Composite Committee report for Board

<table>
<thead>
<tr>
<th>Reporting Committee</th>
<th>Chair</th>
<th>Lead Executive Director</th>
<th>Date of last meeting</th>
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<tbody>
<tr>
<td>Audit and Corporate Governance Committee</td>
<td>Dyfed Edwards</td>
<td>Huw George, Deputy CEO and Executive Director Operations and Finance</td>
<td>15 January 2020</td>
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<tr>
<td>Knowledge, Research and Information Committee</td>
<td>Shantini Paranjothy</td>
<td>Sian Bolton, Transition Director, Knowledge Directorate</td>
<td>6 February 2020</td>
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<tr>
<td>Quality, Safety and Improvement Committee</td>
<td>Kate Eden</td>
<td>Rhiannon Beaumont-Wood, Executive Director QNAHP</td>
<td>11 February 2020</td>
</tr>
<tr>
<td>People and Organisational Development Committee</td>
<td>Judi Rhys</td>
<td>Phil Bushby, Director of People and Organisational Development</td>
<td>27 February 2020</td>
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Summary of key matters considered by the Committee and any related decisions made.

All Committees:

Board Assurance Framework:
All of the Committee received the updated Board Assurance Framework and noted the following developments:

- The development made to the BAF, which was approved by the Board in January;
- That assurance mapping was being developed for each of the Risk (currently in place for Risk 2);
- That the oversight of the action plans now sat at Committee level;
- Audit and Corporate Governance Committee’s role included oversight of the BAF process in the context of the overall risk framework;
- the new Risk 8 that was approved by the Board for development; and
- The change to the assuring group for Risk 4 from the Knowledge, Research and Information Committee to the Audit and Corporate Governance Committee remit, due to the business continuity subject matter.
Summary of key matters considered by the Committee and any related decisions made.

Corporate Risk Register
All Committees considered the Corporate Risk Register for oversight of those risks within their remit.

People and Organisational Development Committee
The Committee considered the following key matters:
- A staff experience story from Stepheni Kay, who works within the Health Foundation Projects, gave the Committee insight into her initial experience of joining the organisation. This included the integration of new starters into the multifunctional workspace. The Committee noted two key areas for improvements: improving the culture for welcoming new starters consistently, and that further work was needed to promote PHW as an employer in a wider range of communities.
- The draft of the People and Organisational Development Directorate Priorities, considering the nine pivotal themes from the People Strategy.
- Received assurance on the management of policies, procedures and other written control documents within its remit.
- Received an update on Employee engagement, noting the new approach being taken this year with a rolling programme of more frequent engagement with staff. The Committee received assurance that proactive plans and activities were in place and progressing in response to the 2018 staff survey.
- Considered a report outlining the training and development funding blueprint for structuring investment.
- Took assurance from the update provided on the WAO: Collaborative Arrangements for Managing Local Public Health Resources, that the organisation has progressed with the areas for action to improve the capability and capacity of the public health workforce.
- Took assurance from the Health and Safety report that appropriate measures were in place to monitor compliance and to address areas identified for improvement.
- Took assurance on the progress being made in respect of the Welsh Language standards, noting the continued focus to find solutions for those which had proved difficult to achieve within the timescales set.
- The Chair of the Committee signed the Dying to Work Charter on behalf of the organisation.

Audit and Corporate Governance Committee:
The Committee considered the following key matters:
- Received Welsh Pool and management of contracts internal audit reports;
- Monitored the internal audit action log and ensured that actions were being completed within the timescales;
- Discussed the Internal Audit Work Plan for 2020/21 with the Head of internal Audit and had the opportunity to contribute to the plan as it was being developed;
- Received an update report from Counter Fraud;
Summary of key matters considered by the Committee and any related decisions made.

- Received **assurance** from the report that the procurement activity was undertaken in line with the requirements of the Standing Financial Instructions (SFIs) and also that the report is presented to the Procurement Champions for follow up action and future procurement plans.
- Receive **assurance** that all losses and special payments have been made in accordance with the requirements of the Standing Financial Instructions.
- Received **assurance** on the management of policies, procedures and other written control documents within its remit.
- Received **assurance** that they receive regular updates to keep them informed of the financial position relating to the Annual report and accounts timetable.

Quality, Safety and Improvement Committee

The Committee considered the following key matters:

- **Took assurance** from the Cervical Screening Wales Deep Dive that the Cervical Screening Wales Programme was being delivered safely and effectively. The focus of the discussion was on:
  - Methods to engage and encourage greater uptake;
  - How data presentation can be improved and progress evaluated against previous data / years.
- **Took assurance** on the monitoring and scrutiny arrangements in place for the action plan on the Quality Governance Arrangements.
- **Took assurance** on the work underway to ensure a robust system is in place for the management of alerts was reliable and effective.
- **Received** a presentation on the development of direction of the Quality and Improvement Strategy for the organisation.
- **Received** a report outlining the summary of experience framework for Assuring Service User Experience. The Committee discussed the current position and the need to develop further so that service user experience is embedded into the work that we do as a matter of routine. The Committee took assurance that the organisation is fulfilling its statutory/reporting duties around Service User Experience, but noted that further work was needed to progress this to meet the organisation’s ambition to fully integrate and embed service user experience.
Summary of key matters considered by the Committee and any related decisions made.

Knowledge, Research and Information Committee

The Committee considered the following key matters:

- **Received** a report outlining the detailed research activity according to each strategic priority, noting the breadth of research activity undertaken throughout the organisation, the income generated, and steps taken to encourage colleagues at all levels of the organisation to contribute to research projects.

- **Took assurance** that the WHO Collaborating Centre was established and progressing according to plan, in line with the organisational strategic priorities and objectives, as well as national legislative and strategic context. The focus of the Committee’s consideration was on:
  - The initiatives to transition problems into action, alongside sustainable solutions to reduce health inequalities;
  - Capturing the value of the organisations interventions, and the drive for Wales to be recognised as an influencer organisation;
  - the cross directorate work to strengthening Nurse Leadership, and Public Health Promotion; and
  - The measurement of the Collaborating Centres impact on Public Health Wales as an organisation, and how it delivered a difference to the population of Wales.

- **Considered** a Deep Dive into Information Governance, taking assurance that the Information Governance Management System is operating effectively. The Committee focused on the following issues:
  - Ways to encourage colleagues to consider information governance at the start of projects to prevent potential delays;
  - Ongoing concern regarding the alignment of All Wales Once for Wales concerns management system, data quality management and Datix;
  - The data standards used to protect the organisation from risk; and
  - That an internal audit into Cyber Security received a substantial assurance rating.

- **Received** the Evaluation and Impact Programme 2018/19 Deliverables report, which showcased complex pieces of work. The Committee considered that sign off process for peer reviews was part of the internal quality process within the Research and Evaluation team.

- **Noted** an update from the Official Statistics Groups, which outlined Official Statistics and data quality management work.

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

**People and Organisational Development**

The Committee considered the following matters to specifically draw the Board’s attention to:

- **Strategic Equalities Objectives and Implementation plan**
Key risks and issues/matters of concern of which the board needs to be made aware:

The Committee commended the team for the positive work in this area and for the quality of the content of the plan. The Committee agreed that this was an ambitious plan that would require additional resources to bring the plan into being. The Committee agreed to raise the issue of resourcing the Board when it considers this report.

The Committee **recommended** to the Board that it approve the Strategic Equalities Plan and Objectives 2020-2024.

Quality, Safety and Improvement Committee

The Committee considered the following matter to specifically draw the Board’s attention to:

**Service User Experience** – having discussed this subject at successive Committee meetings, the Committee felt that it was timely to highlight to the Board the current gap in how we routinely collect data service user experience as a result of our activity, and the need to allocate appropriate resources to fulfil this ambition. The Committee wished to highlight this important area and suggest that the Board consider approving the development of a timetable for a strategy / policy, with an outline of the resources to deliver.

Delegated action taken by committees:

**People and Organisational Development**

The Committee **approved**:
- the Annual Equality Report 2018-19, noting it would be circulated to the Board in March for information;
- The Gender Pay Gap report, commenting that the organisation should map out its ambition and the steps required to achieve this to enable the Board to decide the way forward.

**Quality, Safety and Improvement Committee**

The Committee considered the new draft Quality Management and Assurance Dashboard and **approved** the format and the direction of travel for the development of this and the assurance levels it will provide to the Committee. This incorporated the Putting Things Right data for Quarter 3.

**Audit and Corporate Governance Committee**

The Committee **approved** the writing-off of bad debts and claims abandoned.
Delegated action taken by committees:

Knowledge, Research and information Committee

- The Committee **approved** the Vision for Knowledge Mobilisation 2020-25 subject to the revision of the EHIA and the issues raised by the Committee in considering the impact and evaluation of the vision.

   In considering the vision, the Committee noted the following:
   - The Lessons learnt and workshops to develop a cross-directorate, organisation wide approach to the vision. RBW suggested that the team liaise with the Quality Directorate around driving Quality and Improvement
   - The teams focus on ensuring the vision aligned with existing initiatives and strategies, to ensure the organisation as a whole was moving in the same direction.
   - Suggestions around maximising the evidence base before pilots commence, and the measurement of outcomes, impact, and value.
   - The lack of external engagement at the development stage, noting plans for external engagement in the coming year.

- The Committee resolved to **approve** the Research Misconduct Policy and Procedure

*Unconfirmed Minutes for QSIC, KRIC and POD are available on request.*

*Previously confirmed minutes can be found on the website at https://phw.nhs.wales/about-us/board-and-executive-team/board-committees/*

None

**Date of next meetings**

Due to the ongoing response to the Coronavirus, the decision has been made to cancel non-essential meetings. The following Committee meetings have been cancelled:

- People and organisational Development Committee – 14 April 2020
- Knowledge, Research and Information Committee – 10 June 2020

Appropriate arrangements are being put in place to ensure that all statutory requirements within these Committees (such as Health and Safety, Information Governance) are being fulfilled. The detail of these arrangements is being presented to the Board in March for consideration.

Audit and Corporate Governance Committee; Quality, Safety and Improvement Committee and Remuneration and Terms of Service Committee will continue to operate within their scheduled meeting. However the agenda will be reduced to cover statutory requirement to ensure appropriate governance arrangements are in place to provide appropriate assurance to the Board, whilst balancing the need to reduce pressure on staff during this time. These meetings will take place via electronic means, such as Skype.
### Delegated action taken by committees:

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<tr>
<th>Committee</th>
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<tr>
<td>Audit and Corporate Governance Committee</td>
<td>19 March 2020</td>
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<tr>
<td>Quality, Safety and Improvement Committee</td>
<td>19 May 2020</td>
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<tr>
<td>People and Organisational Development Committee</td>
<td>14 July 2020</td>
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<tr>
<td>Knowledge, Research and Information Committee</td>
<td>1 September 2020</td>
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