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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



		Agenda Item	2.4 (v)
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)	Hazel Lloyd, Acting Director of Corporate Governance		
Date of last meeting	19 January 2022		
Summary of key matters considered by the committee and any related decisions made.			
None raised.			
Key risks and issues/matters of concern of which the board need to be made aware:			
<p>Finance Update</p> <p>A verbal update from the Director of Finance was received. Members were advised that the financial position for period nine stood at an in-month overspend of £1.885m. Trajectory to £24.4m forecast is £18.304m so the position is slightly within the trajectory. SBUHB is on track for the £24.405 forecast. Income was overspent by £2.2m, and pay was underspent by 8.2m, and non-pay was overspent by 7.0m. The corporate plan was £16.6m over which gives the position. Independent Members would be briefed at Performance and Finance in-committee session which will highlight good allocation of 2.8% sustainability settlement which is positive. There is currently no other funding available for local COVID-19 costs.</p> <p>Board Effectiveness Action Plan</p> <p>The Board effectiveness action plan was received for assurance. The revised action plan is due March 2022.</p> <p>Audit Registers and Status of Recommendations</p> <p>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.</p> <p>Child and adolescent mental health service (CAMHS) commissioning arrangements internal audit report</p> <p>The CAMHS commissioning arrangements final internal audit report issued a limited assurance rating. There was a good level of engagement with strategy, however there is a need for a cohesive plan as there was no lack of a service level agreement or service specification. The Director of Strategy and Head of Strategic Planning attended the meeting and provided insight into the position relating to the actions. The Director of Strategy disagreed with the limited assurance rating and was disappointed with the outcome.</p>			
Delegated action by the committee:			

Claim's Management Policy

Committee members **ratified** the claim's management policy. Committee members raised the following points:

- *Changes to the policy relating to financial reimbursement from Welsh Risk Pool.*

Scheme of delegation

The amendments to the scheme of delegation was **approved**.

Annual Accounts Timetable and Plan

The year-end annual accounts timetable and closure plan was **approved**.

Audit Wales Quality Governance Review

Following an external audit review of SBUHB's quality governance, a report was received for assurance. Morriston Hospital was referenced heavily within the report due to the type of service that was reviewed. Resources to support quality governance were limited, despite good corporate risk arrangements. The report was to be taken through the Quality and Safety Committee and back through March's Audit Committee for executive directors to provide comments.

Main sources of information received:

The following reports were received with no significant issues raised:

- **Audit Wales Performance and Progress Report**
- **Structured Assessment**
- **Audit Wales Annual Audit Report**
- **Audit Wales Radiology Services Update on Progress Report**
- **Quality and Safety framework final internal audit report**
- **Internal Audit Assignment Summary and Progress Report**
- **Hospital Electronic Prescribing and Medicines Administration (HEMPA) IT application final internal audit report**
- **Delivery framework final internal audit briefing paper**
- **Controlled drugs governance internal audit briefing paper**
- **Losses and Special Payments Report**

Highlights from sub-groups reporting into this committee:

None identified.

Matters referred to other committee

- Audit Wales Quality Governance Review referred to Quality and Safety Committee.
- Quality and Safety Framework internal audit report be referred to Quality and Safety Committee
- Controlled drugs governance internal audit briefing paper be referred to the Quality and Safety Committee

Date of next meeting

10 March 2022