



**AGENDA ITEM**

3.1.6

**CTM BOARD**

**AMENDMENT TO STANDING ORDERS**

<b>Date of meeting</b>	25/11/2021
<b>FOI Status</b>	Open/Public
<b>If closed please indicate reason</b>	Not Applicable - Public Report
<b>Prepared by</b>	CallyHamblyn, Assistant Director of Governance & Risk
<b>Presented by</b>	Georgina Galletly, Director of Corporate Governance
<b>Approving Executive Sponsor</b>	Director of Corporate Governance
<b>Report purpose</b>	FOR APPROVAL

**Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)**

<b>Committee/Group/Individuals</b>	<b>Date</b>	<b>Outcome</b>
Audit & Risk Committee	4/10/2021	ENDORSED FOR APPROVAL

**ACRONYMS**

EASC	Emergency Ambulance Services Committee
SFIs	Standing Financial Instructions
SO's	Standing Orders
WHSSC	Welsh Health Specialised Services Committee



## 1. SITUATION/BACKGROUND

- 1.1 The Cwm Taf Morgannwg University Health Board Standing Orders form the basis upon which the Health Board's governance and accountability framework is developed and, together with the adoption of the Health Boards Standards of Behaviour Policy is designed to ensure the achievement of the standards of good governance set for the NHS in Wales.
- 1.2 All Health Board members and officers must be made aware of these Standing Orders and, where appropriate, should be familiar with their detailed content.

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

### 2.1 Standing Orders – Schedule 3.1 – Audit & Risk Committee Terms of Reference

The Terms of Reference are included at Appendix 1. As the Charitable Funds Committee is now established and has met it is proposed that reference to the management of Charitable Funds is removed from the Audit & Risk Committee Terms of Reference as will be captured within the remit of the Charitable Funds Committee going forward. The changes are highlighted in red.

### 2.2 Standing Orders – Schedule 4.2 – EASC SO's

EASC SO's have been reviewed in accordance with the model issued by Welsh Government. These have been endorsed for approval by the Audit & Risk Committee on the 4<sup>th</sup> October 2021.

Included at Appendix 2.

### 2.3 Standing Orders – Schedule 5.1 – Stakeholder Reference Group Terms of Reference

Minor change made following recent approval. Reference to "Local Health Board (LHB)" has been changed to "University Health Board (UHB)". Due to this very minor change the terms of reference have not been included as an appendix, however are available upon request.



### 3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 If approved, the Standing Orders will be uploaded to SharePoint and the Health Board’s Internet site.
- 3.2 The Standing Orders will be further strengthened in year as and when required.

### 4. IMPACT ASSESSMENT

<b>Quality Impact</b> (Quality, Safety, Patient Experience Implications)	Quality Impact Assessment Undertaken
	No - QIA Not Undertaken
	If Yes, Please include outcome:
	If No, Please include Justification: QIA will be undertaken in due course.
<b>Related Health and Care standard(s)</b>	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
<b>Equality impact assessment completed</b>	Not required
<b>Legal implications / impact</b>	There are no specific legal implications related to the activity outlined in this report.
<b>Resource (Capital/Revenue £/Workforce) implications / Impact</b>	There is no direct impact on resources as a result of the activity outlined in this report.
<b>Link to Strategic Well-being Objectives</b> (The Strategic objectives of the organisation have been developed in such a way that they can also be considered our well-being objectives)	Provide high quality, evidence based, and accessible care

### 5. RECOMMENDATION

- 5.1 The Board is asked to **APPROVE**:
- The amendments to the Health Board’s Standing Orders as outlined in section 2 of this report.