



GIG
CYMRU
NHS
WALES

Iechyd Cyhoeddus
Cymru
Public Health
Wales

Name of Meeting
Board

Date of Meeting
25 July 2019

Agenda item
9.4.250719

Composite Committee report for Board

Reporting Committee	Chair	Lead Executive Director	Date of last meeting
People and Organisational Development Committee	Judi Rhys	Phil Bushby, Director of People and Organisational Development	3 July 2019
Audit and Corporate Governance Committee	Dyfed Edwards	Huw George, Deputy Chief Executive and Executive Director of Operations and Finance	29 May 2019

Summary of key matters considered by the Committee and any related decisions made.

People and Organisational Development Committee

- Received a staff experience story from Environmental Health Protection and noted: the heavy personal commitment from team members when covering the on-call rotation due to the small numbers in the team and requested further assurance that action was being taken to address this issue.
- Received a directorate update from Public Health Services with a particular focus on Health Protection.
- Received the Becoming an Organisation of Sanctuary report
- Received assurance that there were no issues of concern in relation to Health & Safety
- Received the Board Assurance Framework and Corporate Risk Register

Audit and Corporate Governance Committee

- Received the following year end reports:
 - Counter-Fraud Annual Report, Self Review Tool; and Workplan for 2019/20
 - Head of Internal Audit Opinion and Annual Report 2018/19
 - Wales Audit Office Opinion (ISA 260)

Key risks and issues/matters of concern of which the board needs to be made aware:

People and Organisational Development Committee

- Received the Training and Development report which provided an overview of the learning and development currently being provided centrally in the organisation. The Committee would receive a future report to include a full analysis and breakdown of what is currently spent on training and development across the organisation; how it is allocated; and how funding will be allocated in the future.
- Received assurance that systems were in place for the revalidation of staff with professional registration.
- Committee received assurance that appropriate arrangements were in place to manage the requirements under the disciplinary policy
- The People and Organisational Development Committee held a workshop on 3 July 2019 to consider the following:
 - The context the Committee operates in
 - Review the current workplan
 - Consider the vision/future direction
 - Identify next steps and actions

The workshop was attended by Committee members; lead Executive Directors; regular attendees to the Committee; and Wales Audit Office. There was positive discussion with key areas for focus and improvement identified:

- Develop criteria to select staff experience stories
- More clarity surrounding rationale for items to be included on workplan
- Ways to find strategic space to consider items such as strategic development of our workforce and the people strategy.
- Consider best practice and learning from the UK and wider.

Delegated action taken by committees:

People and Organisational Development Committee

- Received the register of policies update and noted that of those policies that had passed their review date, fifty per cent were awaiting development of an All Wales policy. The Committee received assurance that further work was underway to review the risk associated with those policies for which we are awaiting an All Wales version.
- Approved the Flexible working policy.

Audit and Corporate Governance Committee

- Approved the Committee annual report and workplan. These documents are included as an appendix to this report.
- Received the following reports and recommended them to the Board for Approval:
 - Annual Financial Statements and Accounts
 - Accountability report including Corporate Governance report; Remuneration and Staff report; and National Assembly for Wales Accountability and Audit report.


Cross-cutting issues and matters delegated to other Committees

- None to note

Confirmed Minutes for the *People and Organisational Development Committee* on 24 April are available on request and can also be found on the website at <http://www2.nphs.wales.nhs.uk:8080/BoardCommitteeDocs.nsf>

The Audit and Corporate Governance Committee Annual Report 2018/19 and agreed workplan for 2019/20 are available as an appendix below.

Date of next meetings	<i>People and Organisational Development Committee</i>	2 September 2019
	<i>Quality, Safety and Improvement Committee</i>	6 August 2019
	<i>Knowledge, Research and Information Committee</i>	24 July 2019
	<i>Audit and Corporate Governance Committee</i>	25 September 2019

 <p data-bbox="443 208 550 342">GIG CYMRU NHS WALES</p> <p data-bbox="584 208 815 342">Iechyd Cyhoeddus Cymru Public Health Wales</p>	<p data-bbox="1158 197 1461 232">Name of Meeting</p> <p data-bbox="1078 241 1461 311">Audit and Corporate Governance Committee</p> <p data-bbox="1182 320 1461 356">Date of Meeting</p> <p data-bbox="1241 360 1461 396">29 May 2019</p> <p data-bbox="1222 405 1461 441">Agenda item:</p>
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<p data-bbox="352 584 1374 680">Audit and Corporate Governance Committee Annual Report 2018/19</p>				
<p data-bbox="268 689 584 725">Committee Chair:</p>	<p data-bbox="643 689 1430 770">Dyfed Edwards, Non Executive Director, Public Health Wales</p>			
<p data-bbox="268 947 544 983">Executive lead:</p>	<p data-bbox="643 947 1406 1028">Huw George, Deputy Chief Executive and Executive Director of Finance and Operations</p>			
<p data-bbox="268 1037 405 1072">Author:</p>	<p data-bbox="643 1037 1422 1072">Reanne Reffell, Corporate Governance Officer</p>			
<p data-bbox="268 1126 596 1207">Approval/Scrutiny route:</p>	<p data-bbox="643 1126 708 1162">N/A</p>			
<p data-bbox="268 1216 421 1252">Purpose</p> <p data-bbox="268 1261 1461 1386">The main purpose of the Audit and Corporate Governance Committee Annual Report is to assure the Board that the system of assurance is fit for purpose and operating effectively. The report summarises the key areas of business activity undertaken by the Committee over 2018/19.</p>				
<p data-bbox="268 1429 596 1464">Recommendation:</p>				
<p data-bbox="284 1485 472 1520">APPROVE</p> <p data-bbox="357 1529 399 1565"><input checked="" type="checkbox"/></p>	<p data-bbox="523 1485 727 1520">CONSIDER</p> <p data-bbox="603 1529 644 1565"><input type="checkbox"/></p>	<p data-bbox="770 1485 1018 1520">RECOMMEND</p> <p data-bbox="874 1529 916 1565"><input type="checkbox"/></p>	<p data-bbox="1082 1485 1214 1520">ADOPT</p> <p data-bbox="1129 1529 1171 1565"><input type="checkbox"/></p>	<p data-bbox="1313 1485 1422 1520">NOTE</p> <p data-bbox="1345 1529 1386 1565"><input type="checkbox"/></p>
<p data-bbox="268 1574 727 1610">The Committee is asked to:</p> <ul data-bbox="309 1664 718 1700" style="list-style-type: none"> <li data-bbox="309 1664 718 1700">• Approve the report. 				

Contents

1	Introduction	6
2	Role and responsibilities	6
2.1	Membership of Committee.....	7
2.2	Others in attendance	8
2.3	Meeting frequency.....	9
3	Main areas of Committee activity 2018/19	9
4	Policies and Other written Control Documents	12
5	Workplan / Action Log	12
6	Assessment of governance and risk issues	13
7	Relationship with other Committees	13
8	Assurance to the Board	14
9	Committee effectiveness.....	14
10	Conclusions and look forward	15

1 Introduction

This report summarises the key areas of business activity undertaken by the Audit and Corporate Governance Committee ('the Committee') over the past year and highlights some of the key issues which the Committee intend to give further consideration to over the next 12 months.

2 Role and responsibilities

The Terms of Reference for the Audit and Corporate Governance Committee were reviewed and agreed by the Board in July 2018.

The purpose of the Audit and Corporate Governance Committee ("the Committee") is to:

- **Advise** and **assure** the Board and the Chief Executive (who is the Accountable Officer) on whether effective arrangements are in place - through the design and operation of the Trust's assurance framework - to support them in their decision taking and in discharging their accountabilities for securing the achievement of the Trust's objectives, in accordance with the standards of good governance determined for the NHS in Wales.
- Where appropriate, **advise** the Board and the Chief Executive on where, and how, its assurance framework may be strengthened and developed further.
- **Approve**, on behalf of the Board policies, procedures and other written control documents in accordance with the Scheme of Delegation.

The core functions of the Committee are as follows:

1. Comment specifically on the adequacy of the Trust's strategic governance and assurance framework and processes for the maintenance of an effective system of good governance, risk management and internal control.
2. Ensure the provision of high quality, safe healthcare for its citizens it will comment specifically on Board's Standing Orders, and Standing Financial Instructions (including associated framework documents, as appropriate). This includes:
 - accounting policies, the accounts, and the annual report of the organisation, including the process for review of the accounts prior to submission for audit, levels of error identified, the ISA 260 Report 'Communication with those charged with Governance' and managements' letter of representation to the external auditors.
 - Schedule of Losses and Special Payments.

- planned activity and results of internal audit, external audit, clinical audit and the Local Counter Fraud Specialist (including strategies, annual work plans and annual reports).
 - adequacy of executive and managements response to issues identified by audit, inspection and other assurance activity
3. Support the Board with regard to its responsibilities for governance (including risk and control) by **reviewing** and **approving** as appropriate:
- all risk and control related disclosure statements, in particular the Annual Governance Statement and the Annual Quality Statement together with any accompanying Head of Internal Audit statement, external audit opinion or other appropriate independent assurances, prior to endorsement by the Board
 - the underlying assurance processes that indicate the degree of the achievement of corporate objectives, the effectiveness of the management of principal risks and the appropriateness of the above disclosure statements.
 - the policies for ensuring compliance with relevant regulatory, legal and code of conduct and accountability requirements.
 - the policies and procedures for all work related to fraud and corruption as set out in National Assembly for Wales Directions and as required by the Counter Fraud and Security Management Service.

The Committee reviews and agrees its programme of work on an annual basis, and recommends it to the Board for approval.

2.1 Membership of Committee

The membership of the Committee during 2018/19 included:

Name	Position	Attendance *
Kate Eden	Committee Chair and Non-Executive Director (member until 06.09.18)	2/2
Dyfed Edwards	Committee Chair and Non-Executive Director (Chair from 06.09.19)	5/5
Stephen Palmer	Non-Executive Director (member from 01.11.18)	2/2
Terence Rose	Non-Executive Director (member until 30.10.18)	3/3
Judi Rhys	Non-Executive Director	5/5

*Some attendees were in position for part of the year, so number denotes total number of meetings they were able to attend in that role.

2.2 Others in attendance

In addition to the above Committee members there are also a number of officers of Public Health Wales detailed within the Terms of Reference as being required to attend the Committee.

The attendance during 2018/19, by these officers, is detailed below:

Name	Position	Attendance *
Huw George	Deputy Chief Executive / Executive Director of Operations and Finance	5/5
Rhiannon Beaumont-Wood	Executive Director of Quality, Nursing and Allied Health Professionals (from 04.02.19)	0/1
Sian Bolton	Acting Executive Director of Quality, Nursing and Allied Health Professionals (until 03.02.19)	4/4
Helen Bushell	Board Secretary and Head of Board Business Unit (from 11.03.19)	1/1
Angela Fisher	Deputy Director and Head of Finance	3/3
Cathie Steele	Acting Board Secretary and Head of Corporate Governance (member until 30.01.19)	2/2
Melanie Westlake	Board Secretary and Head of Corporate Governance (until 11.07.18)	2/2

*Some attendees were in position for part of the year, so number denotes total number of meetings they were able to attend in that role.

Two representatives from the Local Partnership Forum had a permanent invite to attend the Committee. Stephanie Wilkins (1/5) and Claire Lewis (1/5) attended the Committee meetings.

Representatives of the Wales Audit Office, and the Internal Audit Service also attended each meeting.

Representatives of the Cardiff and Vale University Health Board Counter Fraud Service attended 3/5 Committee meetings to present their report.

Other directors attended during the year to present reports which related to their areas of responsibility.

The Chief Executive, Tracey Cooper, was also invited to attend every meeting, and attends at least annually, to discuss with the

Committee the process for assurance that supports the Annual Governance Statement and the Annual Quality Statement.

2.3 Meeting frequency

During 2018/19, the Committee met five times and was quorate on all occasions.

The terms of reference for the Committee require meetings to be held no less than quarterly and otherwise, as the Chair of the Committee deems necessary, consistent with the Trust's annual plan of Board and Committee Business.

An additional meeting is also held on an annual basis to receive and recommend for Board approval the Accountability Report and Annual Financial Statements and Accounts.

3 Main areas of Committee activity 2018/19

In line with the terms of reference, there were a number of standing items on each Committee agenda. The following were presented at each meeting:

- Internal Audit Progress Report
- Internal Audit Action Log
- External Audit Progress Report
- External Audit Action Log
- Losses and Special Payments Report
- Procurement Report
- Counter Fraud Progress Report
- Board Assurance Framework
- Corporate Risk Register

The Committee also received the following annual reports:

- Wales Audit Office Annual Audit Report 2018
- Wales Audit Office Structured Assessment 2018
- Counter Fraud Annual Report 2017/18
- Health Emergency Planning Annual Report 2018
- NHS Wales Health Collaborative Annual Assurance Statement 2017/18
- NHS Wales Health Collaborative Annual Assurance Statement 2018/19
- Finance Delivery Unit: Annual Assurance Statement 2018





The Committee received the Accountability Report and the Annual Financial Statements and Accounts for 2017/18 in draft on 2 May 2018, and recommended the final draft for Board approval on 30 May 2018. The final submission was approved by the Board at an extraordinary meeting on 30 May 2018.

The Committee wishes to assure the Board that it fulfilled its work plan for 2018/19 covering a wide range of activity including:

3.1 Internal Audit

NHS Wales Shared Services Partnership carries out a number of functions on behalf of Public Health Wales. The Audit and Corporate Governance Committee receives reports from the internal audit function which provide it with assurance that these functions are efficient and cost effective. The Committee received the Internal Audit Charter and Annual internal Audit Plan 2018-19 at its meeting on 13 March 2018.

During the year, the Committee received and discussed a number of reports produced by Internal Audit:

Report	Level of assurance provided			
	No assurance 	Limited assurance 	Reasonable assurance 	Substantial assurance 
Annual Quality Statement				✓
Environmental Sustainability reporting				✓
Cyber Security (Follow up)			✓	
General Data Protection Regulation (GDPR)			✓	
Raising Concerns (Follow Up)			✓	
Welsh Risk Pool claims				✓
Clinical Networks Governance (Follow Up)			✓	
Clinical Governance			✓	
Directorate Review			✓	
Risk Management			✓	
Absence Management			✓	

Long Term Strategy- Stakeholder Engagement				✓
Core financial systems			✓	

Internal audit work is ongoing in areas related to Performance management, monitoring and reporting; Health and Care Standards; and Quality and Impact Framework.

In 2017/18 three limited assurance reports were received for Raising Concerns (Whistleblowing), Cyber Security and Clinical Networks Governance. The Committee tracked the progress against the agreed management action plans during 2018/19. Follow up internal audits of the respective areas during 2018/19 subsequently resulted in reasonable assurance ratings. The Committee will continue to monitor outstanding actions relating to these audits during 2019/20.

3.2 External Audit

Wales Audit Office (WAO) provided the Committee with regular progress reports on external audits and monitored progress against recommendations.

The Committee continued to monitor progress against recommendations to the WAO report for the NHS Consultant Contract follow up, and WAO review of Collaborative Arrangements for Managing Local Public Health Resources received in 2017/18. Whilst the management actions were closed in 2018/19, oversight of organisational wide staff related issues were remitted to the People and Organisational Development Committee for continued review.

The Committee received assurance that the recommendations from the annual Wales Audit Office Assessment of Microbiology Services were incorporated into ongoing monitoring and governance arrangements, through planned stabilisation and transformation programmes.

3.3 Counter Fraud

The Committee received the Counter Fraud Authority Qualitative Assessment 2017/18 report, and considered the results of the organisations fraud awareness survey results 2018. The Committee received assurance that gaps in staff awareness would be raised via the organisation's induction and refresher process. The Committee approved the Counter Fraud and Corruption policy and procedure.

3.4 Topical, Legal and Regulatory Issues

The Committee also considered the 'Supplementary Memorandum of the Auditor General for Wales to the Public Accounts Committee regarding timber sales contracted awarded by Natural Resource Wales'. Salient learning points for the Trust were subsequently fed back to the Board via the Chair's composite report.

The Committee also received assurance that the Trust had undertaken the necessary preparedness work to mitigate potential business continuity and/or emergency planning incidents that could occur as a result of the United Kingdom leaving the European Union.

4 Policies and Other written Control Documents

The Committee approved the Recovery of Salary Overpayment and Underpayments policy and procedure; the Disposal of Obsolete and surplus equipment and consumables procedure; and the adoption of the All Wales policy on Insurance, NHS Indemnity and related risk management for potential losses and special payments policy.

The Committee also received bi-annual reports on the status of policies and other written control documents within the remit of the Committee.

5 Workplan / Action Log

The Committee Work Plan ensures that the Committee discharges its responsibilities. It assists with agenda planning and is updated during the year to ensure that the Committee considers any additional items which may arise during the year.

In order to monitor progress and any necessary follow up action, the Committee has an Action Log that captures all agreed actions. This provides an essential element of assurance to the Committee and from the Committee to the Board.

During the year, the Committee began reporting to the Board through a composite Chair's report, providing an overview of items considered by the Committee and highlighting any cross-committee issues / themes or items needing to be brought to the Board's attention.

The Composite Chair's report and confirmed minutes are published with the Board papers.

6 Assessment of governance and risk issues

The Committee provides an essential element of the overall governance framework for the organisation and has operated within its Terms of Reference and in accordance with the Standing Orders.

The Audit and Corporate Governance Committee discussed the risk management and assurance arrangements in place for the organisation.

6.1 Board Assurance Framework

The Committee received the Board Assurance Framework (BAF) at each meeting and has oversight of those elements of the BAF which apply to its particular risks. It also receives the BAF in its entirety in order to seek assurances that the risks are being effectively managed and that the controls which are in place are adequate and fit for purpose. The Committee's role is to challenge the executive on the management of the risks, in particular to test the efficacy of the controls and to make recommendations to strengthen the control environment where necessary.

6.2 Corporate Risk Register

The Audit and Corporate Governance Committee receive the Corporate Risk Register to enable them to gain assurance that operational risks were being appropriately managed.

7 Relationship with other Committees

The Audit and Corporate Governance Committee has continued to work closely with the People and Organisational Development Committee and the Quality, Safety and Improvement Committee during the year.

Any service-user quality, safety and improvement specific risks were directed to the Quality, Safety and Improvement Committee and the link for this was the Director of Quality, Nursing and Allied Health Professionals.

The Audit and Corporate Governance Committee requested that the Board Secretary liaise with the recently established Knowledge, Research and Information Committee in relation to assurance arrangements around quality of data produced by the organisation.

Areas that are remitted across Committee's are noted in the Chair's composite report which is presented at Board.

The Audit and Corporate Governance Committee also received the Quality and Clinical Audit Plan 2018/19, approved by the Quality,

Safety and Improvement Committee. Work to strengthen the Audit and Corporate Governance Committees function with regard to clinical audit will continue in 2019/20.

8 Assurance to the Board

The Committee wishes to assure the Board that on the basis of the work completed by the Committee during 2018/18, there were effective measures in place and that there were no outstanding issues to be brought to the attention of the Board.

The Committee had, on occasion, requested further information on particular items to allow further scrutiny of the issues and to enable them to provide robust assurance to the Board and Accountable Officer.

During 2018-19, the Committee received further assurance on:

- Wales Audit Office Consultant Contract Follow-up – updates were provided through the External Audit Action Log. The Committee approved the action plan for delivery of the Jo Planning Framework for the Trust, and remitted oversight of the framework and consultant engagement to the People and Organisational Development Committee.
- Wales Audit Office Review of Collaborative Arrangements for Managing Local Public Health Resources – following assurance that considerable progress had been made in response to the recommendations outlined in the review, the Committee received the closure report in September 2018. The Committee recommended that oversight of people related actions be remitted to the People and Organisational Development Committee for follow up.

9 Committee effectiveness

In February 2019, the Committee undertook the self-assessment for 2018/19. An online questionnaire, based on guidance in the *NHS Wales Audit Committee Handbook*, was developed and circulated to committee members and attendees. Respondents included representative responses from Wales Audit Office and NHS (Internal) Audit and Assurance Services.

- The Audit and Corporate Governance Committee held a workshop on 16 May 2019 to consider the following:
 - The context the Committee operates in
 - The results of the self-assessment survey
 - Review of the current work plan
 - The vision/future direction
 - Identify next steps and actions

The workshop was attended by Committee members; lead Executive Directors; Internal Audit; Wales Audit Office.

There was positive discussion with key areas for focus and improvement identified:

- Ways to maximise the timings on the agenda for meetings to ensure there is appropriate time and space for discussion, scrutiny and challenge
- Using the Board Assurance Framework to drive the agenda
- Operational embedding of priorities
- Focus on developing learning and improvement culture within the organisation for those members of staff who are requested to attend meetings.

10 Conclusions and look forward

The Committee is committed to continuing to develop its function and effectiveness and intends seeking further assurance in 2019/20 in respect of the:

- Review of the Terms of Reference and Membership of the Committee, as part of a wider committee structure review in quarter 1 of 2019/20;
- Taking forward the action plans developed as a result of the 2018/19 self-assessment and workshop.
- Completion of the 2019/20 self-assessment for the Committee.
- Providing assurance around the new strategic risks.
- Review of the Committee's role regarding the Board Assurance Framework and Corporate Risk Register.

Audit and Corporate Governance Committee Work Plan 2019/20 v1		Quarter 1		Quarter 2	Quarter 3	Quarter 4	
Annual Financial and Governance Statements	Exec Lead	01-May	29-May	25-Sep	16-Jan	19-Mar	Committee Notes
Accountability Report 2018-19	DCE&EDOF	Draft	Final				
Annual Financial Statements and Accounts 2018-19	DCE&EDOF	Draft	Final				
Annual Accounts and Accountability Report Timetable 2020-21	DCE&EDOF					x	
External Audit	Exec Lead	01-May	29-May	25-Sep	16-Jan	19-Mar	Committee Notes
Annual Audit Report	DCE&EDOF					x	
Annual Opinion (ISA 260)	DCE&EDOF		x				
External Audit Action Log	DCE&EDOF	x		x	x	x	
Fee Scheme 2019	DCE&EDOF					x	
Financial Statements Memorandum	DCE&EDOF			x			
Review of WAO Assessment of Microbiology annual update (against recommendations to show continued improvement and delivery against recommendations).	DCE&EDOF			x			Agreed at ACGC 12.09.17 (ACGC66/2017).
Structured Assessment	DCE&EDOF				x		
Wales Audit Office Audit Reports (received in accordance with Annual Work Plan)	DCE&EDOF	x	x	x	x	x	
Wales Audit Office Progress Report	DCE&EDOF	x		x	x	x	
Work Plan 2020-21	DCE&EDOF					x	

Audit and Corporate Governance Committee Work Plan 2019/20 v1		Quarter 1		Quarter 2	Quarter 3	Quarter 4	
Internal Audit	Exec Lead	01-May	29-May	25-Sep	16-Jan	19-Mar	Committee Notes
Head of Internal Audit Opinion and Annual Report 2018-19	BS&HCG		x				
Internal Audit Position Statement (Progress Report)	BS&HCG	x		x	x	x	
Internal Audit Action Log	BS&HCG	x		x	x	x	
Internal Audit Charter	BS&HCG					x	
Internal Audit Reports (received in accordance with Annual Work Plan)	BS&HCG	x	x	x	x	x	
Internal Audit Work Plan	BS&HCG					2020-21	
Counter Fraud	Exec Lead	01-May	29-May	25-Sep	16-Jan	19-Mar	Committee Notes
Counter Fraud Annual Report 2018-19	DCE&EDOF		x				
Counter Fraud Progress Report	DCE&EDOF	x		x	x	x	
Counter Fraud Self Review Tool 2019-20	DCE&EDOF		x				
Counter Fraud Work Plan	DCE&EDOF		2019-20			2020-21	
Risk Management	Exec Lead	01-May	29-May	25-Sep	16-Jan	19-Mar	Committee Notes
Board Assurance Framework Update	DQN&AHP	x		x	x	x	
Corporate Risk Register Update	DQN&AHP	x		x	x	x	

Audit and Corporate Governance Committee Work Plan 2019/20 v1		Quarter 1		Quarter 2	Quarter 3	Quarter 4	
Governance and Accountability	Exec Lead	01-May	29-May	25-Sep	16-Jan	19-Mar	Committee Notes
Declarations of Interest, Gifts and Hospitality Register Report: assurance on compliance against policy and procedure	BS&HCG	2018-2019 overview				2019-20 overview	14.2.18 Remitted from Board (Action 30.11.17/PHW98/2017)
Losses and Special Payments Report	DCE&EDOF	x		x	x	x	Standing item
Procurement Report	DCE&EDOF	x		x	x	x	Standing item
Quality and Clinical Audit Plan 2018-19	DQN&AHP			x		x	06.09.18 ACGC Action- to receive an update in 6 months time, or at such time that the report is ready.
Standing Orders	BS&HCG				x		Section 11.0.2 of the Standing Orders require the Audit Committee (or equivalent) to undertake an annual review and report any amendments to the Board for consideration and approval
Scheme of Delegation: approval of any updates to scheme	BS&HCG	As required		As required	As required	As required	20.2.18 Remitted from Board (Action 25.01.18/PHW11/2018)
Topical, Legal and Regulatory Issues	BS&HCG	x	x	x	x	x	Standing item
Policy	Exec Lead	01-May	29-May	25-Sep	16-Jan	19-Mar	Committee Notes
Bi-annual summary of policies relating to Audit and Corporate Governance Committee	BS&HCG	x			x		
Policies for approval depending on programme of review	BS&HCG	x	x	x	x	x	

Audit and Corporate Governance Committee Work Plan 2019/20 v1		Quarter 1		Quarter 2	Quarter 3	Quarter 4	
Joint Working Arrangements	Exec Lead	01-May	29-May	25-Sep	16-Jan	19-Mar	Committee Notes
Assurance Report - CymruWellWales to include ACE Hub	DHW			x			14.2.18 - Remitted from Board (Action 30.11.17/PHW95/2017)
Assurance Report - Police Transformation Fund	DPR&ID			x			14.2.18 - Remitted from Board (Action 30.11.17/PHW95/2017)
Assurance Report- Partnership working				x			ACGC Action 63.4/2018
Joint Working Framework: report on the arrangements of existing joint working agreements	BS&HCG			x			20.2.18 Remitted from Board (Action 25.01.18/PHW10/2018
NHS Wales Health Collaborative: Annual Assurance Statement	DCE&EDOF					x	As required by Hosting Agreement Memorandum of Understanding
Finance Delivery Unit Annual Assurance Statement						x	
Committee Governance	Exec Lead	01-May	29-May	25-Sep	16-Jan	19-Mar	Committee Notes
Counter Fraud meeting with Committee Members (to be held in private and with no Trust Officers present)	BS&HCG	x	x	x	x	x	The Auditors can request a meeting at any time
Head of Internal Audits meeting with Committee Members (to be held in private and with no Trust Officers present)	BS&HCG	x	x	x	x	x	The Auditors can request a meeting at any time
Wales Audit Office meeting with Committee Members (to be held in private and with no Trust Officers present)	BS&HCG	x	x	x	x	x	The Auditors can request a meeting at any time
Audit and Corporate Governance Committee Annual Report	BS&HCG		x				
Annual Review of Committee Effectiveness (Action Plan)	BS&HCG					x	
Mid year review of Committee Effectiveness	BS&HCG			x			

Legend

Board Secretary and Head of Corporate Governance
Deputy Chief Executive and Executive Director of Operations and Finance
Executive Director of Quality, Nursing and Allied Health Professionals
Executive Director of Health and Wellbeing
Director of Policy, Research and International Development

BS&HCG
DCE&EDOF
DQN&AHP
DHW
DPR&ID