



**AGENDA ITEM**

2.2.4

**HEALTH BOARD MEETING**

**HIGHLIGHT REPORT FROM THE AUDIT & RISK COMMITTEE**

**DATE OF MEETING**

27/05/2021

**PUBLIC OR PRIVATE REPORT**

Public

**IF PRIVATE PLEASE  
INDICATE REASON**

Not Applicable - Public Report

**PREPARED BY**

Emma Walters, Corporate Governance  
Manager

**PRESENTED BY**

Patsy Roseblade, Independent Member

**EXECUTIVE SPONSOR  
APPROVED**

Georgina Galletly, Director of Corporate  
Governance

**REPORT PURPOSE**

FOR NOTING

**ACRONYMS**

None Identified.

**1. PURPOSE**

- 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 13 April 2021.
- 1.2 Key highlights from the meeting are reported in section 2.
- 1.3 The Sub Committee is requested to **NOTE** the report.

## 2. HIGHLIGHT REPORT

<b>ALERT / ESCALATE</b>	Nil
<b>ADVISE</b>	<ul style="list-style-type: none"> <li>• The <b>Post Payment Verification Annual Report</b> was <b>received</b>. The Committee <b>noted</b> that the Covid-19 pandemic had disrupted the activity that had been planned for 2020/2021 and <b>agreed</b> to receive an interim update on progress at a future meeting;</li> <li>• The <b>Procurement and Scheme of Delegation</b> report was <b>received</b>. The Committee <b>approved</b> the Financial Control Procedures subject to changes made to the Capital Monitoring Financial Control Procedure;</li> <li>• The <b>Internal Audit Plan for 2021/2022</b> was <b>received</b>. The Committee <b>approved</b> the Internal Audit Charter. A further discussion would be held between the Committee Chair and Head of Internal Audit in relation to consistency of internal audit ratings;</li> <li>• The <b>Audit Recommendations Tracker</b> was <b>received</b>. Members made reference to the large number of recommendations which remained open, particularly the ones which fell under the remit of the Director of Operations;</li> <li>• The <b>Organisational Risk Register</b> was <b>received</b> and it was <b>agreed</b> that a discussion would be held outside of the meeting to discuss the risks that had been de-escalated;</li> </ul> <p><b><u>Part 2 – Hosted Bodies</u></b></p> <ul style="list-style-type: none"> <li>• The <b>Welsh Health Specialised Services Committee (WHSSC) Corporate Risk Assurance Framework and Risk Register</b> was <b>received</b>. Following concern raised by the Committee Chair as to how the actions noted would enable the target rating to be achieved, the WHSSC Director of Finance agreed to undertake a review of all actions and target ratings.</li> </ul>
<b>ASSURE</b>	<ul style="list-style-type: none"> <li>• <b>Internal Audit Reports Received;</b> <ul style="list-style-type: none"> <li>○ IT Service Management – Limited Assurance</li> <li>○ Estates Directorate Management Arrangements – Reasonable Assurance</li> <li>○ Financial Systems – Reasonable Assurance</li> </ul> </li> </ul>



	<ul style="list-style-type: none"><li>○ Prince Charles Hospital Redevelopment Covid 19 Site Safety - Substantial Assurance</li><li>● The <b>Local Counter Fraud Update</b> was <b>received</b>. The Committee <b>noted</b> that an analysis would be undertaken of the number of people visiting the Counter Fraud SharePoint page and <b>noted</b> that discussions would be held with the Director of Finance in relation to nominations for a Counter Fraud Champion following concerns raised by the Committee Chair as to the appropriateness of this role being the Director of Finance, given that Counter Fraud reported to the Director of Finance, which meant that there was no segregation of duty.</li></ul>
<b>INFORM</b>	<p>The following reports were <b>approved</b> by the Committee:</p> <ul style="list-style-type: none"><li>● Cwm Taf Morgannwg UHB Forward Plan for Clinical Audit 2020-2021</li></ul> <p>The following reports were <b>noted</b> by the Committee:</p> <ul style="list-style-type: none"><li>● Declarations of Interest Register and Gifts and Hospitality Report;</li><li>● Losses and Special Payments Report;</li><li>● Audit Enquiries Letter to those charged with Governance;</li><li>● Internal Audit Progress Report;</li><li>● Internal Audit Review – Estates Directorate Compliance;</li><li>● Internal Audit Review – Welsh Risk Pool Claims Process;</li><li>● Internal Audit Review – Governance Arrangements during Covid-19 Pandemic Follow Up Advisory Review;</li><li>● Internal Audit Review – Prince Charles Hospital Redevelopment Governance Audit;</li><li>● Internal Audit Review – Prince Charles Hospital Redevelopment Financial Management;</li><li>● Internal Audit Review – Prince Charles Hospital Redevelopment Technical Compliance;</li><li>● Internal Audit Review – Prince Charles Hospital Development – Agreed Integrated Audit Plan 2021/2022;</li><li>● Audit Wales Progress Report;</li><li>● Audit Wales CTMUHB Outturn Fee and Letter;</li><li>● Financial Control Procedure Medical Variable Pay – Summary of Authorised Breaches – In Committee report</li></ul> <p><b><u>Part 2 – Hosted Bodies</u></b></p> <ul style="list-style-type: none"><li>● WHSSC Internal Audit Recommendations Tracker;</li><li>● Emergency Ambulance Services Committee (EASC) Risk Register;</li></ul>



	<ul style="list-style-type: none"><li>• Internal Audit Review – WHSSC Women and Children Directorate.</li></ul>
<b>APPENDICES</b>	<b>NOT APPLICABLE</b>