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• 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 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	In progress 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.



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				Committee through the action log at each meeting Now October 2021	
4.1	28/04/2022	Discussion to be held between the Director for People and the Director of Finance to determine whether there were any system weaknesses in relation to the overpayment of salary issues.	Director for People & Director of Finance	June 2022	In progress Meeting scheduled to take place on 15 June to discuss further
4.2	28/04/2022	Director of Finance to undertake a review of Single Tender Action 1531 to determine the details of the Harp Funeral Services Contract and whether this contract was for CTMUHB only or for the whole of Wales, and whether the initial tender was for the Health Board only or for Local Authorities also.	Director of Finance	June 2022	Completed Review undertaken and briefing note shared with Members on the 15 June.



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4.3	28/04/2022	Review to be undertaken outside the meeting as to whether a Three Year Visit Plan for General Medical Services had ever been agreed by the Audit & Risk Committee.	All Wales Post Payment Verification Manager	May 2022	Completed Response provided to Independent Members as follows: The wording contained within the report is historical and the post payment verification visit plan seeks approval and agreement from the Health Boards. The wording contained within the report will be amended.
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	In progress Added to the forward work programme for October 2022
4.3	28/04/2022	Discussion to be held outside of the meeting to determine the rationale behind the 10% review of claims figure.	All Wales Post Payment Verification Manager	May 2022	Completed The following response was shared with Committee Members: Analysis was carried out to see what would be acceptable level of assurance and also what could be carried out efficiently with our resource considering the



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					time it takes for one account only. The 10% or 22 whichever the greater per service per practice, can depend on the size of the claims made for different accounts. For example if we have a practice with 1000 flu claims then we would check 100 claims and this is just for one of the services.
5.1	28/04/2022	Internal Audit Recommendations Tracker to be amended to ensure that all Limited Assurance rated recommendations were contained within the same section of the tracker.	Corporate Governance Manager	Immediate	Completed Audit Recommendations Tracker has been amended.
5.1.1	28/04/2022	Review to be undertaken of the target date of June 2022 allocated to the rate card action to determine whether this was achievable.	Director for People	June 2022	Update not yet received
5.4.3	28/04/2022	Consideration to be given to the suggestion made to add the leavers checklist into the payroll notification process	Director for People	June 2022	Update not yet received



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		of members of staff leaving the organisation			
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