Operations regarding the lack of posts for radiology students.	JW	August October 2020	<p>There are posts available when vacancies occur within the establishment for student radiographers to apply. Work has been undertaken to align any potential vacancies with student graduation.</p> <p><u>Update for October 2020 ARAC meeting:</u> Work continues to be undertaken by one of the sub groups of the National Imaging Program Strategy Board, in conjunction with Health Education and Improvement Wales</p>



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						(HEIW), to align workforce plans with student recruitment. HDUHB is represented on the Program Strategy Board which meets bi-monthly. Ensuring students secure posts once qualified is Integral to the transformation project which is focussing specifically on maintaining a sustainable workforce model, for Radiology services. Further information pertaining to this subject matter will also be incorporated within the Radiology report scheduled for review at the December 2020 meeting.
AC(20)124	23/06/2020	Variable Pay (Reasonable Assurance)	To request that the management response be reviewed and presented to the next ARAC meeting;	JW AC	August 2020	<p><i>Revised Management Response presented to August 2020 meeting.</i></p> <p><u>Update for October 2020 ARAC meeting:</u> The service has explored an approach to place Pathology onto Rosterpro. However, the central team capacity to assist with this has been delayed, due to COVID-19; combined with the fact that the UHB is replacing the</p>

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						Rosterpro system with Allocate. As a result of the delay, the Head of Pathology Services is currently reviewing the pros and cons of both options prior to making a recommendation to the steering group, scheduled for 16 <sup>th</sup> November 2020. The steering group will review the new services requesting e-rostering solutions and will then advise how many can be accommodated and over what timescales.
AC(20)148	25/08/2020	<b>Table of Actions: AC(19)222 – Radiology Directorate (Reasonable Assurance) Update</b>	To revisit actions and timescales, and to provide a revised/updated Gantt chart for the next meeting.	AC	October 2020	See AC(19)222, above.
		<b>Table of Actions: AC(19)112 – Radiology Directorate (Reasonable Assurance) Update</b>	To provide a further update for the next meeting.	AC	October 2020	See AC(20)112, above.
		<b>Table of Actions: AC(20)124 –</b>	To provide an assurance that the timescales within the	AC	October 2020	See AC(20)124, above.

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		<b>Variable Pay (Reasonable Assurance)</b>	management response have been/will be met.			
<b>AC(20)150</b>	<b>25/08/2020</b>	<b>Feedback from Welsh Government Meeting held on 23<sup>rd</sup> July 2020</b>	To remove the reference to 'light touch' prior to the report being uploaded on the website.	CM	Sept 2020	Completed.
<b>AC(20)151</b>	<b>25/08/2020</b>	<b>Financial Assurance Report</b>	To correct the error in Appendix 2 before publication.	HT	October 2020	Completed.
<b>AC(20)152</b>	<b>25/08/2020</b>	<b>Post Payment Verification (PPV) End of Year Report</b>	<ul style="list-style-type: none"> <li>To discuss these cases and provide further clarification/ explanation;</li> </ul>	SL/ AL/ ST	October 2020	<p>PPV work will be resuming on October 1<sup>st</sup> 2020 and the following practices will be contacted and files resumed as a priority:</p> <p>Practice 7 – 'Visit file in progress'. - A revisit in June 19 and the queries were submitted to the Health Board in reference to minor surgery claims. There were 2 practices that received revisits and the queries related to both practices. The County Associate Medical Director informed PPV of the outcome of the queries after visiting one of the practices, however we did not receive a response to the queries until January</p>

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						<p>2020 and the original query was submitted on 24<sup>th</sup> June 2019 to the Health Board. On response the PPV Team Leader updated and submitted the report to the practice, however we are awaiting the response from the practice manager and due to PPV being stood down as a result of COVID-19 and average payments, the file is on hold.</p> <p>Practice 15 – ‘Visit file in progress’ - A routine visit undertaken in September 2019, the practice had installed the new version of Vision after PPV had undertaken the remote visit. The initial report was submitted to the Practice Manager but they were unable to submit evidence in relation to the queries raised, as the new version of Vision was corrupted and the system has had to be rebuilt. The Practice Manager has kept PPV updated on the progress of this. Due to PPV being</p>

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						<p>stood down, we are unable to contact the practice but will seek the progress from the Practice Manager concerned when PPV is reinstated on 1<sup>st</sup> October 2020. I can confirm prior to 19<sup>th</sup> March 2020, the Practice Manager was still unable to provide evidence.</p> <p>Practice 17 &amp; 18 – ‘Visit file in progress’ - Undertaken in November 2019. Both initial reports for the revisit and the routine have been submitted to the Practice Manager and we are awaiting a response from the practice. However due PPV being stood down, the file is on hold.</p>
			<ul style="list-style-type: none"> <li>To discuss ARAC’s concerns with NWSSP;</li> </ul>	HT/SL	October 2020	Director of Finance met with NWSSP staff to outline ARAC’s concerns regarding the PPV report. As a result, the PPV team are designing a prototype to capture more of the information requested by ARAC.
			<ul style="list-style-type: none"> <li>To invite the Director of Primary Care, Community &amp;</li> </ul>	CM	August 2020	Noted for next scheduled PPV report (February 2021)

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			Long Term care to attend for future discussion of PPV			
AC(20)154	25/08/2020	Audit Wales Counter Fraud	<ul style="list-style-type: none"> <li>To research and present findings regarding best practice, including capacity, to a future meeting;</li> </ul>	BR	December 2020	Forward planned for 15 <sup>th</sup> December 2020 meeting.
			<ul style="list-style-type: none"> <li>To highlight any instances of information sharing with Local Authority partners in future Counter Fraud reports.</li> </ul>	BR	October 2020	To be included in future Counter Fraud reports.
AC(20)155	25/08/2020	Structured Assessment 2019 – Progress to Date	<ul style="list-style-type: none"> <li>To consider the Audit Wales Structured Assessment 2020, Internal Audit Governance Review and KPMG review alongside each other at the next meeting;</li> </ul>	CM	August 2020	Completed. Agenda for 20 <sup>th</sup> October reflects this.
			<ul style="list-style-type: none"> <li>To provide a further update on recommencement of QI work as part of the next Structured Assessment report.</li> </ul>	MR	October 2020	The celebration event for closure of Cohort 1 QI Teams is scheduled to take place virtually on 14 <sup>th</sup> October 2020 (rescheduled due to COVID-19). Work is taking place to review all projects submitted for Cohort 2 and plans are in place to commence Cohort 2 in March 2021 (COVID-19 impact dependent). Individuals from Cohort 1 who expressed interest in becoming QI coaches will receive training in the coming months in readiness

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						for Cohort 2 commencement.
<b>AC(20)157</b>	<b>25/08/2020</b>	<b>Internal Audit Plan Progress Report</b>	To replace 'Director of P,P&C' with 'Chief Executive' as Executive Lead for Transformation Steering Group.	JJ	October 2020	Completed.
<b>AC(20)158</b>	<b>25/08/2020</b>	<b>Business Continuity (Reasonable Assurance)</b>	To identify the proportion of the organisation with Business Continuity Plans in place.	RJ/SH	October 2020	With the caveats given at the meeting and the ever-changing nature of our business areas and dynamic nature of our NHS services, our current spreadsheet would indicate that 92% of services across our organisation has a plan in place or a plan in development/in progress and 8% has no plan.
<b>AC(20)163</b>	<b>25/08/2020</b>	<b>Clinical Audit Update</b>	To highlight to Board the potential impact on quality and safety, including patient safety, of suspension of clinical audit activity due to COVID-19.	PN/JW	Sept 2020	Completed. Included in update report to Public Board meeting on 24 <sup>th</sup> September 2020.