

**Betsi Cadwaladr University Health Board  
Minutes of the Audit Committee**

**15 March 2024, Boardroom, Carlton Court, St Asaph**

<b>Present</b>	
<b>Name</b>	<b>Title</b>
Karen Balmer	Independent Member (IM), Chair
Urtha Felda	Independent Member
Dyfed Jones	Independent Member ( <i>Part Meeting – in attendance from item ref AC24.39</i> )
<b>In attendance</b>	
Chris Lynes	Deputy Executive Director of Nursing
Dave Harries	Head of Internal Audit
Ffion Johnstone	Integrated Health Community Director (West) - ( <i>Part Meeting</i> ) - Via Virtual Link.
Fflur Jones	Audit Lead, Audit Wales
Glesni Driver	Head of Covid-19 Inquiry
James Risley	Deputy Executive Medical Director
Jody Evans	Corporate Governance Officer – Secretariat
Nesta Collingridge	Head of Risk Management
Nicola Jones	Deputy Head of Internal Audit
Pam Wenger	Director of Corporate Governance (in post as from 01.04.2024) - Via Virtual Link
Paolo Tardivel	Director of Transformation & Improvement ( <i>Part Meeting</i> )
Phil Meakin	Acting Board Secretary
Russell Caldicott	Interim Executive Director of Finance
Simon Monkhouse	Audit Lead, Audit Wales
Sjef Molmans	Local Counter Fraud Specialist

Agenda item	Action
<b>OPENING BUSINESS</b>	
<p><b>1.1 AC24.34 Welcome, introductions and apologies for absence</b></p> <p>AC24.34.1 The Chair of the Committee welcomed everyone to the meeting.</p> <p>AC24.34.2 Apologies were received from; Angela Wood, Executive Director of Nursing – Chris Lynes, Deputy in attendance. Adele Gittoes, Executive Director of Operations - Ffion Johnstone, Deputy in attendance. Karl Woodward, Head of Counter Fraud - Deputy Sjef Molmans Deputy in attendance.</p> <p>AC24.34.3 – In attendance remotely; Pam Wenger, observing following appointment to the role Director Corporate Governance 01/04/2024, James Risley, Deputy Executive Medical Director and Ffion Johnstone, Integrated Health Community Director (West).</p> <p>AC24.34.4 The Chair and Committee provided Pam Wenger, Director of Corporate Governance (starting with the Health Board 1<sup>st</sup> April 2024) with a warm welcome.</p> <p>AC24.34.5 Those in attendance introduced themselves.</p>	
<p><b>AC24.35 Declarations of interest on current agenda</b></p> <p>AC24.35.1 No declarations of interest were made at the meeting.</p>	
<p><b>AC24.36 Minutes of previous meeting for accuracy and review of summary action plan</b></p> <p>AC24.36.1 <b>RESOLVED:</b> That; the Minutes of the last meeting of the Committee held on 12.01.2024 be confirmed as a correct record subject to Minute AC24.20 - <i>missing word</i> (Audit) in relation to the title of Internal <i>Audit</i>.</p> <p>AC24.36.2 <b>RESOLVED:</b> That; updates to the summary action log be recorded therein.</p>	
<p><b>AC24.37 Notification of matters referred from other Committees</b> Phil Meakin, Acting Board Secretary - for decision.</p> <p>AC24.37.1 There were no matters referred from other Committees noted at the meeting.</p>	

<b>GOVERNANCE</b>	
<p><b>AC24.38 Special Measures Progress Update on relevant areas</b> Paolo Tardivel - Director of Transformation &amp; Improvement present the item.</p> <p>AC24.38.1 This report provided an update on the progress made against the Health Boards Special Measures Progress, which reflected the deliverables associated to the Committee within Cycle 3 (December 2023 to February 2024). The Committee received assurance on the progress to date whilst acknowledging the challenges and risks to delivery.</p> <p>AC24.38.2 Members acknowledged the progress update and particularly the progress of the Office of the Board Secretary (78% compliance to date).</p> <p>AC24.38.3 The Committee also recognised the ongoing work of the Risk Management Team and appointment of the Director of Corporate Governance to support and compliment the Structure of the Team going forward.</p> <p>AC24.38.4 The final report into the stocktake progress review against previous Mental Health reviews was received by The Acting Board Secretary and would progress through the relevant Committee responsible for independent reporting, in order to instigate the Management Response.</p> <p>AC24.38.5 The Director of Transformation &amp; Improvement drew attention to the delays of some reviews, which had however been proactively completed.</p> <p>AC24.38.6 Members noted the assurance comments within the Action Plan, along with areas awaiting completion, updates were noted and included that; the Committee Business Management Group was being reconvened. The Acting Board Secretary also confirmed that the confirmations of Independent Member positions upon Committees as work in progress. The Committee also acknowledged that the Policy for the Management of Health Board wide Policies was an Agenda item at Committee for consideration and approval.</p> <p>AC24.38.6 The Committee were informed of the revised date for the action plan to support the development session as being the end of March 2024.</p> <p><b>RESOLVED:</b> That the Committee received assurance on the progress to date, acknowledging the challenges highlighted and risks to delivery.</p>	

**AC24.39 Risk Management**

Phil Meakin, Acting Board Secretary / Nesta Collingridge, Head of Risk Management - for assurance.

AC24.39.1 The Head of Risk Management presented the reports which summarised details in relation to:

- The Chair's Assurance Report from the Risk Management Group
- Board Assurance Framework (BAF).
- Corporate Risk Register.

AC24.39.2 The Head of Risk Management invited questions and the Chair expressed thoughts in relation to the improvements to the dashboards, suggesting that more narrative would be helpful with regard to a change in a risk's trajectory.

AC24.39.3 UF (IM) also commented and stated that the reports were much clearer; however, development to the grading of risks may require further detail.

AC24.39.4 The Interim Executive Director of Finance also provided positive feedback into the layout and presentation, whilst expressing the need to target the level of detail.

AC24.39.5 Chair also commented that there was a need to differentiate between a gap in control and a "state of affairs", the latter which should not be cited as a gap in control in the table. The Chair added that it would be good practice to include a due date on SP1 and in time for the committee to consider the impact of all the actions as part of this reporting and assurance process.

AC24.39.6 Gaps in control were commented upon into financial constraints. A discussion ensued to suggested improvements, along with how gaps in controls were being addressed and articulated. The Head of Internal Audit stressed the Board and Committees should not be a line of defence. UF (IM) questioned reporting rates across the East, Central and West areas, along with logical connections to actions across the Health Board. A discussion ensued and the detail was noted.

AC24.39.7 In relation to BAF item SP18, the Chair commented on embedded learning and the deadline of December 2023. It was noted that there had been some delays and the forecast deadline was now June 2024. It was confirmed that the Risk Team were in the process of updating the corporate risks, which would embed the updates and that they would be included within the forthcoming report to Health Board. A discussion took place concerning the observation of ownership resting with the Executives, along with oversight into the maintenance of risks. The Acting Board Secretary confirmed that the Executive Team continually review risks (bi

<p>monthly), via the Executive Team Meetings, and also clarified the Chief Executive has insight and a keen view, in terms of actions and ownership in relation to the Executive Team.</p> <p>AC24.39.8 The Committee also discussed the repository of learning. The Deputy Executive Director of Nursing confirmed that training was not a quick fix and the culture and human factors would require time to progress. It was explained that the 12-18 month journey to embed the repository would go live in April 2024. The Committee noted the ongoing significant work. It was agreed to share the paper in relation to the updates, which was being taken to a Quality, Safety Experience Committee Meeting. UF (IM) requested detail pertaining to training links to the Transformation Team. It was confirmed to UF of the links to section 5 of the special measures update; evidenced learning.</p> <p>AC24.39.9 Chair provided comment in relation to; the Corporate Risk Register item ref CRR24-05 – Financial Planning, around the assurances from the Performance, Finance and Information Governance Committee /Audit Committee. It was reiterated that Committee functions were not a line of defense. It was agreed for The Head of Risk Management to review the Line of Defense.</p> <p>AC24.39.10 <i>Dyfed Jones (Independent Member) entered the meeting. The Chair, Members and attendees welcomed DJ to the Committee.</i></p> <p><b>RESOLVED:</b> That; the Committee noted and received assurance for:</p> <ul style="list-style-type: none"> <li>· Chair’s Assurance Report from the Risk Management Group (full assurance).</li> <li>· Board Assurance Framework (BAF) full assurance. Feedback provided by the Committee, in terms of the second lines of defence.</li> <li>· Quality of the population of the board assurance framework, to be improved in line with board effectiveness and special measures.</li> <li>· Corporate Risk Register (partial assurance).</li> <li>· The discussions, which derived from the BAF &amp; Corporate Risk Register.</li> </ul>	<p>CL</p> <p>NC</p>
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<p><b>AC24.40 Corporate Governance</b> Phil Meakin - Acting Board Secretary presented the report.</p> <p>AC24.40.1 The Acting Board Secretary presented The Corporate Governance report.</p> <p>AC24.40.1.1 Details of Breaches to Publication of Board and Committee Papers; the Acting Board Secretary drew attention to the detail within appendix 1 of the report and reported 3 breaches had been recorded since the last Audit Committee. Discussion ensued concerning the improved position and the committee noted that the special measures, interim standard of 5-days had been met. The Acting Board Secretary agreed to provide a visual graph in future reports outlining the data. The Chair requested that the information be provided on a cumulative basis.</p> <p>AC24.40.1.2 The Acting Board Secretary presented the Policy for the Management of Health Board Wide Policies, Procedures and other Written Control Documents, it was agreed to approve the document, subject to minor updates to Job Titles. The Acting Board Secretary agreed to update the Policy document with the Director of Corporate Governance, as per the minor updates as agreed.</p> <p>AC24.40.1.3 The Secretariat (JE) also explained to UF (IM) in response to a question; regarding the various Impact assessments around written control document production, along with incorporation of consultations and engagement.</p> <p>AC24.40.1.4 The Committee were also provided with an update on the work underway on updating written control documents across the Health Board. The Acting Board Secretary proposed to report back to the Committee in May 2024, in relation to the progress to outstanding policies for review.</p> <p>AC24.40.1.5 The Acting Board Secretary provided the brief update on the Review of Gifts &amp; Hospitality and Declarations of interest Registers and confirmed that a full report would be reported back to the Audit Committee in May.</p> <p>AC24.40.1.6 Ongoing work with the Civica – Declare System; significant progress was highlighted, along with the forthcoming Internal Audit Review.</p> <p>AC24.40.1.7 Validation of Declarations was also discussed. It was confirmed that a piece of work had been commenced into the review of persons registered with Company House. The Counter Fraud Lead clarified the approach of the work in relation to the national fraud initiative and the work with suppliers on oracle and</p>	<p>PM</p> <p>PM</p> <p>PM</p>
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<p>matches with the ESR system. The requirement to declare was discussed along with the legalities aligned with duties to report.</p> <p>AC24.40.1.8 Following the discussions, the Deputy Board Secretary noted the requirement to remind and further communicate and approach staff to update their declarations.</p> <p><b>RESOLVED;</b> that <i>The Committee:</i></p> <ul style="list-style-type: none"> <li>· Noted the report on breaches to Board and Committee agenda and papers.</li> <li>· Noted and Approved in principle the “Policy for the Management of Health Board Wide Policies, Procedures and other Written Control Documents.” subject to minor updates to Job Titles.</li> <li>· Noted the progress being made on updating policies.</li> <li>· Noted the update on Declarations of Interest and Gifts and Hospitality.</li> </ul>	<p>PM</p>
<p><b>FINANCE</b></p>	
<p><b>AC24.41 &amp; 42 Breaches of SFI’s, Scheme of Delegation and Standing Orders (SO’s)</b> Russell Caldicott, Interim Executive Director of Finance - for assurance. Verbal.</p> <p>AC24.41 &amp; 42.1 The Interim Executive Director of Finance provided a verbal update in relation to the Breaches of SFI’s, Scheme of Delegation and SO’s, along with the SFI Conformance Report, in relation to the period ending December 2024.</p> <p>AC24.41 &amp; 42.2 It was confirmed that a written report was planned to be provided to the May 2024 Audit Committee.</p> <p><b>RESOLVED:</b> That; The written report be provided at the Audit Committee in May 2024.</p>	

**AC24.43 Key Judgements and Annual Timetable 23-24 Draft Final Accounts**

Russell Caldicott, Interim Executive Director of Finance - report *for approval*.

AC24.43.1 The Interim Executive Director of Finance provided the Committee with the Key Judgements and Annual Timetable 23-24 Draft Final Accounts Report.

AC24.43.2 *The Committee* noted the engagement that occurred with Audit Wales post submission of the 2022/23 Annual Accounts, the work undertaken throughout the year and further the timeframe, key dates for review, Audit and submission of the 2023/24 Annual Accounts.

AC24.43.3 Members and attendees also noted the initial key areas where the values recorded in the 2023/24 Annual Accounts were based on judgement. It was recognised that further detail would be shared at the planned Audit Committee Development Session on the 21st May 2024.

AC24.43.4 Discussion ensued with regards to the Welsh Risk Pool, Continuing Health Care, along with Annual leave accrual. It was confirmed that detail in terms of liabilities had been shared with audit colleagues, along with confirmation around the usage of debt collection agencies.

AC24.43.5 Chair questioned whether annual leave due to Covid had been utilised in the carry over. It was noted that all Covid related carry over of leave had been utilised by employees.

AC24.43.6 UF (IM) also questioned the levels of exposure costs, in terms of Welsh Risk Pool payments and it was confirmed by the Interim Executive that penalties are thought to be linked to risk management and exposed costings. Interim Executive to clarify and feedback to UF (IM).

**RESOLVED;** That *the Committee*:

- Noted the engagement that had occurred with Audit Wales post submission of the 2022/23 Annual Accounts, the work undertaken throughout the year and further the timeframe, key dates for review, Audit and submission of the 2023/24 Annual Accounts.
- Noted the initial key areas where values recorded in the 2023/24 Annual Accounts are based on a judgement (estimation). Further details would be shared at the planned Audit Committee Development Session on the 21st May 2024.

RC

<p><b>AC24.44 Counter Fraud Report (Matters for Public)</b> Sjef Molmans - Local Counter Fraud Specialist - <i>for assurance on behalf of Karl Woodward Head Of Local Counter Fraud Services, Finance</i></p> <p>AC24.44.1 The Local Counter Fraud Specialist thanked the Chair of the Audit Committee for the opportunity to provide the verbal update to the March Audit Committee.</p> <p>AC24.44.1.1 It was noted that the Local Counter Fraud Service Team was undertaking preparation work for the Counter Fraud Functional Standard Return (CFFSR) planned for electronic submission by the deadline 31<sup>st</sup> of May. The Local Counter Fraud Specialist explained the Counter Fraud Functional Standard Return enabled NHS organisations to produce formal self-reviews of work undertaken to counter fraud, bribery and corruption and to also demonstrate compliance against each of the individual NHS requirements of the Government Functional Standard GovS013: Counter Fraud.</p> <p>AC24.44.1.2 The Committee acknowledged that NHS Counter Fraud Authority (NHS CFA) launched the Procurement Local Proactive Exercise for 2024/25. It was noted that the Health Board was requested to complete the exercise in a six-month period and formally report the findings.</p> <p>AC24.44.1.3 The Local Counter Fraud Specialist informed the Committee that the Local Counter Fraud, Bribery and Corruption Policy for the Health Board was due for review in August 2024. It was agreed to initially review and consider the policy at a future Audit Committee. The Committee also noted the new draft guidance of failure to prevent fraud and the need to conclude the investigation process following an employee departure from the Health Board.</p> <p>AC24.33.2 Mandatory Counter Fraud Awareness Training – The Committee recognised the excellent progress made to date, concerning the Counter Fraud Awareness training going live within the Health Board. The Committee congratulated the Counter Fraud Team on the achievement.</p>	<p>Agenda item – future Audit Committee</p>
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INTERNAL AUDIT REPORTS	
<p><b>AC24.45 Internal Audit Reports</b>                      Dave Harries, Head of Internal Audit - <i>Presenting</i>.                      Nicola Jones - Deputy Head of Internal Audit – <i>Presenting</i>.                      Russell Caldicott Executive Director of Finance - (Audit  Report Reviews).</p> <p>AC24.45.1 The Head of Internal Audit presented the internal audit plan for the period April to September 2024/25. (Which included details pertaining to the risk based planned reviews for the first six months of the financial year; following review of the Board and Committee papers, BAF, CRR and risk based meetings with IMs and Executive Directors, along with reviews deferred from 2023/24).</p> <p>AC24.45.2 It was explained that the Health Board had adopted the plan and thanked staff whom engaged in the delivery.</p> <p>AC24.45.3 A discussion took place concerning the risk-based elements of the plan and in particular the fire safety risks and timescales. The Head of Risk Management confirmed the risk was live within Datix, along with an overarching estates risk, which was now approved and would be notified to the Risk Management Group in April 2024. The Head of Risk Management agreed to provide feedback to internal audit by the May Audit Committee.</p> <p>AC24.45.4 It was raised that the Clinical audit plan was subject to a follow up review of the recent limited assurance report. It was noted of the requirement to refresh the risk and update the Committee therein the October to March 2025 plan</p> <p>AC24.45.5 The Chair raised a question concerning the Value Based Health topic in relation to the procurement and budget plan. The Head of Internal Audit explained there was a direct allocation against value based health care and confirmed that a review would be undertaken concerning the achievements and delivery.</p> <p>AC24.45.6 Chair recognised that contract and procurement were within the 1<sup>st</sup> 6 months of the plan and it was confirmed to be upon the 2<sup>nd</sup> part of the financial year, to allow time for the special measures report to gain formal adoption; the Committee were conscious that finance had been working actively on implementation.</p> <p>AC24.45.7 The Committee noted and approved the Internal Audit Charter with the addition of the CEO as an escalation point (except where CEO is an auditee) for delayed management responses to audit reporting, and of the title change of Board Secretary to Director of Corporate Governance.</p>	<p>NC</p> <p>NC</p>

<p>AC24.45.8 The Deputy Head of Internal Audit presented the internal audit reports in relation to Follow-up: Delivery of Health Board Savings and the Water Safety Report.</p> <p>AC24.45.8 A discussion took place with regards to delivery of health board savings and transformation along with planned target savings. It was acknowledged that the report had been confusing with regards to the legacy issues and The Interim Executive Director of Finance stated that the Finance Team were monitoring the output throughout the year.</p> <p>AC24.45.9 Discussions arose relating to the water safety report and responsibilities of areas; following a discussion <i>compliance was recognised to be with nursing and facilities</i>. The Deputy Executive Director of Nursing provided an overview of how the issues were dealt with from a nursing and infection control perspective. Training provision was also raised as a concern by the Chair. It was then explained that training was being promoted by the Strategic Infection Prevention and Control Group. The Interim Executive Director of Finance agreed to gain further insight into the area responsibilities and risk sharing between Facilities staff.</p> <p>AC24.45.10 <i>Ffion Johnson joined the meeting. The Chair and Attendees welcomed FJ. 11:50am</i></p> <p>AC24.45.11 CITO programme – The Committee members and attendees expressed their congratulations on the achievement of the substantial audit report.</p> <p>AC24.45.12 Attention was drawn to the Health and Safety report in relation to the Executive Action Owner. It was also pointed out that the current Health &amp; Safety Policy was overdue for review. It was confirmed that by default, the Chief Executive Officer is the Executive Lead/Owner in relation to the Audit Recommendations. It was therefore agreed to follow up the urgency to update the out of date Policy, in order to comply with the recommendation.</p> <p>AC24.45.13 The Executive Director of Finance provided an explanation in relation to the challenges and difficulties in delivery; relating to the budgetary controls and delays raised by the Chair. It was confirmed that the audit was now underway.</p> <p>AC24.45.14 The issue of non, or lack of compliance in responses to audits was highlighted by internal audit. The Acting Board Secretary expressed his apologies for the lack of engagement in some areas and it was agreed to raise the issue at the Executive Team Meeting.</p>	<p>RC</p> <p>PM,CEO</p> <p>PM</p>
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**RESOLVED:** That; the Committee:

- Approved the six-month Internal Audit Plan for April to September 2024.
- Noted the Audit Universe/Rolling plan and the risks identified for consideration for October to March 2024/25.
- Approved the Internal Audit Charter with the addition of the CEO as an escalation point (except where CEO is an auditee) for delayed management responses to audit reporting and title change of Board Secretary to Director of Corporate Governance.
- Noted the associated Internal Audit Key Performance Indicators.
- Received the progress report.

<p><b>AC24.46 Audit Recommendations Tracker</b> Phil Meakin, Acting Board Secretary / Nesta Collingridge, Head of Risk Management - for assurance.</p> <p>AC24.46.1 The Committee were provided with an overview of the Report and Audit Tracker. The considerable amount of work, which had taken place since the last meeting was recognised by the audit Committee. It was noted that the Internal and External Audit recommendations for closure had also been discussed at the Executive Team meetings.</p> <p>AC24.46.2 The Committee noted the current position of the overdue audit recommendations and took assurance of the tracking and the proposed recommendations for closure. It was confirmed that the recommendations for closure, (which had been taken to the last Audit Committee) were with Internal Audit for final closure, pending review of the evidence provided .A log of the recommendations for closure signed off by Internal Audit would form part of the future reporting on this agenda item</p> <p>AC24.46.3 Questions were invited. The Chair recognised and reported upon an error within the statistics. It was agreed to correct the error therein the report.</p> <p>AC24.46.4 <i>In attendance to update the Committee;</i> The Deputy Executive Director of Nursing provided an update on behalf of the Executive Director of Nursing and Midwifery and provided updates against outstanding recommendations. It was acknowledged that recommendations which were pending had now started that there were no overdue recommendations due.</p> <p>AC24.46.4.1 The Acting Executive Finance Director reassured the Committee regarding the contractual recommendations and confirmed that the Finance Team regularly meet with the contracting team and acknowledged the challenges around environmental and operational management.</p> <p>AC24.46.4.2 UF (IM) requested further detail in relation to the Community Health Council and the ongoing national works timeline. The Executive Director of Finance clarified that the health board were looking into the next stages on a national level in relation to the value to access the training packages. The continued engagement and plans under development was noted.</p> <p>AC24.46.5 <i>In attendance to update the Committee;</i> Integrated Health Community (IHC) Director (West), provided an update on behalf of the Interim Executive Director of Operations and provided updates against outstanding recommendations.</p>	<p>NC/GD</p> <p>NC/GD</p>
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<p>AC24.46.5.1 The IHC Director informed the Committee of the variety of audits undertaken, in terms of performance and stated that the Associate Director for Emergency Care (interim), was working through the on call actions.</p>	
<p>AC24.46.5.2 It was noted that an extension to the Urgent primary care actions may be considered, due to an updated service model.</p>	
<p>AC24.46.5.3 Updated ownership (to be agreed) of the GP out of hours recommendations was raised. It was agreed for the IHC Director and the Head of the Covid Inquiry to confirm and update the Tracker details.</p>	GD
<p>AC24.46.5.4 With regards to engagement and updates; it was agreed to invite the Head of Risk Management and the Head of the Covid Inquiry to the Operational Leadership Team Meeting to instigate updates to outstanding actions.</p>	FJ/NC/GD
<p>AC24.46.5.5 To further note, it was stated by the Audit Committee Chair that; a meeting with the Assoc Director for Emergency Care (Interim) was arranged, in order to discuss the outstanding recommendations. The Head of Internal Audit explained to the Committee of the pre dating issues surrounding the recommendations.</p>	
<p>AC24.46.5.6 At this point in the meeting, a discussion ensued concerning the significant risk issues relating to the Gold, Silver and Bronze On Call Duties. It was stressed that compensatory rest had not been progressed. It was agreed to raise the risk and issues in relation to staff wellbeing therein the Chairs Report to Board and it was agreed to recirculate the internal audit report.</p>	Chairs report to Board NC/PM
<p>AC24.46.6 The Committee further commented upon the tracker and it was confirmed that all closures of recommendations were taken to the Executive Team Meetings and Internal Audit for extended scrutiny. The Chair commented upon the tracker as a whole, and suggested that the Internal and External Audits be placed upon separate documents for the next financial year. Chair also informed the Committee of her findings from reviewing the report and tracker documents and of a recent mapping exercise which had been undertaken. The refinement suggestions were taken on Board by the Committee, and it was noted that in future, the reports would be condensed and easier to manage</p>	NC/GD
<p>The Acting Board Secretary also shared detail in relation to the future publication of the structured assessment report, which would to be shared upon publication.</p>	
<p><b>RESOLVED:</b> That <i>the Committee:</i></p>	

<ul style="list-style-type: none"> <li>· noted the current position (February 2024) of overdue audit recommendations</li> <li>· Took assurance that the Health Board has an appropriate tracking and reporting system in response to audit recommendations.</li> <li>· Considered the proposed recommendations for closure.</li> <li>· Representatives in attendance to represent the Executive Director of Nursing and Executive Director of Operations, and provided the relevant updates to updates pertaining to their areas.</li> <li>· Concern was noted on the overdue recommendation and associate risk in relation to “on call” (Gold, Silver and Bronze) out of hours relating to compensatory rest periods.</li> </ul>	
<b>EXTERNAL AUDIT</b>	
<p><b>AC24.48 Audit &amp; Risk Committee Update</b> Fflur Jones, Audit Wales Lead - <i>for update and discussion.</i></p> <p>AC24.48.1 The Audit Wales Lead (FJ) provided the Committee with an update in relation to External Audit and Risks pertaining to the Committee. The summary report was noted with regards to the status of current and planned accounts audit work, along with the status of current and planned audits</p> <p>AC24.48.2 Following the update it was explained by the Audit Wales Lead (SM) that the Audit Team met regularly to incorporate risks into audit planning, along with training being provided to Finance Staff. It was confirmed that audit work with regards to charitable funds was near completion. Attention was also drawn to the Planned care Audit and focus of the commencement date being under consideration.</p> <p><b>RESOLVED:</b> That The Committee noted the report and response.</p>	



<p><b>AC24.49 Board Effectiveness Follow up</b> Fflur Jones, Audit Wales Lead - presented the item for information.</p> <p><b>AC24.49.1</b> The Board Effectiveness follow up report was presented which provided the Audit Committee with key detail into the follow-up review of the board effectiveness report, along with the Health Board's response to the report's findings and recommendations which had previously been taken to the Private Health Board Meeting.</p> <p><b>AC24.49.2</b> The Acting Board Secretary confirmed the report was be noted at the Public Health Board Meeting in March, within the Chief Executives update report. It was also confirmed that the report had been published on the Audit Wales Web Site. The Director of Corporate Governance expressed the importance of the report, in terms of governance and how the report had been structured in terms of accountability.</p> <p><b>RESOLVED:</b> That The Committee noted the report and response.</p>	PM
<b>AUDIT COMMITTEE</b>	
<p><b>AC24.50 Briefings and Update Sessions (As Appropriate)</b> Chair/Acting Board Secretary - for information</p> <p><b>AC24.50.1</b> Nothing to report.</p>	
<b>CLOSING BUSINESS</b>	
<p><b>AC24.51 Agree Items for referral to Board / other Committees</b> Chair - for information</p> <p><b>AC24.51.1 Items for referral to other Committees were agreed as follows:</b> On call arrangements to be raised with the People and Culture Committee regarding recommendations to compensation / rest periods.</p>	PM

<p><b>AC24.52 Review of Risks emerged in the meeting for referral to Risk Management Group</b> Chair - for information</p> <p><b>AC24.52.1</b> Review of Risks emerged in the meeting for referral to Risk Management Group as follows;</p> <ul style="list-style-type: none"> <li>· Risks in relation to subcontracting, quality and controls.</li> <li>· Concerns raised around the risk to the Health Board around overdue Health &amp; Safety Policy further assurances being sought on effective review of the policy and Internal Audit recommendations.</li> <li>· On Call Duty documents detailing compensatory rest had not been progressed and is now overdue as a recommendation from Internal Audit. It was agreed to raise the risk and issues in relation to staff wellbeing therein the Chairs Report to Board and it was agreed to recirculate the internal audit report.</li> </ul>	NC
<p><b>AC24.53 Agree items for Chairs Assurance Report</b> Chair - for information</p> <p>The items were agreed and noted.</p>	
<p><b>AC24.54 Review of Meeting Effectiveness</b> Members - for information.</p> <p><b>AC24.54.1</b> The Members and attendees discussed the effectiveness of the meeting.</p> <p><b>AC24.54.2</b> It was agreed that the sound quality was adequate. The Members recognised opportunities to undertake deep dives into risks, which arose from the valued discussions. It was agreed that the agenda required review, in order to get the best out of the meeting.</p>	Chair/NC
<p><b>AC24.55 Date of Next Meeting</b> - 7th May 2024</p>	
<p><b>AC24.56 Exclusion of Press and Public</b> Resolution to Exclude the Press and Public –</p> <p><i>"That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest in accordance with Section 1(2) Public Bodies (Admission to Meetings) Act 1960."</i></p>	