AUDIT & RISK COMMITTEE ACTION LOG FOLLOWING MEETINGS HELD ON 9 JUNE 2021

NO.	MEETING DATE	SUBJECT	ACTION	TIMESCALE	RESPONSIBLE OFFICER	STATUS AS AT August 2021
18/099	8/10/2018	Endoscopy JAG Accreditation	Closure report to be presented to a future meeting.	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	Interim Chief Operating Officer	In progress One of the key reasons for not obtaining JAG Accreditation related to capacity issues. A proposal looking to address the capacity issues has been submitted to Welsh Government. JAG were due to undertake a revisit again this year but have not been able to as a result of COVID. The other issue where JAG accreditation cannot be provided is associated with the ingress and egress and as such we do not have a definitive position from JAG. We are actively pursuing acquiring more capacity and are awaiting JAG dialogue in regard to the built environment, with a date yet to be received from JAG.
				action log at each meeting		
20/070	16/06/2020	Internal Audit Review – Princess of Wales Hospital Fire Safety – Follow Up Review	Executive Lead to be invited to attend a future meeting to discuss the content of the report. Committee Chair to consider the most appropriate time for a discussion to take place.	October 2020	Director for People	In progress Fieldwork has now commenced. It is hoped that a report will be available for the October 2021 meeting of the Committee
4.2	13/04/2021	Internal Audit Review – IT Service Management	Position in relation to finding 8 to be reviewed and reported back to the Digital & Data Committee as to how widespread the systematic issues were and whether any learning needed to be shared across Wales.	July 2021	Director of Public Health	In progress This will be discussed and reviewed at the July meeting of the Digital & Data Committee
4.7	13/04/2021	Internal Audit Review – Governance Arrangements During Covid 19 Follow Up – Advisory Review	Closure report for the Gold, Silver, Bronze Command Decisions Log to be shared with Committee members if required.	June 2021	Director of Corporate Governance	Completed Closure report has now been shared with Committee colleagues.

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4.11	13/04/2021	Internal Audit Review – Prince Charles Hospital Technical Compliance	Explanation to be given in future management responses as to why a recommendation had been agreed and what action was to be taken, as opposed to simply stating 'agreed'.	June 2021	Executive Directors	In progress This will be taken forward by the Executive Directors
2.2.1	09/06/2021	Action Log	Action log to be placed on the main agenda for discussion at the next meeting	August 2021	Director of Corporate Governance	Completed Action log has now been placed on the main agenda for discussion
2.2.5	09/06/2021	CTMUHB ISO14001 External Audit Report	Thanks to be extended to Team for achieving the ISO14001 accreditation which was an excellent achievement.	June 2021	Chief Operating Officer	Completed The Committees thanks have been extended to members of the Facilities Team.
5.3	09/06/2021	Audit Wales: Audit of the Financial Statement (ISO 260) Report	The Committee's thanks to be extended to the Finance Team and Audit Wales colleagues for completing this complex piece of work.	June 2021	Director of Finance	Completed The Committee's thanks has been extended
6.1	09/06/2021	Internal Audit Progress Report	Completion date identified in the action log in relation to the Fire Safety Management Review to be aligned with the date identified within the report.		Director of Corporate Governance	In progress Fieldwork has now commenced. It is hoped that a report will be available for the October 2021 meeting of the Committee
6.2	09/06/2021	Internal Audit Review – Targeted Intervention	Recommendation relating to the review of self-assessment trackers to be marked as completed on the Audit Tracker.	June 2021	Director of Corporate Governance	Completed Audit tracker has been updated
8.1	09/06/2021	Audit Recommendations Tracker	Review to be undertaken of the recommendations which had drifted and the recommendations in which responsibility had been placed on another department to action.	October 2021	Director of Corporate Governance	In progress Session booked in with ILGs in August to go through Audit Tracker. Improvement should therefore be realised in the subsequent report to the October Audit & Risk Committee meeting.
8.1	09/06/2021	Audit Recommendations Tracker	Chart to be developed which showed progress on each action against the original implementation date.	August 2021	Director of Corporate Governance	Completed Charts now included in the latest iteration of the report.
2.1 In Committee	09/06/2021	Medical Variable Pay – Summary of Authorised Breaches	Executive Team discussion to be held to determine the most appropriate environment in which scrutiny of this issue could be undertaken.		Director of Corporate Governance/ Director of Finance	In progress Report continues to be presented to Audit & Risk Committee in the form of a closed report.