



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



		Agenda Item	2.4 (i)
Freedom of Information Status		Open	
Reporting Committee	Audit Committee		
Author	Leah Joseph, Corporate Governance Officer		
Chaired by	Nuria Zolle, Independent Member		
Lead Executive Director (s)	Pam Wenger, Director of Corporate Governance		
Date of last meeting	09 November 2021		
Summary of key matters considered by the committee and any related decisions made.			
Health Board Risk Register (HBRR)			
<p>The HBRR was last presented to the Audit Committee and Health Board in July 2021. Since these meetings, executive directors have reviewed and refreshed risk entries. The latest iteration of the register incorporates updates to mid-October 2021 and was endorsed by Management Board on 20<sup>th</sup> October 2021. In response to recent comments and queries following receipt of the register at Board and committees, executive directors are reviewing some entries and further revisions may be made where appropriate. The HBRR currently contains 39 risks, of which 21 have risk scores at, or above, the Health Board's current appetite of 20/ The COVID-19 risk register is managed within the COVID-19 Gold Command structure. It has not been included in recent reports as its operational risk scores were below the Health Board's current appetite of 20. Access to unscheduled care service risk had increased from 16 in June 2021 to 25 in September 2021. Three register entries were re-assessed by executives and the levels of risk have been decreased. These included access to cancer services, delays in access to Systemic anti-cancer therapy treatment and Delays in Provision of Radical Radiotherapy Treatment. Additionally, risk relating to Trans-catheter Aortic Valve Implementation, which had a score that had reduced to its target risk score of 12, had been closed. The extension of the risk appetite score of 20 for the next quarter, and the low tolerance to risks with a high impact on the quality and safety of staff and patient care, ahead of consideration and approval by the Board was <b>endorsed</b> by committee members.</p>			
Key risks and issues/matters of concern of which the board need to be made aware:			
Finance Update			
<p>A verbal update from the Interim Director of Finance was received. Members were advised that the financial position for period seven stood at an in-month overspend of £1.87m. The financial position for month seven stood at an in-month overspend of £1.87m, which had been expected. £23m has been received for elective care and the current financial plan stands at a forecast deficit of £24.4m, and SBUHB remains on track against this figure. The profile had been maintained throughout the first seven months of the financial year. The formal half-year review with Welsh Government had taken place with no matters of concern. The winter challenges was expected to increase additional monies from Welsh Government. The recovery and sustainability plan is being taken through Performance and Finance Committee.</p>			

## **NWSSP Procurement Single Tender Actions and Quotations**

During the period of 19<sup>th</sup> August 2021 to 14<sup>th</sup> October 2021, there were 11 Single Quotation Actions (SQAs) approved, with a total value of £136,600.51 and nine Single Tender Actions (STAs), with a total value of £809,406.97. There were three retrospective action file notes, with a total value of £ 368,652.13 that were sent to the Head of Procurement for approval. In comparison to the previous reporting period from 29<sup>th</sup> April 2021 to 21<sup>st</sup> June 2021, the figures were almost identical. The volume and values of SQA and STAs approved is comparable to the previous two-month reporting period. Three STA's were not reported in line with agreed timescales during the height of the pandemic response in 2020. One relates to the Swansea Grand Theatre and this would be discussed with colleagues in strategy.

## **Board Assurance Framework (BAF) (Q2)**

The BAF was previously presented to Management Board and Health Board. Following consideration at Board in July 2021, further detail was requested on population health, unscheduled and emergency care and planned care. All updates received up to the 21<sup>st</sup> October 2021 have been incorporated into the revised BAF. An update surrounding infection, prevention and control will be included in the BAF, which will be presented to Board on 25<sup>th</sup> November 2021.

## **Audit Registers and Status of Recommendations**

The committee received a more focused report that provided specific assurance on the actions that were being taken to deal with limited assurance and high priority recommendations. A report surrounding discharging the estates recommendations supported the audit register and status of recommendations.

Matters raised by members:

- *Workforce resource issues;*
- *Six facet survey;*
- *15- year plan surrounding replacing electrical systems;*
- *Accreditation of the contractor assurance accreditation system;*
- *Delays implementing internal audit recommendations for discharge planning;*
- *Zero tolerance approach to implementing recommendations;*

## **Delegated action by the committee:**

None taken.

## **Main sources of information received:**

The following reports were received with no significant issues raised:

- Audit Wales Performance and Progress Report
- Audit Wales 'Taking care of carers' report
- Hosted Agencies Annual Report - Delivery Unit
- Information governance group report
- Internal Audit Progress Report
- Financial control procedure review plan

## **Highlights from sub-groups reporting into this committee:**

None identified.

## **Matters referred to other committee**

- Taking care of carers' to be referred to Workforce and OD Committee

- Child and adolescent mental health services (CAHMS) internal audit 'limited' assurance report to be referred to Quality and Safety Committee.

**Date of next meeting**

18 January 2022