



AGENDA ITEM

3.2.6

CTM BOARD

ANNUAL REPORT TIMETABLE 2021-2022

| | |
|------------------------|------------|
| Date of meeting | 31/03/2022 |
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| FOI Status | Open |
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| If closed please indicate reason | Not applicable – Public Meeting |
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| Prepared by | Cally Hamblyn, Assistant Director of Governance & Risk |
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| Presented by | Georgina Galletly, Director of Corporate Governance |
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| Approving Executive Sponsor | Director of Corporate Governance |
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| Report purpose | FOR NOTING |
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| Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group) | | |
|---|------------------|----------------|
| Committee/Group/Individuals | Date | Outcome |
| Strategic Leadership Group (SLG) | Email 07.01.2022 | NOTED |
| Audit & Risk Committee | 24.02.2022 | NOTED |

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| ACRONYMS | |
| | None identified. |

1. SITUATION/BACKGROUND

1.1 The Annual Report encompassing the required reporting elements will be presented at the Health Board's Annual General Meeting (AGM) on the 28th July 2022.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1 There is a detailed timetable enclosed at Appendix 1, supporting the development of the Annual Report led by the Assistant Director of



Governance & Risk and Head of Corporate Governance & Board Business.

- 2.2 The timetable highlights proposed amendments and/or requirements in order to accommodate the reporting timeframes set by the Welsh Government (WG).
- 2.3 The timetable has been shared with Health Board officers that will be responsible for completing the various elements of the report. Meetings have also been scheduled to discuss the reporting requirements in greater detail.
- 2.4 Audit Wales and Internal Audit have received a copy of the timetable.
- 2.5 As in previous years the suite of Annual Report documents will be presented electronically at the Annual General Meeting (AGM) on the 28th July 2022.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 It is recognised that timescales are particularly tight and therefore limited flexibility can be afforded, therefore support in prioritising this activity is requested to achieve the WG timeframes.

4. IMPACT ASSESSMENT

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| Quality/Safety/Patient Experience implications | Yes (Please see detail below) |
| | Evidence suggests there is correlation between governance behaviours in an organisation and the level of performance achieved at that same organisation. Therefore ensuring good governance within the Trust can support quality care. |
| Related Health and Care standard(s) | Governance, Leadership and Accountability |
| Equality impact assessment completed | No (Include further detail below) EQIA not required. |
| Legal implications / impact | There are no specific legal implications related to the activity outlined in this report. |
| Resource (Capital/Revenue £/Workforce) implications / Impact | There is no direct impact on resources as a result of the activity outlined in this report. |
| Link to Strategic Well-being Objectives | Provide high quality, evidence based, and accessible care. |

5. RECOMMENDATION

- 5.1 The Board are asked to **NOTE** the Annual Report Timetable for 2021-2022.