PWYLLGOR ARCHWILIO A SICRWYDD RISG
AUDIT AND RISK ASSURANCE COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	19 December 2019
TEITL YR ADRODDIAD: TITLE OF REPORT:	All Wales NHS Audit Committee Chair's Meeting
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mr Paul Newman, Audit and Risk Assurance Committee Chair
SWYDDOG ADRODD: REPORTING OFFICER:	Mr Paul Newman, Audit and Risk Assurance Committee Chair

Pwrpas yr Adroddiad (dewiswch fel yn addas)
Purpose of the Report (select as appropriate)

Er Gwybodaeth/For Information

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

The purpose of the paper is to present the Audit & Risk Assurance Committee with an update from the proceedings of the All Wales NHS Audit Committee Chairs' meeting held on 18th November 2019, attended by Mr Paul Newman, Chair of Hywel Dda University Health Board (HDdUHB) Audit & Risk Assurance Committee (ARAC).

Cefndir / Background

The All Wales NHS Audit Committee Chairs' forum convenes approximately 3 times per year, providing an opportunity to share information regarding common issues which arise within Health Boards and to share best practice. The forum is supported by attendance from the host organisation's Board Secretary. In addition, meetings are attended by representatives from NHS Wales Shared Services Partnership (NWSSP) Internal Audit, as providers of audit assurance through the independent and objective assessment of governance, risk management and internal control. Also in attendance are representatives from Wales Audit Office (WAO), in their capacity as External Auditors who also provide information and advice.

Asesiad / Assessment

The following is a summary of the main issues discussed at the meeting on 18th November 2019:

1. The Wales Audit Office (WAO) review of the NHS Wales Informatics Service (NWIS) governance and digital architecture, whilst not formally published by Welsh Government, is now in the public domain and has been included on the PAC webpage and can be accessed on the following link:

   http://senedd.assembly.wales/documents/s95234/PAC5-27-19%20P1%20-%20WG%20Evidence%20Paper%20on%20Informatics%20Systems.pdf

2. It was confirmed that, following the development work previously undertaken, Betsi Cadwaladr University Health Board will continue to host and update the Legislative

Assurance Framework covering the NHS. There is, therefore, a requirement for Hywel Dda UHB (as with other organisations) to nominate an individual to receive the updates as and when received, noting for assurance purposes this has already been enacted.

3. As there is general concern regarding the governance of Regional Partnership Boards, it was agreed that each organisation would review the local governance arrangements, particularly in light of the report from WAO relating to the Intermediate Care Fund.

4. A schedule of current and planned work was produced by WAO for the Public Accounts Committee (PAC). Of the 15 in the health and social care domain, only one related to social care, and attention was drawn to this anomaly.

5. Internal Audit (IA) Update – further to the Practice Note: Acceptance, Implementation and Monitoring of Audit Recommendations which had previously been shared with members, it was noted that a general area of concern is in relation to lack of compliance with IA recommendations. A discussion took place regarding the acceptance of recommendations which may not be deliverable, with it emphasised that organisations need to raise this as an issue during the closure meetings. Furthermore it was noted that organisations should be addressing areas of concern at source, rather than waiting for IA to undertake a review.

6. It was observed that a number of organisations have compliance with IA and WAO recommendations as part of their Executive performance reviews, whilst others are grouping outstanding recommendations from such reports by Executive lead and then holding that lead to account. It was also noted that all organisations are struggling with the concept of identifying what differences have been made as a result of reports. From the HDdUHB perspective, it should be noted that in addition to reviews at ARAC, compliance is reviewed through both the Executive Performance reviews and the Executive Team.

7. Internal Audit are requesting suggestions from organisations regarding areas for inclusion in the IA element of the NWSSP Integrated Medium Term Plan.

8. An external consultancy firm has suggested that attendance by all Executives and the Accountable Officer at the Audit Committee is a barometer for a high performing organisation. This suggestion was not fully supported by the forum, which noted that this does not align to the All Wales NHS Audit Committee Handbook, and requested evidence to support this assertion.

9. Due to an All Wales tender, there is likely to be a change to the supplier of the electronic Board papers system.

10. General concern was raised regarding clinical audit, including lack of resource/outcome/ change as a consequence of audit.

11. Wales Audit Office provided a general update on the work programme that was currently being delivered:
    *   Out of Hours Services – concerns in respect of data quality and noting the 111 service will be included as an issue within the scoping for the WAO project on unscheduled care;
    *   Clinical coding follow-up study will be focussed on in-patient services. Local audit work had not identified any particular concerns regarding implementation of the Systematised Nomenclature of Medicine (SNOMED) system.

Argymhelliad / Recommendation	
The Audit & Risk Assurance Committee is requested to receive this report for information.	

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference Cyfeirnod Cylch Gorchwyl y Pwyllgor	5.1 The Committee shall review the adequacy of the UHB's strategic governance and assurance arrangements and processes for the maintenance of an effective system of good governance, risk management and internal control, across the whole of the organisation's activities (both clinical and non-clinical) that supports the achievement of the organisation's objectives.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Statement	Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Assurance reports to Committees and Board aligned to relevant standards.
Rhestr Termau: Glossary of Terms:	Included within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg: Parties / Committees consulted prior to Audit and Risk Assurance Committee:	Board Secretary Chair, Audit & Risk Assurance Committee

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	There are no direct financial implications within this report.

Ansawdd / Gofal Claf: **Quality / Patient Care:**	There are no direct quality or patient care implications within this report.
Gweithlu: **Workforce:**	There are no direct workforce implications within this report.
Risg: **Risk:**	There are no direct implications within this report.
Cyfreithiol: **Legal:**	There are no legal workforce implications within this report.
Enw Da: **Reputational:**	There are no direct implications within this report.
Gyfrinachedd: **Privacy:**	There are no direct implications within this report.
Cydraddoldeb: **Equality:**	• Has EqIA screening been undertaken? No • Has a full EqIA been undertaken? No