



**AGENDA ITEM**

3.2.2 Appendix 2

**CTM BOARD**

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

**DATE OF MEETING**

30/09/2021

**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, Audit & Risk Committee  
Chair

**EXECUTIVE SPONSOR  
APPROVED**

Georgina Galletly, Director of Corporate  
Governance  
Sally May, Director of Finance

**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 17 August 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>	No items identified for alert or escalate on this occasion.
<b>ADVISE</b>	<ul style="list-style-type: none"> <li>• The <b>Committee Action Log</b> was received. Members requested that a <b>JAG Accreditation Progress report</b> was presented to the next meeting as a result of this being a long standing action. Members also requested that the <b>Internal Audit Review of Fire Safety</b> was presented to the October meeting also;</li> <li>• An <b>Internal Audit Review into Clinical Audit</b> was received which had been given a <b>Reasonable Assurance</b> rating. The Committee endorsed the comments made within the report relating to the need for greater clarity on the role and remit of the Audit &amp; Risk and Quality &amp; Safety Committees to ensure there was no duplication of reporting. The Committee noted that work was being undertaken with the Clinical Audit Team in relation to their risk escalation process;</li> <li>• An <b>Internal Audit Follow up Review of Facilities</b> was received which had been given a <b>Reasonable Assurance</b> rating. The Committee noted the issues identified in relation to the provision of face to face fire training sessions and Facilities staff accessing ESR systems, both of which were in the process of being addressed. Members noted that discussions would be held outside the meeting as to whether there was any lack of consistency in place amongst portering groups now that ILG structures were in place;</li> <li>• A <b>Draft Internal Audit Review on Single Cancer Pathway Data Integrity</b> was received which had been given a 'draft' <b>Limited Assurance</b> rating. The Committee noted that a management response was still in the process of being developed and would be presented to the next meeting;</li> <li>• A <b>Post Payment Verification Progress Report</b> was received. Members noted that consideration was being given to the future model, which included the undertaking of remote visits;</li> <li>• A <b>Local Counter Fraud Update</b> was received. Members noted further consideration would be given to the report outside the meeting in relation to the issues regarding off contract agencies undertaking pre-employment checks;</li> <li>• The <b>Organisational Risk Register</b> was received. The Committee noted that discussions continued to be held with ILG colleagues in relation to risks which had been stagnant for a significant period of time.</li> </ul> <p><b><u>Hosted Bodies</u></b></p> <ul style="list-style-type: none"> <li>• The <b>WHSSC Corporate Risk Assurance Framework</b> was received. The Committee noted that a review would be</li> </ul>

	<p>undertaken of the <b>Risk Register and Risk Scoring during September</b>. The Committee requested that a review of <b>target scores</b> was also undertake during this process;</p> <ul style="list-style-type: none"> <li>• <b>The WHSSC Governance and Accountability Framework</b> was received. The Committee noted that the <b>WHSSC Standing Orders and Standing Financial Instructions</b> would be presented to Board in September for approval;</li> <li>• A verbal update was presented on the <b>EASC Risk Register</b>. The Committee noted that a Business Continuity Incident had occurred which had led to the urgent development of an action plan which the Minister for Health &amp; Social Services would be monitoring on a fortnightly basis. The Committee requested that the Risk Register was presented to the Committee at all future meetings;</li> <li>• An <b>Audit Wales Review of WHSSC Governance Arrangements</b> was received. The Committee noted that a <b>Hosting Assurance Framework</b> was in the process of being developed which would help to strengthen the role of the Committee in relation to hosted bodies.</li> </ul>
<p><b>ASSURE</b></p>	<ul style="list-style-type: none"> <li>• An <b>Internal Audit Review on Mass Vaccinations</b> was received which had been given a <b>substantial assurance rating</b>. The Committee requested that <b>their thanks were extended to all involved in the project</b>;</li> <li>• The <b>Audit Recommendations Tracker</b> was received. The Committee <b>welcomed the report which had improved greatly</b>. Members noted that discussions would be held with ILG colleagues to discuss the historical recommendations.</li> </ul>
<p><b>INFORM</b></p>	<p>The following reports were received via the consent/main agenda for approval/noting;</p> <ul style="list-style-type: none"> <li>• Audit &amp; Risk Committee Annual Report 2020/2021;</li> <li>• Procurements and Scheme of Delegation Report;</li> <li>• Losses and Special Payments Report;</li> <li>• Declarations of Interest and Gifts and Hospitality Report;</li> <li>• ISO14001 External Environmental Audit Report;</li> <li>• Internal Audit Progress Report;</li> <li>• Internal Audit Review – Sunnyside – Reasonable Assurance;</li> <li>• Audit Wales – Audit &amp; Risk Committee Update;</li> <li>• Audit Wales Review – Vaccinations;</li> <li>• Audit of Financial Statements Addendum Report;</li> <li>• Audit Wales/Healthcare Inspectorate Wales Follow Up Review of Quality Governance – Management Action Plan;</li> <li>• A report on Financial Control Procedures Medical Variable Pay Authorised Breaches was received at the In Committee section of the meeting.</li> </ul> <p>The following reports were received during at the Hosted Bodies section of the meeting:</p> <ul style="list-style-type: none"> <li>• WHSSC Internal Audit Recommendations Tracker;</li> </ul>



	<ul style="list-style-type: none"><li>Internal Audit Review – WHSSC Cancer and Blood Services – Substantial Assurance</li></ul>
<b>APPENDICES</b>	Choose an item.