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### Agenda Item 3.1

#### • ACTION LOG – AUDIT & RISK COMMITTEE

Minute Reference	Date of Meeting Action Originated	Issue	Lead Officer	Timescale for Action to be completed	Status of Action (as at date papers where circulated)
18/099	8/10/2018	Endoscopy JAG Accreditation Closure report to be presented to a future meeting.	Interim Chief Operating Officer	January 2019  <b>Revised to:</b> October 2020  <b>Ongoing</b> - Action being led by Director of Operations. This matter is linked to JAG accreditation and updates will be provided to the	<b>In progress</b> Committee requested that a progress report on JAG Accreditation was presented to the October 2021 meeting for further discussion. Report to identify the complexities and the barriers in place to achieving accreditation and the funding required to enable the works required in obtaining accreditation was received at the October 2021 meeting. Confirmation required as to when a closure report would be available.  <b>August 2022 Update – It has been estimated that a closure report will not be available until March 2024.</b>



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				Committee through the action log at each meeting  Now October 2021	
4.3	28/04/2022	End of Year Post Payment Verification Report to be developed and presented to a future meeting of the Committee.	All Wales Post Payment Verification Manager	October 2022	<b>In progress</b> Added to the forward work programme for October 2022
3.1.1	23/06/2022	Confirmation to be provided outside the meeting in relation to when the six month extension given by JAG was due to expire.	Chief Operating Officer	Immediate	<b>Completed</b> Confirmation received that the six month extension was due to expire at the end of October.
5.3.5	23/06/2022	Regular updates to be included in the Chief Operating Officers report to Quality & Safety Committee on the work being undertaken to address the issues highlighted within the Internal Audit Follow Up Review – Patient Pathway Appointment Management Process report.	Chief Operating Officer	July 2022 Now September 2022	<b>In progress</b>



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4.3	23/06/2022	Confirmation to be provided outside the meeting regarding the cost of the original contract for Andrew Scott Ltd.	Director of Finance	Immediate	<b>Completed</b> Response received and shared with Members on 20 July 2022
4.3	23/06/2022	Explanation to be provided to the Committee Chair outside the meeting regarding the reasons behind procurement processes not being followed in relation to the Andrew Scott Ltd contract.	Director of Finance	Immediate	<b>Completed</b> Response received and shared with Members on 20 July 2022
5.1	23/06/2022	Committee members to reflect as to whether they feel the level of detail contained within the final column of the tracker helpful or distracting.	Committee Members	August 2022	<b>In progress</b> Members to feedback their views at the August 2022 meeting.
5.1	23/06/2022	Consideration to be given to holding a separate workshop with Executive Directors to discuss the older recommendations contained within the Tracker.	Committee Members	September 2022	<b>In progress</b> Proposal to hold a workshop in September 2022 based on the updates provided for the August 2022 Audit Tracker report.
5.3.1	23/06/2022	Further discussion to be held with the Executive Team in relation to timeliness of	Director of Corporate Governance	July 2022	<b>Completed</b> Discussion held with the Executive Team on 18 July 2022.



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		management responses to Internal Audit Reviews.			
5.3.4	23/06/2022	Internal Audit Follow Up Review – Medical & Dental Rostering report to be presented back to next meeting with strengthened management response.	Medical Director	August 2022	<b>On agenda</b>