

HEALTH BOARD MEETING
HIGHLIGHT REPORT FROM THE CHAIR OF THE AUDIT COMMITTEE

DATE OF MEETING	30/09/2020
PUBLIC OR PRIVATE REPORT	Public
IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report
PREPARED BY	Kathrine Davies, Corporate Governance Support
PRESENTED BY	P Griffiths, IM Chair of Audit & Risk Committee
EXECUTIVE SPONSOR APPROVED	Georgina Galletly, Director of Corporate Governance/Board Secretary
REPORT PURPOSE	FOR NOTING
ACRONYMS	

1. PURPOSE

- 1.1 This paper has been prepared to provide the Board with details of the key issues considered by the Audit & Risk Committee at its meeting on the 10 August 2020.
- 1.2 Key highlights from the meeting are reported in section 2.



1.3 The Board is requested to **NOTE** the contents of the report and actions being taken.

2. HIGHLIGHT REPORT

ALERT / ESCALATE

The Committee received and **APPROVED** the following reports for onwards submission to Board for approval:

- Amendment to the Committee Standing Orders.

The Committee **received** and **noted** the report on the 19/2020 Annual Accounts Narrative Correction. The Committee were advised that the 'Remuneration and Staff Report' of the 2019/20 Annual Statement contained some narrative that had since been informed by data that had been interpreted incorrectly.

Members **noted** that the figures reported in the Annual Accounts were correct, but an addendum to the Annual Accounts Statement would need to be made to formally rectify the error in the narrative of the Remuneration Report.

The Audit Committee discussed in detail in the 'In Committee' meeting the management actions in place to address the payments reported.

The Committee **received** a verbal update on the External Due Diligence Review of Field Hospitals which was currently underway. Members were advised that feedback would be received at the end of day three and an update would be received at the next meeting.

ADVISE

The Committee **received** and **noted** the Consultant Job Planning Update. Members **noted** that a training programme had been deployed over the 3 sites to refresh understanding of job planning and the e-job planning software. The Committee were advised that there has been no uplift in job planning completion or sign off of job plans to date. Due to the pandemic, there were falling rates of compliance as the shift in focus in the ILGs has moved to dealing with the complexities of the pandemic and job planning has been mostly paused. A further update would be received by the Committee early in 2021 which would tie in with the Internal Audit revisit in Quarter 4.

The Committee **received** an update on the Audit Recommendations Tracker which made it easier to overview progress and identify trends. Whilst some updates had been provided to the recommendations, there were some areas where updates were still being awaited and updates (including any revised implementation dates) would continue to be requested in readiness for the October meeting of the Committee.

The Committee **received** the Internal Audit Progress Report, where the following key points were **noted**:

- The annual plan was based upon discussions with management and the review of the risk register and supporting information before Covid-19. Although the plan was formally approved by the Committee in April 2020, members acknowledged that the focus of the plan has changed as a result of the pandemic's impact on the risk profile of the Health Board. The team were working through resourcing across all of the plans to work out timings and delivery for each health organisation, whilst also being mindful of possible future pandemic 'spikes' that may impact delivery.

The Committee **received** the Internal Audit Report on Medical Rostering. The report had been received at the June meeting but now contained the Management Response. Members were encouraged that good progress had been made and that this would be monitored by the Integrated Locality Groups. The

	<p>report had a 'Limited' assurance and would be revisited again early in 2021.</p> <p>The Committee received a verbal update on the Wales Audit Office Progress report and were advised that, similar to Internal Audit, work was now concluding and would be brought back to the October 2020 meeting.</p> <p><u>Part 2 – Welsh Health Specialised Services Committee and Emergency Ambulance Services Committee</u></p> <p>The Committee received and noted the WHSSC Corporate Risk and Assurance Framework. Members noted the work undertaken on 'business as usual' and the approach being taken to risk management during the COVID-19 pandemic. Members were advised that the CRAF continued to be monitored and that work on a revised risk management process was underway.</p>
<p>ASSURE</p>	<p>The Committee received and noted for assurance the following Internal Audit & Assurance reports:</p> <ul style="list-style-type: none"> • Medical Rostering • Head and Neck Management Arrangements • Health and Safety • Acute Medicine and A&E <p>The Committee received the Local Counter Fraud Progress report and were assured that Counter Fraud was moving towards more intervention and investigative work in line with Welsh Government standards.</p> <p>The Committee received the Local Counter Fraud Annual Report for 2019/2020.</p> <p>The Counter Fraud Work Plan for 2019/20 was approved by the Audit & Risk Committee in July 2019, and identified a total resource of 530 days for the year. Due to staff issues which arose within the Department during the course of the year, the number of days actually delivered was 498.</p> <p>The Committee received and noted the Counter Fraud Draft Work Plan for 2020/2021. Members noted that due to ongoing staffing issues within the department, the level of resource to</p>



	<p>be utilised in the delivery of the plan was currently an estimated figure. To date, these staffing issues have been mitigated by increasing the part-time post within the Department to full-time, supplemented with additional flexible resource being provided for within the overall Swansea Bay UHB Counter Fraud Team. It has been agreed with the Director of Finance that the exact resource levels will be revisited once the above staffing issues have been resolved, with the final plan being presented to a future meeting of the Audit & Risk Committee for final approval.</p>
INFORM	<p>The Committee received and noted the following reports:</p> <ul style="list-style-type: none">• Audit Committee Self-Assessment Improvement Plan Update;• Procurements and Scheme of Delegation report;• Losses and Special Payments;• Standards of Behaviour Verbal Update;• Committee Forward Work Plan 2020/21. <p><u>Part 2 – Welsh Health Specialised Services Committee and Emergency Ambulance Services Committee</u></p> <p>The Committee received the WHSSC Internal Audit Recommendations Tracker and noted that a number of items had been closed off. Members were advised that there had been fewer Internal Audit reports during this period.</p> <p>The Committee received a verbal update on the EASC Risk Register and noted that work was underway to align the Risk Register with the revised approach in CTMUHB. The revised Risk Register would be taken to the EASC Committee at their meeting on 9 September.</p>
APPENDICES	<p>Choose an item.</p>