



AGENDA ITEM

3.2.7 Appendix 3

CTM BOARD

HIGHLIGHT REPORT FROM THE AUDIT AND RISK COMMITTEE

DATE OF MEETING

31 March 2022

PUBLIC OR PRIVATE REPORT

Public

IF PRIVATE PLEASE INDICATE REASON

Not Applicable - Public Report

PREPARED BY

Emma Walters, Corporate Governance Manager

PRESENTED BY

Jayne Sadgrove, Vice Chair and Acting 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

LFER | Learning from Event Report

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 24 February 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.

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.

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.

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	No items identified for alert or escalation.
ADVISE	<ul style="list-style-type: none"> • The Local Counter Fraud Report was received. A discussion was held in relation to Counter Fraud Awareness raising and it was requested that further consideration was held outside the meeting to explore whether a more targeted approach was required to raise awareness amongst certain staff groups/grades; • The Losses and Special Payments report was received. Following discussion members requested an urgent response as to whether the Health Board was going to meet the target deadline for the submission of the backlog of LFER cases and the deadline for the submission of current cases. Members also requested confirmation as to whether the delays in submission were as a result of capacity issues, process issues or knowledge issues; • The Audit Recommendations Tracker was received. Whilst Committee members welcomed the progress made in strengthening the tracker, Members recognised that further work was required in relation to timeliness of the updates provided; • The Internal Audit Progress report was received. Members noted that a number of reviews would now be undertaken during quarter 4 with three reviews being rolled forward into 2022/2023; • The Committee received an Internal Audit Review into Concerns which had received a Limited Assurance Rating. Members noted that progress against recommendations would be monitored via the Audit Recommendations Tracker and noted that the report would be shared with the Quality & Safety Committee for awareness;

	<ul style="list-style-type: none"> The Committee received the final report, which included the Management Response, on the Internal Audit Review into Fire Safety Management which had been allocated a Limited Assurance rating; An Internal Audit Review into Continuing Healthcare was received which had been allocated a reasonable assurance rating. Following discussion it was agreed that a referral would be made to Quality & Safety Committee regarding Objective 7 asking for the Committee to seek assurance on the Health Board's plan to improve monitoring and reporting in relation to Continuing Healthcare (CHC) and Funded Nursing Care (FNC) activity.
ASSURE	<ul style="list-style-type: none"> The Committee received the Procurement and Scheme of Delegation Report and welcomed the recovery in the Purchase to Pay performance and the re-introduction of budget holder training; The Organisational Risk Register was received. Members welcomed the maturing approach being taken in relation to risk management and the positive uptake of the Risk Management Training sessions; The Committee received an Internal Audit Review into the Prince Charles Hospital (PCH) Redevelopment Programme – Governance which had received a reasonable assurance rating. Members were pleased to see that processes had been strengthened.
INFORM	<ul style="list-style-type: none"> The Committee approved the Annual Cycle of Business for 2022/2023; The Amendments to the Standards of Behaviour Framework Policy – Declarations of Interest were Endorsed for Board Approval subject to some suggested amendments; The Committee noted the Annual Report Timetable; The Audit Wales Audit & Risk Committee Update was received and noted.
APPENDICES	NOT APPLICABLE

4. RECOMMENDATION

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