

Audit & Risk Committee Hosted Bodies

Thu 18 April 2024, 13:30 - 14:30

Virtual via Teams



Agenda

13:30 - 13:30 1. PRELIMINARY MATTERS 0 min

1.1. Welcome and Introductions

Patsy Roseblade, Chair

1.2. Apologies for Absence

Information Patsy Roseblade, Chair

1.3. Declarations of Interest

Information Patsy Roseblade, Chair

13:30 - 13:30 2. CONSENT AGENDA FOR APPROVAL 0 min

2.1. Unconfirmed Minutes of the Meeting held on 22 February 2024

Decision Patsy Roseblade, Chair

 Unconfirmed Minutes 22.2.23 ARC Hosted Bodies 18th April 2024 v2 CH.pdf (6 pages)

13:30 - 13:30 3. MAIN AGENDA 0 min

13:30 - 13:30 4. IMPROVING CARE 0 min

4.1. New Wales Joint Commissioning Committee Progress Report - Verbal Update

Discussion Abigail Harris, Chief Commissioner

13:30 - 13:30 5. ANY OTHER BUSINESS 0 min

Discussion Patsy Roseblade, Chair

13:30 - 13:30 6. DATE AND TIME OF NEXT MEETING - 20 JUNE 2024 9:00 AM 0 min

Agenda Item Number: 2.1

**Confirmed Minutes of the Meeting of Cwm Taf Morgannwg
University (CTMUHB)**

HOSTED BODIES – AUDIT & RISK Committee

22 FEBRUARY 2024

Members Present:

Patsy Roseblade	Independent Member (Committee Chair)
Ian Wells	Independent Member (Committee Vice Chair)
Kath Palmer	Independent Member (Vice Chair of the Health Board)

In Attendance:

Sally May	Executive Director of Finance & Procurement
Jacqueline Evans	Committee Secretary and Associate Director Corporate Services
Gwenan Roberts	Committee Secretary EASC/Deputy Director Corporate NCCU
Ross Whitehead	Deputy Chief Ambulance Services Commissioner and Deputy Director
Steve Spill	Independent Member, Finance & Audit (WHSSC)
Tracy Norris	Academy Manager, National Imaging Academy Wales
Paul Dalton	Head of internal Audit
Emma Samways	Deputy Head of Internal Audit
Sara Utley	Performance Audit Lead - Audit Wales
Mark Jones	Finance Audit Lead - Audit Wales
Nathan Couch	Performance Audit Lead - Audit Wales
Cally Hamblyn	Assistant Director of Governance & Risk
Kathrine Davies	Corporate Governance Manager (Secretariat)

1. PRELIMINARY MATTERS

1.1 Welcome & Introduction

P Roseblade, Committee Chair welcomed everyone to the meeting, The format of the proceedings in its virtual form were also noted. Members noted that the meeting would be recorded to aid the Committee Secretariat in ensuring the accuracy of scrutiny related discussions and decisions made during the meeting. Members noted that the recording would be destroyed once the minutes had been confirmed as accurate.

1.2 Apologies for Absence

Apologies have been received from:

- Stephen Harray – Chief Ambulance Services Commissioner (EASC)
- Geraint Hopkins – Independent Member
- Stacey Taylor – Director of Finance, WHSSC

1.3 **Declarations of Interest**

There were no interests declared.

2. **CONSENT AGENDA**

2.1 **Unconfirmed Minutes of the meeting held on 19 December 2023**

The minutes were **APPROVED** as a true and accurate record.

Resolution

3. **MAIN AGENDA**

3.1 **Action Log**

J. Evans provided an update on the Action Log and highlighted the following:

- One action still in progress for WHHSC in relation to the Corporate Risk Assurance Framework (CRAF) which was not due to be completed now until April 2024.
- Two completed actions for EASC in relation to Red Release Performance/Ambulance Handover Delays/Harm Reviews and a Line Graph to be included in the next iteration of the report to highlight the unit hours production for each Health Board.

The Chair questioned whether the outstanding action was in relation to adding in explanation of the change of consequence of a risk or the impact of a risk that was causing any concern. In response, J. Evans advised that no concerns were raised on incorporating this request and risk leads are reminded to take into consideration their rationale when scoring risks in order to provide robust information to give assurance to the Committee and the Joint Committee. She added that this requirement would be incorporated into the training for risk owners so it is envisaged that this action will be completed once the training has commenced.

Resolution

The Action Log and update was **NOTED**.

3.2 **Matters arising not contained with the Action Log**

There were no matters arising raised on this occasion.

4. **IMPROVING CARE (NB: 4.2 & 4.3 were taken first on the agenda)**

4.2 WHSSC Corporate Risk Assurance Framework (CRAF) and Risk Register

J. Evans presented WHSSC's updated Corporate Risk Assurance Framework (CRAF) and outlined the risks scoring 15 or above on the commissioning teams and directorate risk registers.

J. Evans advised that the Individual Patient Funding Request (IPFR) Policy had been approved by all seven Health Boards and had been sent to the Chief Pharmacist at Welsh Government. Once confirmation was received this would be enacted.

S. May referred to the IPFR Policy and what would happen if Welsh Government did not adopt it. J. Evans advised that the governance framework was not straightforward as the policy was aligned to Welsh Government. She confirmed that they had been through an engagement process with the Board Secretaries. She added that it was a unique policy and that was why it had taken three years to develop, and hopefully they would receive confirmation shortly that this would be adopted.

K. Palmer referred to the risk relating to paediatric patients waiting for surgery and queried whether this had improved. J. Evans advised that in the absence of the Director of Finance she was unable to answer that but would pick this up as action outside of the meeting.

I Wells referred to his comments at the last meeting in relation to additional comments for risk 57 and he thanked the team for adding this to the report.

The Chair referred to the new Risk 61 and queried whether there were some mitigations in place. J. Evans advised that she was not close to the operational issues, however, she would take this away as an action outside of the meeting.

Resolution: The Committee **NOTED** the updated Corporate Risk Assurance Framework (CRAF) and changes to the risks outlined in this report as at 31 December 2023

Action: To raise the query on paediatric patients waiting for surgery outside of the meeting with the Director of Finance.

Action: To raise the query on mitigating actions for new risk 61 outside of the meeting.

4.3 WHSSC Audit Recommendations Tracker

J. Evans provided the Audit and Risk Committee (ARC) with an update on progress in respect of the implementation of recommendations from internal and external audits.

The Committee were advised that there were two recommendations outstanding on risk management and the dates of those had been revised to March 2024 and two recommendations outstanding in relation to the WHSSC integrated commissioning plan which would be received at the next Joint Committee meeting.

J. Evans advised that external audit had provided a comprehensive update at the last meeting with two partially completed recommendations for Welsh Government and these would remain until the new Committee had been established and the Auditor General was satisfied. She added that a further update would be submitted to Health Board in July 2024 but this would now become part of the legacy reports.

Resolution:

The Committee **NOTED**

- the report,
- progress achieved in implementing the recommendations made by WHSSC internal auditors,
- Took **assurance** on the rolling programme to collate updates from services on a bi-monthly basis in order to report progress to the Audit and Risk Committee,
- the progress made against WHSSC management responses to the Audit Wales recommendations outlined in the WHSSC Committee Governance Arrangements report; and
- the progress made against the Welsh Government responses to the Audit Wales recommendations outlined in the WHSSC Committee Governance Arrangements report.

4.1

EASC Update

G. Roberts and R. Whitehead presented the report and highlighted key updates to Members on the following:

- EASC Risk Register
- EASC Assurance Framework
- EASC Performance Report
- Integrated Commissioning Action Plans.

I Wells referred to the red and amber risks 4506 and 5370 that were rated at 25 and advised that he had raised this at the last meeting seeking for further assurance on actions to mitigate the risks. He advised that it was moving in the right direction and pleasing to see that discussions were taking place with Health Boards and key actions agreed. He added that some of these key actions were just for the winter period and queried whether this would continue.

R. Whitehead in responding, advised that with regard to the action plans, they had instigated a process where Health Boards were having to prioritise the services they commissioned with the focus very much about Welsh Government bringing Health Boards and Chief Operating Officers to weekly

meetings to hold them to account for a small number of actions that they need to deliver. It was clear that sustainable improvements were required and there had been a very high level of handover delays in Cardiff. However, he advised that they were looking to see if those agreed sustainable actions would deliver improvements in handover delays in amber and red in terms of a collective regional and national improvement.

K. Palmer commented that it was useful to see the narrative in relation to the ongoing challenges and different approaches taken by Health Boards. She suggested that it would be helpful to receive an evaluation at some point on what works and what does not, trying to also understand the patient experience as well.

The Chair referred to the graph on page 5 of the report in relation to the volume of red incidents and queried whether the allocation of the red code made as a result of the initial 999 call or does the graph represent data following the crews assessment of the patient i.e. may have changed from red to amber

R. Whitehead explained that the volume of red incidents had been driven by a change of practice in relation to breathing difficulties and that the application of the prioritisation system was not being applied as correctly as it should have been. He added that they had instigated a number of mitigations actions in response, such as additional clinical screening with clinicians being able to listen in to the call.

The Chair referred to the graph on page 6 and suggested that it could be simplified for the reader and perhaps articulated on a week-to-week basis. R. Whitehead confirmed that they could simplify the graph to make it easier to read.

Resolution The report was **NOTED**.

Action: To review the risk in relation to patients waiting for Paediatric Surgery outside of the meeting.

Action: To review new Risk 61 and query whether mitigating actions were in place outside of the meeting.

4.4 **National Imaging Academy for Wales (NIAW) Risk Register**

S. Norris presented the report that provided an update on the National Imaging Academy Wales risk register.

S. Norris advised that were there are two ongoing high risks related to NIAW's access to recurring capital funding and the commissioned number of Clinical Radiology. Specialist Trainees for Training at NIAW.

S. May suggested that NIAW revisit the risk scoring of the two ongoing high risks currently rated at 20. S. Norris advised that she would take this as an action and they would review outside of the meeting.

Resolution: The Committee **NOTED** the update provided relating to the NIAW's Risk Register

Action: To review the risk scoring for the risks currently rated at 20 outside of the meeting.

5. **ANY OTHER BUSINESS**

J. Evans advised that this would be the last meeting for WHSSC and EASC and when the Committee meets in April 2024 the new Joint Commissioning Committee would have been established. She assured the Committee that they were now looking at the governance arrangements and standing orders and would provide an update at the April meeting.

J. Evans commented that it was the last meeting for S. Spill and extended her thanks for his time as a member of the Joint Committee.

In response, S. Spill thanked J. Evans for her kind words and stated that in his opinion the new governance arrangements of the new Joint Committee should include their own Audit & Risk Committee with the Officers of the Joint Commissioning Committee attending to provide assurance.

C. Hamblyn, in response, provided assurance that the Director of Corporate Governance was working closely with colleagues on the governance and accountability frameworks for the JCC to ensure that there was robust governance arrangements in place and noted that a further update on the governance arrangements would be provided at the next meeting.

S. May provided clarity that the new JCC was not a statutory organisation in its own right but a Committee of the seven Health Boards. She advised that the expenditure and allocations sit within each Health Board and included the allocation and gross expenditure. The new JCC was a team that was discharging responsibility on behalf of all Health Boards.

The Chair commented that one of her questions would have been in relation to the role of the Audit & Risk Committee given the proposed new structure and that is something that would be discussed at the next meeting. She extended her best wishes to all the staff at WHSSC and EASC for the future as the organisational change policy progresses.

6. **DATE AND TIME OF NEXT MEETING THURSDAY 18 APRIL 2024**