



Agenda Item 3.1

ACTION LOG – AUDIT & RISK COMMITTEE					
Minute Reference	Date of Meeting Action Originated	Issue	Lead Officer	Timescale for Action to be completed	Status of Action (as at date papers where circulated)
18/099	8/10/2018	Endoscopy JAG Accreditation Closure report to be presented to a future meeting.	Interim Chief Operating Officer	January 2019 Revised to: October 2020 Ongoing - Action being led by Director of Operations. This matter is linked to JAG accreditation and updates will be provided to the Committee through the action log at each meeting Now October 2021 Now February 2023	In progress Given the on-going issues and the update provided at the last meeting, we have added to the forward work programme for the committee to receive a formal (written) update on progress and associated risk mitigation at the February 2023 meeting
5.3.5	23/06/2022	Regular updates to be included in the Chief Operating Officers report to Quality & Safety Committee on the work being undertaken to address the issues highlighted within the Internal Audit Follow Up Review – Patient Pathway Appointment Management Process report.	Chief Operating Officer	July 2022 Now September 2022 Now November 2022	In progress Update not included in the September report to the Quality & Safety Committee. Steps would be taken to ensure an update was provided from November onwards.



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Minute Reference	Date of Meeting Action Originated	Issue	Lead Officer	Timescale for Action to be completed	Status of Action (as at date papers where circulated)
5.4.5	22/08/2022	Internal Audit Review Medical & Dental Rostering - Discussion to be held with the Medical Director outside the meeting in relation to the concerns raised by Members regarding the management response provided.	Director for People	October 2022	In progress A verbal update will be provided at the meeting Update 24.10.2022 - Director for People to provide an update via email outside of the meeting.
5.2	24/10/2022	Audit Recommendations Tracker - Director of Corporate Governance to liaise with Audit Wales on the closure of the recommendations captured in the Clinical Coding Follow Up Review 03 audit.	Director of Corporate Governance	December 2022 Now February 2023	In Progress Assistant Director of Corporate Governance & Risk to revisit this action in the absence of the Director of Governance and agree the way forward in conjunction with Audit Wales.



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Minute Reference	Date of Meeting Action Originated	Issue	Lead Officer	Timescale for Action to be completed	Status of Action (as at date papers where circulated)
5.3.2	24/10/2022	Internal Audit Review – Digital Operating Model. Committee referral to the Digital and Data Committee to provide the scrutiny on the management responses to ensure that they provide the assurance that the actions agreed will address the issues which have been identified.	Director of Digital	February 2023	In Progress Report being presented to the December Digital & Data Committee for discussion
5.3.3	24/10/2022	Internal Audit Review – Medical Records Management. Committee referral to the Digital and Data Committee to provide the scrutiny on the management responses to ensure that they provide the assurance that the actions agreed will address the issues which have been identified.	Director of Digital	February 2023	In Progress Report being presented to the December Digital & Data Committee for discussion



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Completed Actions					
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4.3	28/04/2022	End of Year Post Payment Verification Report to be developed and presented to a future meeting of the Committee.	All Wales Post Payment Verification Manager	October 2022	Completed On Agenda 24.10.2022
5.1	23/06/2022	Committee members to reflect as to whether they feel the level of detail contained within the final column of the tracker helpful or distracting.	Committee Members	August 2022	Completed Members welcomed the updated tracker format.
5.1	23/06/2022	Consideration to be given to holding a separate workshop with Executive Directors to discuss the older recommendations contained within the Tracker.	Committee Members	September 2022 Now October 2022	Completed Workshop held on 6 October 2022
5.2	22/08/2022	Organisational Risk Register - Response to be provided to I Wells outside the meeting in relation to the queries raised regarding Risks 3267, 3638 and 3337.	Assistant Director of Governance & Risk	October 2022	Completed Response shared with Members by email on 9 September 2022



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5.4.1	22/08/2022	Internal Audit Progress Report - Consideration to be given to the suggestion made to separate out the Prince Charles Hospital audit activity from the core plan.	Head of Internal Audit	October 2022	Completed Response received from the Head of Internal Audit to advise that the information contained within the Business Intelligence appendix was a demonstration and was for information only. Internal Audit would be looking to provide more detailed analytics in the future, with the format to be confirmed.
5.3.4	23/06/2022	Internal Audit Follow Up Review – Medical & Dental Rostering report to be presented back to next meeting with strengthened management response.	Medical Director	August 2022	Completed and Ongoing Report received at the August 2022 – further assurance was requested by Members in relation to the management response outside the meeting (see action log entry 5.4.5)
4.2	22/08/2022	Losses and Special Payments Report - Detail to be shared with the Committee Chair outside the meeting regarding the cash write off contained on page 7 of the report.	Director of Finance	October 2022	Completed This information was included in the Losses and Special Payments Report presented to the August 2022 Audit & Risk Committee
5.3.2	24/10/2022	Internal Audit Review – Digital Operating Model. Director of Digital to consider the escalation of a risk relating to	Director of Digital	February 2023	Completed Risk Register has been updated to reflect the significant gap between



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		ICT Kit to the Organisational Risk Register.			funding available and funding required for ICT kit. A planning process is underway (as part of the wider IMTP planning process) to prioritise high risk areas of Digital & Data Infrastructure
5.1	24/10/2022	Organisational Risk Register: Updates on risks 4888,4632,4887,4664, 4743 and 4479 to be taken forward outside of the meeting and captured as appropriate in the next iteration of the Organisational Risk Register received by the Committee.	Assistant Director of Governance & Risk	December 2022	Completed Updates on risks 4632, 4887, 4664, 4743 and 4479 are captured in the Organisational Risk Register being received by the Committee at agenda item 5.1. Risk 4888 was previously closed as the target score had been met.