



AGENDA ITEM

3.2.4 Appendix 7

CTM BOARD

HIGHLIGHT REPORT FROM THE CTMUHB AUDIT AND RISK COMMITTEE

DATE OF MEETING

24/11/2022

PUBLIC OR PRIVATE REPORT

Public

IF PRIVATE PLEASE INDICATE REASON

Not Applicable - Public Report

PREPARED BY

Cally Hamblyn, Assistant Director of Governance & Risk

PRESENTED BY

Patsy Roseblade, Independent Member and Chair of the Audit & Risk Committee

EXECUTIVE SPONSOR APPROVED

Georgina Galletly, Director of Corporate Governance
Sally May, Executive Director of Finance

REPORT PURPOSE

NOTING

ACRONYMS

1. INTRODUCTION

1.1 This report had been prepared to provide the Board with details of the key issues considered by the Audit & Risk Committee at its meeting on the 24th October 2022.

1.2 Key highlights from the meeting are reported in section 3.

2. PURPOSE OF THE AUDIT & RISK COMMITTEE

2.1 The Committee will function in accordance with the NHS Audit Committee Handbook as appropriate.

2.2 The Committee will also consider issues in respect of the roles and

responsibilities of Committees hosted by the CTMUHB on behalf of NHS Wales as appropriate. These are the Welsh Health Specialised Services Committee and the Emergency Ambulance Services Committee. The meeting will be split into two parts with Cwm Taf Morgannwg CTMUHB business and hosted Committee business discussed and recorded separately.

- 2.3 The purpose of the Committee is to advise and assure the Board on whether effective arrangements are in place – through the design and operation of the Health Board system of risk and assurance – to support it in its decision taking and in discharging the accountabilities for securing the achievement of the Health Board objectives in accordance with the standards of good governance determined for the NHS in Wales.
- 2.4 Where appropriate, the Committee will advise the Board and the Accountable Officer on where, and how, its system of assurance may be strengthened and developed further.

3. HIGHLIGHT REPORT FROM THE LAST COMMITTEE MEETING

ALERT / ESCALATE	There are no items to escalate this period.
ADVISE	<ul style="list-style-type: none"> • The Local Counter Fraud Report was received with the following key areas highlighted: <ul style="list-style-type: none"> ○ The review undertaken by the NHS Counter Fraud Authority Quality Assurance Inspector. ○ The plans for the Health Board in terms of its participation in International Fraud Awareness week in November 2022. ○ Counter Fraud Investigations Update. • The Procurement and Scheme of Delegation report was received and approved; attention was also drawn to the Health Boards performance as outlined in the comparative findings report “Preventing Procurement Fraud in the NHS”, with an update on the activity being taken forward by the Health Board. • A detailed update was received in relation to the Post Payment Verification activity and the position on PPV visits. • The Organisational Risk Register was received. A number of queries were raised in relation to individual risks which were responded to in the meeting where appropriate and/or directed to the appropriate risk owner outside the meeting. The Committee were informed that activity is underway with Care Groups to align the risks on the Organisational Risk Register to the new operating model structure.
ASSURE	<ul style="list-style-type: none"> • The Audit Recommendations Tracker was received. Members were advised that the workshop to consider the long standing recommendations with Executive Leads was held in October 2022,

	<p>which led to progress being made with movement on recommendations clearly reflected in the latest tracker update received by the Committee.</p> <ul style="list-style-type: none"> • The Internal Audit Progress Report was received recognising the timely responses being received from Health Board Officers in relation to the sign off of management responses. The Committee were made aware that there is significant activity planned for quarter four which will require the Health Board Officers and Internal Audit Colleagues to work closely to ensure the timetable for the fourth quarter is achieved. • The following Internal Audit Reviews were received and noted: <ul style="list-style-type: none"> ○ Digital Operating Model – which had been allocated a limited assurance rating. Internal Audit recognised the positive reflections in the report and the significant restructure activity underway within the Digital and Data Function. ○ Medical Records Management - which had been allocated a reasonable assurance rating. ○ Follow Up Review – Prince Charles Hospital Redevelopment: Phase 1b Final Account - which had been allocated a substantial assurance rating. ○ Follow Up Review – Prince Charles Hospital Validation of Management Actions - which had been allocated a substantial assurance rating. • The Audit Wales Audit & Risk Committee update was received and noted;
INFORM	<ul style="list-style-type: none"> • The Audit & Risk Committee Terms of Reference were approved. • A Committee Referral to the Digital and Data Committee was agreed to provide the scrutiny on the management responses to the Digital Operating Model and Medical Records Management Internal Audit Reviews. • Farewell to George Galletly – The Chair expressed thanks to G Galletly personally and on behalf of the Committee in recognition of her invaluable guidance and input into the Committee. She exclaimed that G Galletly should leave feeling proud of the achievements she and her Team have made to date and wished her all the very best in her new role
APPENDICES	NOT APPLICABLE

4. RECCOMENDATION

4.1 The Board is requested to **NOTE** the report.



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