GIG CYMRU NHS WALES | Bwrdd Iechyd Prifysgol Hywel Dda University Health Board

PWYLLGOR ARCHWILIO A SICRWYDD RISG
AUDIT AND RISK ASSURANCE COMMITTEE

DYDDIAD Y CYFARFOD: **DATE OF MEETING:**	29 May 2019
TEITL YR ADRODDIAD: **TITLE OF REPORT:**	Governance, Leadership & Accountability Standard
CYFARWYDDWR ARWEINIOL: **LEAD DIRECTOR:**	Steve Moore, Chief Executive Officer
SWYDDOG ADRODD: **REPORTING OFFICER:**	Joanne Wilson, Board Secretary

Pwrpas yr Adroddiad (dewiswch fel yn addas) **Purpose of the Report** (select as appropriate)
Er Sicrwydd/For Assurance

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

The purpose of the paper is to present the Audit and Risk Assurance Committee with the attached Governance, Leadership and Accountability (GLA) Standard, which supports the Annual Governance Statement, and sets out expectations of health organisations for working within a legal and regulatory framework.

A summary of the Health Board's actions to demonstrate that it operates in accordance with both the GLA Standard and the wider standards framework is integral to the Annual Governance Statement.

Cefndir / Background

The attached Governance, Leadership and Accountability Standard is one of the required elements underpinning the compilation of the Annual Governance Statement and contributes to the end of year processes. A draft of the completed standard, providing the opportunity for comment and amendment, was circulated to all Board Members, with any amendments received being incorporated into the final version which is now being presented.

Asesiad / Assessment

The Governance, Leadership and Accountability (GLA) Standard sets out the expectations of healthcare organisations for working within a legal and regulatory framework, and organisations are expected to consider the following criteria for meeting the standard:

- Demonstrating effective leadership by setting direction, igniting passion, pace and drive and developing people.
- Strategy is set with a focus on outcomes and choices based on evidence and people insight with an approach of collaboration building on common purpose.
- Having a system of governance which supports successful delivery of its objectives and partnership working. The organisation will provide leadership and direction so that it delivers effective, high quality and evidenced based services, meets patient needs at pace, with staff that are effective and appropriately trained to meet the needs of patients and carers.

- Health services innovate and improve delivery, plan resource and prioritise, develop clear roles, responsibilities and delivery models and manage performance and value for money.
- Foster a culture of learning and self-awareness and personal & professional integrity.

The Health Board's self-assessment considered all the questions as set out in the Welsh Government's supporting guidance in relation to the standard criteria, has been completed in terms of the current position and cross referenced where possible to the assessment against all other Health & Care standards. It should be noted that, although overall collation has been undertaken centrally by the governance team, Executive Directors were identified as leads for certain elements of the standard, providing the review and approval of the content.

The self-assessment identified areas where reasonable progress continues to be made, with some aspects of good practice identified, whilst also recognising that further development is required in other spheres.

Argymhelliad / Recommendation

The Audit & Risk Assurance Committee is requested to
- take assurance that the attached Governance, Leadership and Accountability Standard reflects the current systems and processes relating to governance, leadership and accountability within the UHB.
- Recommend the approval of the GLA by Board

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. Triangulation with Fundamentals of Care audit.
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 Independent Members of the Board Executive Directors Internal Audit 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