Composite Committee report for Board

<table>
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<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 Chief Executive and Executive Director of Operations and Finance</td>
<td>25 September 2019</td>
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<tr>
<td>People and Organisational Development</td>
<td>Judi Rhys</td>
<td>Phil Bushby, Director of People and Organisational Development</td>
<td>2 October 2019</td>
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<td>Committee</td>
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<tr>
<td>Knowledge, Research and Information</td>
<td>Shantini Paranjothy</td>
<td>Sian Bolton, Transition Director, Knowledge Directorate</td>
<td>9 October 2019</td>
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<tr>
<td>Committee</td>
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<tr>
<td>Quality, Safety and Improvement Committee</td>
<td>Kate Eden</td>
<td>Rhiannon Beaumont-Wood</td>
<td>12 November 2019</td>
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Summary of key matters considered by the Committee and any related decisions made.

Audit and Corporate Governance Committee
- Received the action plan from the Committee effectiveness workshops.
- Received the Financial Statements Memorandum from the Wales Audit Office that concluded that Public Health Wales had an effective closedown process which enabled the Auditor General to issue an unqualified opinion on the Financial Statements on 11 June 2019.
- Received the following Internal Audit Reports and noted the associated assurance rating received and recommendations:
  - Health Care Standards (Substantial Assurance);
  - Annual Quality Statement (Substantial Assurance);
  - Environmental Sustainability (Substantial Assurance);
  - Quality Impact Framework (Reasonable Assurance);
  - Declarations of Interest (Reasonable Assurance);
  - Freedom of information (Substantial Assurance);
  - Performance Management (Substantial Assurance).
Summary of key matters considered by the Committee and any related decisions made.

- Considered the Financial Performance Report for the period ending August 2019 and noted the ongoing challenge to ensure that the efficiencies across the organisation were being achieved and asked for further assurance on levels of confidence on achievement on savings.
- Received the Board Assurance Framework and Corporate Risk Register.
- Received assurance on the progress being made to ensure that all memoranda and agreements are being developed in line with the Joint Working Framework.

People and Organisational Development Committee

- Received the action plan from the Committee Effectiveness Workshops.
- Received assurance from the People and Organisational Development Directorate update and the Operations and Finance staff experience story.
- Received the Operations and Finance Directorate dashboard and took assurance from the Directorates’ performance at September 2019.
- Received assurance on the implementation of the Quality and Career Framework for Health Care Support Workers, noting the challenges around the funding and the business case being developed.
- Received the Board Assurance Framework and Corporate Risk Register.
- Received assurance on the implementation of the Welsh Language Standards noting challenges in meeting the required standards, particularly within the screening division in respect of answering phones, recruiting to certain roles and recording language preference.
- Received a verbal update on the Health and Wellbeing and Corporate Health Standard and congratulated the organisation on the achievement of the Gold standard.
- Received assurance that actions were being taken to ensure that the Wales Audit Office recommendations to improve medical job planning arrangements were being taken forward. The Committee agreed to receive the updated management plan in a future meeting for further oversight and assurance.

Knowledge, Research and Information Committee

- Received the action plan from the Committee Effectiveness Workshops.
- Noted the revised terms of reference had been approved by the Board.
- Received a presentation from the Clinical Research Awards, and considered the positive, practical outcomes for public health and patients following this research.
- Received a presentation and paper regarding Data Quality Management. The Committee advised that a two year timeline to implement any new process was excessive, given the organisation’s dependence on accurate data. A baseline audit would be undertaken and a more detailed timeline with clear resource requirements would be submitted to the Business Executive Team, before consideration at the next Committee meeting.
- Received a verbal update on the Knowledge Mobilisation Strategy - Mid Term Review, and agreed to receive a formal update at the next
Summary of key matters considered by the Committee and any related decisions made.

Committee meeting with the new draft Knowledge and Mobilisation Strategy.
- Received assurance that the compliance with the process for applying for research permissions within Public Health Wales were well documented and generally followed the agreed process.
- Received assurance that the Information Governance Management System was working effectively.
- Received the Research and Evaluation Annual Highlights Report 2018-19. The Committee considered the report which is to raise awareness of the Organisations activities, noting the range of examples across all strategic priorities. The Committee suggested that the author could consider profiling some of the work undertaken by honorary contract holders.
- Received assurance on the evaluation and impact activities across Public Health Wales.

Quality, Safety and Improvement Committee
- Received the action plan from the Committee Effectiveness Workshops.
- Took assurance from the Health Protection Deep Dive that the Acute Health Protection response service (including Environmental Public Health) was being delivered safely, effectively and to expected quality standards.
- Agreed to consider a Vaccine Preventable Disease Programme and emergency planning deep dive at an appropriate meeting, and to consider a visit to the fourth floor for a demonstration of TARIAN.
- Considered work underway to deliver improvements on the Quality and Impact Framework, and requested an illustrative model showing the complexity of the relationships between the organisation’s work streams on outcomes, transformation and quality at the next Board Development Session in December.
- Took assurance that the organisation has undertaken work to ensure compliance with the Medical Device Regulations introduced in May 2017.
- Considered the backlog of incidents in Diabetic Eye Screening Wales (DESW), and requested a report on the backlog of incidents, including the activities to avoid repeat occurrences, and a narrative around the audit of the new incident management policy/procedure.
- Received assurance that work is underway to ensure the alerts management system is reliable and effective.
- Received the Infection Prevention and Control Annual report for 2018/19.
- Received the Healthcare Inspectorate Wales Annual Report for 2018/19.

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

Audit and Corporate Governance Committee
- Received the Counter Fraud Progress Report and noted the progress being made relating to Counter Fraud training; an update on the National fraud
Key risks and issues/matters of concern of which the board needs to be made aware:

- initiative; and that there was one referral for the period ending 31 August 2019, which had been concluded.
- Noted that that the Board would receive a substantial update on the Impact of leaving the European Union at its Board meeting the following day and therefore no update was provided to the Committee to avoid duplication.
- Received assurance that procurement activity was undertaken in line with the requirements of the Standing Financial Instructions and noted the downward trajectory of the use of single tenders
- Received assurance that all losses and special payments had been made in accordance with the requirements of the Standing Financial Instructions

People and Organisational Development Committee

- Received an update on the People Strategy and workforce and commented on:
  - The need to reflect that it was not one size fits all in terms of the use of technology.
  - Implications for staff in the use of fixed term contracts over permanent positions.
  - Engagement required with the Local Partnership Forum;
  - Further emphasis on how PHW would work differently to address the difficulty appointing to specialist/senior posts and to certain geographical areas; the promotion of the Welsh language and bilingual services; how we link in with education partners;
  - Development of a cultural narrative that could be applied consistently across the organisation.
- Received assurance that appropriate measures were in place to monitor compliance and to address areas identified for improvement within the Health and Safety Report including the Health and Safety Risk Register

Knowledge, Research and Information Committee

The Committee received a presentation and paper regarding Academic Relations, and considered:

- The reduced investment to Higher Education Institutes over the past four years, and the work that had been done to improve the value of investments, noting that whilst funding had been reduced, relationships and quality of research posts had been strengthened.
- The organisational wide approach being taken to build and embed staff research capability into the heart of the new People Strategy.
- That further work would be undertaken to recommend a revised model of honorary contracts to the Business Executive Team and Committee.
- That the organisation’s Declarations of Interest policy and form would be reviewed to ensure that declaring of honorary contracts was a clear requirement.

The Committee reflected that a number of issues for further development would be considered outside of the meeting, and that the organisation was likely to be recommended a revised model over the next six months. The Committee
Key risks and issues/matters of concern of which the board needs to be made aware:

therefore agreed that assurance would not be taken at this time, but would be reconsidered upon at a Committee meeting at an appropriate time in the future.

Quality, Safety and Improvement Committee

- Approved the Quality and Clinical Audit Plan for 2019/20, requesting that future re-iterations include a brief to the Board on how the organisation approached audit, public expectations and the totality of audit activity (to include internal and external forms). The Audit plan had been rejected at the previous meeting.
- Did not take assurance on the effectiveness of the management of complaints outlined in the Audit of Lessons Learnt from Complaints report, but did take assurance that work was in progress and that an action plan was in place to improve the management of the complaints process.

Delegated action taken by committees:

Audit and Corporate Governance Committee

- Approved the Reporting damage or loss to personal property Policy.

People and Organisational Development Committee

- Adopted the Local Partnership Forum Terms of Reference (noting there would be some minor governance changes) and agreed that Public Health Wales, together with the Agenda for Change trade unions would jointly sign the Partnership Working Charter and agreed that this would be reviewed in a year.

Cross-cutting issues and matters delegated to other Committees

Audit and Corporate Governance Committee

- Noted that there was not an approved Travel and Study Leave Expenses Policy, an All Wales Policy was in development. Pending the development of the All Wales Policy, the updated policy would be approved by the People and Organisational Development Committee through the recognised approval process.
- Received the Year End Report of the Annual Quality and Clinical Audit Plan and noted that the Quality and Clinic Audit plan for 2019-20 needed to be wider to include all of the work of the organisation. The Quality, Safety and Improvement Committee had requested further work on the plan. The Committee received assurance on the outcome of the Annual Quality and Clinical Audit Plan for 2018/19.
- Internal Audit - Quality Impact Final Report - received assurance that the necessary actions were being undertaken, and noted that more substantial work to review the indicators was to be considered by the Quality, Safety and Improvement Committee
Unc
confirmed Minutes for the *Quality, Safety and Improvement Committee* on 12 November 2019 are available on request.


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<tr>
<th>Date of next meetings</th>
<th>Audit and Corporate Governance Committee</th>
<th>15 January 2020</th>
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<tr>
<td></td>
<td><em>People and Organisational Development Committee</em></td>
<td>22 January 2020</td>
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<td><em>Knowledge, Research and Information Committee</em></td>
<td>6 February 2020</td>
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<td></td>
<td><em>Quality, Safety and Improvement Committee</em></td>
<td>11 February 2020</td>
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