

Audit and Corporate Governance Committee Work Plan 2026-2027

Category	Item	Exec Lead	Approval Route	Private/ Public	May	Jun	Sept	Dec	Mar	Purpose of the report	
Annual Reporting	Accountability Report 2025/26	Board Secretary and Head of Board Business Unit	BET	Public	✓					To consider the report in draft form in May, prior to submission to AW	
	Annual Financial Statements and Accounts 2025/26	Executive Director of Strategy, Finance and Performance	Exec Lead		✓						To recommend the final version to the Board (July) for approval in July.
	Annual Accounts & Accountability Report Timetable 2026/27		Exec Lead			✓					To consider the accounts in draft form in May, prior to submission to AW
									✓		
										For assurance that the Trust has an appropriate plan in place for the production of the Financial Statements and Accountability Report for 2024/25, in line with the statutory deadlines.	
Information Governance	Information Governance Assurance Quarterly Reports	Executive Director Quality, Nursing and Integrated Governance	LT	Private /Public	✗		✓	✓	✓	For assurance that the Information Governance Management System is working effectively. to include combined report on records management, data breaches	
Audit (Internal and External)	Audit Recommendations Tracker (Internal and External)	Board Secretary and Head of Board Business Unit	LT	Private /Public	✓		✓	✓	✓	Oversight of the internal and external audit log, for assurance on progress and timeliness of the implementation of actions identified through audit activity.	
	Internal Audit: Progress Report	Head of Internal Audit - Shared Services	Exec Lead	Public	✓		✓	✓	✓	To provide the Committee with an update with the current and planned internal Audit work, and relevant progress with the Internal Audit Work Plan.	
	Internal Audit: Final Reports		Exec Lead	Private /Public	✓	✓	✓	✓	✓	ACGC receives all final reports following audit reviews, including the results of internal and external audit, for assurance on the adequacy of executive and managements response to issues identified by audit, inspection and other assurance activity, and to have oversight of the implementation of actions resulting from such reviews.	
			Exec Lead	Private /Public	✓	✓	✓	✓	✓	1. Business continuity planning 2. Climate change – Decarbonisation 3. Communications and engagement 4. Financial systems - capital 5. Bowel screening 6. Workforce capacity and capability 7. Health protection surveillance function 8. IMTP delivery and reporting 9. Programme management governance 10. Breast Test Wales 11. Welsh Risk Pool (WRP) 12. Risk management	
			BET	Public					✓	To consider the Internal audit planned activity for 2026/27. For approval of the Internal audit planned activity for 2025/26. The report details the audits to be undertaken and an analysis of the corresponding resources, and the Internal Audit Charter which defines the over-arching purpose, authority and responsibility of Internal Audit and the Key Performance Indicators for the service.	
	Internal Audit: Limited Assurance Reports	Relevant Exec	BET	Public	✓	✓	✓	✓	✓	Where there is a limited assurance report in year, a progress update will be provided at each following meeting until actions resolved.	
	Audit Wales: Annual Audit Report 2025/26	Audit Wales Lead	Exec Lead	Public					✓	For assurance as part of the Committee's consideration of the Annual Financial Statements and Accounts, and accountability Report.	
	Audit Wales: Annual Opinion (ISA 260)		AW	Public		✓				For assurance as part of the Committee's consideration of the Annual Financial Statements and Accounts, and accountability Report.	
	Audit Wales: Reports		BET	Public	✓	✓	✓	✓	✓	ACGC receives all final reports following audit reviews, including the results of internal and external audit, for assurance on the adequacy of executive and managements response to issues identified by audit, inspection and other assurance activity, and to have oversight of the implementation of actions resulting from such reviews. Refer Audit Activity Plan for full details of planned activity for 2025/26. Expected Reports listed below: Structured Assessment	
Quality and Clinical Audit Plan 2025/26	Executive Director Quality, Nursing and Integrated Governance	LT	Public				✓		For assurance on the overall system in place for clinical audit to ensure that there is an effective clinical audit function. <i>**The Quality, Safety and Improvement Committee will seek more detail on the clinical outcomes and improvements made as a result of clinical audit</i>		

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Category	Item	Exec Lead	Approval Route	Private/ Public	May	Jun	Sept	Dec	Mar	Purpose of the report	
Counter Fraud	Counter Fraud Progress Report	Executive Director of Strategy, Finance and Performance	Exec Lead	Private	✓		✓	✓	✓	Quarterly update on Counter Fraud activity for assurance.	
	Counter Fraud Annual Report		Exec Lead	Private	✓					For assurance of an effective counter fraud service that meets the standards set for the provision of counter fraud, as set out in National Assembly for Wales Directions and as required by the Counter Fraud and Security Management Service arrangements	
	Work Plan 2027/28		Exec Lead	Private	✓					✗	To set out the planned work to be undertaken by Counter Fraud for 2026/28
Cyber Security	Cyber Security Update	National Director for Public Health Knowledge and Research	Exec Lead	Private	✓			✓		For assurance on the management of Cyber security within the organisation.	
Finance / Procurement	Losses and Special Payments Report	Executive Director of Strategy, Finance and Performance	Exec Lead	Private	✓		✓	✓	✓	For assurance managed in accordance with SFIs / procedure	
	Procurement Report			Private	✓		✓	✓	✓		
	Review of Potential Debt Write Offs			Private				✓			Approve any debt write offs.
	Health Protection and Screening Procurement Plan	National Director for Health Protection and Screening Services	BET	Private			✓		✓	For assurance on the management of procurements in the Health Protection and Screening Directorate, and that there is an effective plan in place to review.	
Managing Risk	Strategic Risk	Executive Director Nursing, Quality, and Information Governance	BET	Private /Public	✓		✓	✓	✓	For assurance that risks within the remit of the Committee are management appropriately	
	Corporate Risk Register		LT	Public	✓		✓	✓	✓		
	Risk Management Maturity Plan		BET	Public			✓		✓		For assurance on the approach to risk and the progress in delivering the plan
	Annual Review of Risk Framework		BET	Public					✓		Annual assurance that there is an appropriate system of risk in place within the organisation.
Performance Management	Annual Review of Performance Management Framework	Executive Director of Strategy, Finance and Performance	BET	Public					✓	For assurance underlying assurance processes for the organisations performance management, and the process for ensuring the organisations ability to achieve corporate objectives.	
Governance and Accountability	Policies for approval (as required)	Board Secretary and Head of Board Business Unit	LT	Public	✓		✓	✓	✓	To approve policies and procedures within its remit, as outlined in the Policy, Procedure and other written control documents Policy.	
	Standing Orders / and Scheme of Delegation		BET	Public	✗		✓			To review the SOs and recommend any changes to Board	
	Governance Bi Annual Update		Exec Lead	Public			✓			✓	To ensure appropriate management of Corporate Governance Elements Declarations of Interest Gifts & Hospitality Register, Policies, WHCs, JWF. For assurance that appropriate arrangements in place for the approval, monitoring and updating of Joint Working Agreements , e.g. Memorandums of Understanding, Service level agreements.
	Compliance with the Code of Governance Self Assessment		Exec Lead	Public						✓	Review self assessment that the organisation complies with the code.
	Committee Annual Report		Exec Lead	Public						✓	For recommendation to Board, to provide assurance that the Committee is fulfilling its terms of reference.
	Review of Committee Effectiveness		Exec Lead	Public						✓	As part of the overall Board and Committee Performance and Effectiveness review, the Committee will consider the outcomes of the Committee effectiveness survey, and identify any areas of improvement for the following year.
	Committee Terms of Reference Review		BET	Public						✓	For recommendation to Board on any proposed changes to the Committee's Terms of reference. (As required under Standing Orders)
	Committee Work Plan		Exec Lead	Public	✓	✓	✓	✓	✓	✓	For information, and for assurance that the Committee is fulfilling its terms of reference.
NHS Wales Performance and Improvement	Losses and Special Payments Report	Board Secretary and Head of Board Business Unit	BET	Private	✓		✓	✓	✓	For assurance that the NHS P&I Losses and Special Payments are managed in accordance with SFIs / procedure	
	Procurement Report		BET	Private	✓		✓	✓	✓		
	Quarterly Corporate Governance Report		BET	Public	✓		✓	✓	✓	For assurance that any arrangements hosted by Public Health Wales, are complying with the provisions of the Hosting Agreement	
	NHS Wales P&I Annual Assurance Statement (2025/26)		BET	Public	✓						

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Category	Item	Exec Lead	Approval Route	Private/ Public	May	Jun	Sept	Dec	Mar	Purpose of the report
Meetings with Committee Members Required by TOR /SO					May	Jun	Sept	Jan	Mar	
Counter Fraud	Counter Fraud meeting with Committee Members (to be held in private and with no Officers present)								✓	The Counter Fraud Leads can request a meeting at any time, Meetings are in accordance with standing orders requirements. There is a requirement within the TORs to meet at least Annually.
Internal Audit	Head of Internal Audit meeting with Committee Members (to be held in private and with no Officers present) (Annually)								✓	The Internal Audit or the Chair can request a meeting at any time, Meetings are in accordance with standing orders requirements.
	Head of Internal Audit meeting with Committee Chair (to be held in private and with no Officers present) (Before each meeting as required by the Chair or Head of Internal Audit)				✓		✓	✓	✓	There is a requirement within the TORs to meet at least Annually
External Audit	Audit Wales meeting with Committee Members (to be held in private and with no Officers present) (Annually)								✓	Audit Wales or the Chair can request a meeting at any time, Meetings are in accordance with standing orders requirements.
	Audit Wales meeting with Committee Chair (to be held in private and with no Officers present) (Before each meeting as required by the Chair or Head of Internal Audit)				✓		✓	✓	✓	There is a requirement within the TORs to meet at least Annually

**Knowledge, Research and Information Committee
Work Plan 2026-27**

Category	Item		Exec Lead	Approval Route	Private/ Public	Jun	Sep	Dec	Mar	Purpose of the report	
Deep Dive (Development / evolving areas)	TO BE DETERMINED FOLLOWING DISCUSSION WITH QSIC										
Strategy Updates	Research and Evaluation Strategy		National Director for Public Health Knowledge and Research	Exec Lead	Public	✓		✓		Implementation Update (to Include Academic Public Health)	
	Data and Digital Strategy						✓		✓	Implementation Update (to Include Artificial Intelligence)	
	International Health Strategy		National Director of Policy and International Health				✓			Implementation Update (to Include Global Health, Behavioural Science)	
	Outcomes Framework		National Director for Public Health Knowledge			✓	✓	✓	✓	Update on the progress in measuring the impact of the delivery of the strategic priorities.	
Strategic Priorities	Strategic priority 1: Influencing the wider determinants of health	The wider determinants of health are the social, economic and environmental factors that affect health, well-being and health inequalities.	National Director of Policy and International Health	Exec Lead	Public				✓	Update on Progress with the implementation of the SP, within the context of KRIC's remit: - Knowledge, Research and Impact / Research and Evaluation - Analysis, Data Science and AI - Digital - Governance, Accountability and Risk - Inequalities - Global Health / System Leadership	
	Strategic Priority 2 - Promoting Mental Health and Social	To include Indicators for Mental Health					✓				
	Strategic priority 3: Promoting Healthy Behaviours		National Director Health and Wellbeing					✓			
	Strategic priority 4: Supporting the development of a sustainable health and care system focused on prevention and early intervention	To include how the system is supported, national priority etc.							✓		
	Strategic Priority 5 - Delivering excellent public health services to protect the public and maximise population health outcomes	National Population Screening Programmes				National Director of Health Protection and Screening Services, Executive Medical Director	✓				
	Health Protection and Infection Services	✓									
		Innovation and future threats (to include Genomics)				✓					
Stand Alone Assurance items	PHW Monitoring Impact		National Director for Public Health Knowledge and Research	Exec Lead	Public		✓		✓	Annual Report on Impact for assurance ; Findings in September, then an update on progress to implement actions in March	
	Inequalities		National Director of Policy and International Health	Exec Lead	Public			✓			
	Primary Care (Focus on Inequalities)		National Director of Policy and International Health / National Director Health and Wellbeing	Exec Lead	Public	✓				To include 6-month update following deep dive, and an included suggestion to focus on equity checklist.	
Managing Risk	Strategic Risk		Executive Director Nursing, Quality, and Information Governance	BET	Public	✓	✓	✓	✓	For assurance that risks within the remit of the Committee are management appropriately	
	Corporate Risk			LT	Public	✓	✓	✓	✓		
Governance and Accountability	Summary of policies Bi-Annual Update		Board Secretary and Head of Board Business Unit	LT	Public	✓		✓		For assurance on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee and to approve any policies and procedures proposed to be removed from the register.	
	Policies for approval (as required)			LT/BET	Public	✓	✓	✓	✓	To approve policies and procedures within its remit, as outlined in the Policy, Procedure and other written control documents Policy.	
	Committee Annual Report			Exec Lead	Public					✓	For recommendation to Board, to provide assurance that the Committee is fulfilling its terms of reference.
	Review of Committee Effectiveness			Exec Lead	Public					✓	As part of the overall Board and Committee Performance and Effectiveness review, the Committee will consider the outcomes of the Committee effectiveness survey, and identify any areas of improvement for the following year.
	Committee Terms of Reference Review			BET	Public					✓	For recommendation to Board on any proposed changes to the Committee's Terms of reference. (As required under Standing Orders)
	Committee Work Plan			Exec Lead	Public	✓	✓	✓	✓		For information, and for assurance that the Committee is fulfilling its terms of reference.

People and Organisational Development Committee Work Plan 2026-27

Category	Item	Exec Lead	Approval Route	Private/ Public	Apr	Jul	Oct	Jan	Purpose of the Report	
Deep Dives	POD IMTP commitments for 2026-27	Director People and Organisational Development	BET	Public	✓				Summary of Focus: Summary of the key areas of focus for 2025/26. Delivery of Plan: Assurance on the development of the implementation plan to deliver commitments. Achievability: Assurance on the timescales, achievability and deliverability of the plan. Risks: Risks or areas of concern identified that may impact delivery, and how these are being managed.	
	Culture and Engagement , Including the 2025 Staff Survey Results				✓				Summary of Focus: Update on progress with the culture and engagement work undertaken this year. Key achievements / Outcomes / Impact Planned activity for next year. Learning: Summary of any improvements / key learning from this year, and how this is being taken forward. Risks: Risks or areas of concern identified that may impact delivery, and how these are being managed.	
	People Strategy – Update on the Development of the Implementation Plan						✓			Summary of Focus: Summary of the key areas of focus for 2025/26 within the Strategy. Delivery of Plan: Assurance on the development of the implementation plan to deliver commitments. Achievability : Assurance on the timescales, achievability and deliverability of the plan. Risks: Risks or areas of concern identified that may impact delivery, and how these are being managed.
	Strategic Workforce Planning – Outputs of the 2025-2026 activity which will be part of the integrated planning process				✓				Summary of Focus: Update on progress with the culture and engagement work undertaken this year. Key achievements / Outcomes / Impact Planned activity for next year Learning: Summary of any improvements / key learning from this year, and how this is being taken forward. Risks: Risks or areas of concern identified that may impact delivery, and how these are being managed.	
Partnership Working	Staff Network: Update on Actions	Director People and Organisational Development	BET	Public		✓			Update on Staff Network requests.	
	Local Partnership Forum Annual Report		BET	Public	✓				Annual report from the Local Partnership Forum to Board/People and OD Committee.	
	Local Partnership Forum Terms of Reference		BET	Public			✓		For assurance of effective arrangements in place.	
	Trade Union Partnership Working Forums Update		Exec Lead	Private		✓		✓	Update on the work of the various TU forums for assurance.	
Workforce	ESR Transformation	Director People and Organisational Development	BET	Public	✓				Updating the Committee on preparatory work in readiness for implementation of the new NHS Wales workforce information system (ESR transformation)	
	Culture and Engagement - Action Plan		Exec Lead	Public			✓		To include the results of the planned pulse survey in the context of the action plan.	
	Workforce Extract from the Integrated Performance Board Report		BET	Public	✓	✓	✓	✓	For information (not discussed) unless issues identified or remitted from Board.	
	Organisational Change Management Update		LT	Public		✓		✓	For assurance of the management of change within the organisation.	
	Nursing and Midwifery Objectives 2025-26	Executive Director Nursing, Quality and Intergrated Governance	LT	Public				✓		
Equality, Diversity and Inclusion	Annual Equalities Report (2024-25)	Director People and Organisational Development	BET	Public				✓	For approval of the annual report - to include workforce and equalities data.	
	Gender Pay Gap Annual Report (2025)		BET	Public				✓	For approval of the annual report.	
	More Than Words Annual Report		BET	Public			✓			
	Welsh Language Annual Report (2024-25)		BET	Public		✓				

People and Organisational Development Committee Work Plan 2026-27

Category	Item	Exec Lead	Approval Route	Private/ Public	Apr	Jul	Oct	Jan	Purpose of the Report
Strategy Delivery	IMTP Commitment Update: Improve employee experience and address retention for Nursing and Midwifery staff	Director People and Organisational Development	Exec Lead	Public		✓			For assurance of the progress with the implementation of the IMPT Commitment.
	IMTP Commitment Update: Develop and commence delivery of foundational leadership and management learning and development to increase leadership and management skills, capacity, and confidence.		Exec Lead	Public			✓		
	IMTP Commitment Update: Use People and OD KPIs and colleague feedback to measure service performance and user satisfaction; and deliver improvements to key employment life-cycle processes to ensure all colleagues receive consistent, high-quality support		Exec Lead	Public				✓	
Risk	Strategic Risk	Executive Director of Nursing, Quality and Integrated Governance	BET	Public	✓	✓	✓	✓	For assurance that risks within the remit of the Committee are management appropriately.
	Corporate Risk Register		LT	Public	✓	✓	✓	✓	
Professional Registration	Regulated Professional Review of compliance with regulatory requirements such as professional appraisal and revalidation.	Joint: National Director Health Protection and Screening Services, Executive Medical Director and Executive Director of Nursing, Quality and Integrated Governance	Exec Leads	Public			✓		For assurance of the arrangements in place to ensure relevant medical professionals registration in in line with statutory requirements.
Governance	Committee Annual Report	Board Secretary and Head of Board Business Unit	Exec Lead	Public				✓	For recommendation to Board, to provide assurance that the Committee is fulfilling its terms of reference.
	Review of Committee Effectiveness		Exec Lead	Public				✓	As part of the overall Board and Committee Performance and Effectiveness review, the Committee will consider the outcomes of the Committee effectiveness survey, and identify any areas of improvement for the following year.
	Committee Terms of Reference Review		Exec Lead	Public				✓	For recommendation to Board on any proposed changes to the Committee's Terms of reference. (As required under Standing Orders)
	Speaking Up Safely Annual Report		BET	Private				✓	For assurance on the management of any concerns / grievance are in line with the policy.
	Summary of policies Bi-Annual Update		LT	Public	✓		✓		For assurance on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee and to approve any policies and procedures proposed to be removed from the register.
	Policies for approval (as required)		Exec Lead	Public	✓	✓	✓	✓	To approve policies and procedures within its remit, as outlined in the Policy, Procedure and other written control documents Policy.
	Committee Work Plan		Exec Lead	Public	✓	✓	✓	✓	For information, and for assurance that the Committee is fulfilling its terms of reference.
Audit Reports	Audit Report (as needed)	Relevant Executive Lead	Exec Lead	Public	✓	✓	✓	✓	Update on the implementation of the management response to the audit, for assurance.
	Audit Action Log Progress Update (within the remit of the Committee)	Board Secretary and Head of Board Business Unit	LT	Public	✓	✓	✓	✓	Where the subject matter of an audit report falls within the remit of one of the other Board Committees, the report is also submitted to that Committee, following consideration at ACGC. (Refer Audit Protocol) The role of the Remit Committee is to receive the report and to consider the recommendations made in the context of its work plan, and the areas of focus within its remit. Where relevant, the information contained in the reports will then be used to inform discussions of items on the work plan for the Committee.
NHS Wales Performance and Improvement	NHS Executive Bi-Annual Assurance Report	Director of the NHS Executive	BET	Public	✓		✓		Seek assurance on the on the relevant governance compliance areas: Equality, Diversity and Inclusion (Bi-Annually) Welsh Language (Bi-Annually) Raising Concerns Process (Annually) Workforce planning (Annually) Grievances (Annually)

Quality, Safety and Improvement Committee Work Plan 2026-2027

Category	Item	Exec Lead	Approval Route	Private/ Public	June	Sept	Nov	Feb	Purpose of the report	
Deep Dives	Learning from Claims	Executive Director Nursing, Quality, and Information Governance National Director of Health Protection and Screening Services, Executive Medical Director	BET	Private	✓				Deep dive for assurance. Deep dives provide an holistic overview and a detailed look into a particular area or service covering the following themes : - Performance - Governance Arrangements - Key risks - Improvement approach / Quality Links with Strategic Objectives Forward Look / next steps for the programme of work.	
	Population Health Programme related	National Director Health and Wellbeing	BET	Public		✓				
	Risk Based Issue in Year (to be determined)		BET	Public			✓			
	Lung Cancer Screening	National Director of Health Protection and Screening Services, Executive Medical Director	BET	Public				✓	Refer to Deep Dive Guidance for content requirements.	
Clinical Governance	Claims and Redress Report (Private Session)	Executive Director Nursing, Quality, and Information Governance	BET	Private	✓	✓	✓	✓	For assurance that claims are being managed in line with the Claims Management Policy and Procedure.	
	Quarterly Quality Governance Performance Report		BET	Private/ Public	✓	✓	✓	✓	For assurance on how the organisation has discharged its responsibilities Relating to: IPC Safeguarding Quality and Candor Putting Things Right Quality and Clinical Audit Clinical Governance Framework Implementation	
	Quality Annual Report 2025-26		BET	Public		✓				For oversight, scrutiny and assurance of compliance with the act.
	Putting Things Right and Duty of Candour Annual Report 2025-26		BET	Private/ Public	✓					For assurance that there are effective arrangements in place for Putting Things Right, in line with our statutory responsibilities and oversight, assurance of compliance with duty of Quality and Candour Act.
	Quality and Clinical Audit Plan Annual Report 2025-26 and Forward Look 2026-27		LT	Public	✓					To provide the Committee with the Year End report on the Quality and Clinical Audit Plan, for assurance on the progress. And to approve the content of the Quality and Clinical Audit Plan for the following year, and the planned approach to the audits.
	Staff Flu vaccination campaign Annual Report 2025-26 and Forward Look 2026-27		BET	Public		✓				The Internal Flu Vaccine Campaign end of year report and for assurance regarding the uptake of influenza vaccinations.
	National Safeguarding Service Annual Report 2025-26 and Forward Look 2026-27		BET	Public		✓				For assurance on how the organisation has discharged its National Safeguarding responsibilities on an annual basis
Engagement/ Equality	Engagement of our Services	Executive Director Nursing, Quality, and Information Governance	BET	Public	✓	✗			For assurance on the arrangements in place to monitor the voice of the service user and/or the citizen as being central to improving the quality and effectiveness of services, functions and programmes. Demonstration of the CIVICA System. (ToR 1.10)	
Health Protection and Screening Services	Winter Planning / Seasonal Planning	National Director of Health Protection and Screening Services, Executive Medical Director	Exec Lead	Public		✓	✓	✓	For assurance on the arrangements in place for the management of screening services ensuring the appropriate systems and processes in place that demonstrate quality, safety and effectiveness.	
	Emergency Preparedness, Resilience and Response Annual Report 2025		BET	Public	✓				For assurance that the organisation is meeting its statutory requirements in relation to the management of Emergency preparedness, resilience and response.	
	Medicines Management		Exec Lead	Public			✓		For assurance that there are effective arrangements in place for Medicine Management.	
	Screening Service Update		BET	Public		✓		✓	For assurance on the arrangements in place for the management of screening services ensuring the appropriate systems and processes in place that demonstrate quality, safety and effectiveness.	

Quality, Safety and Improvement Committee Work Plan 2026-2027

Category	Item	Exec Lead	Approval Route	Private/Public	June	Sept	Nov	Feb	Purpose of the report	
Population Health	Population Health Programmes	National Director Health and Wellbeing	Exec Lead	Public			✓		For assurance on the arrangements in place for the management of population health programmes, ensuring the appropriate systems and processes in place that demonstrate quality, safety and effectiveness.	
	Update from one of the Programmes (Action: determine how we get routine assurance from these programmes)		Exec Lead	Public	✓	✓	✓	✓		
Health and Safety	Health and Safety Annual Report	Executive Director Operations and Finance	BET	Public	✓				For assurance that appropriate measures are in place to monitor compliance with Health and Safety requirements, and to address areas identified for improvement.	
	Health and Safety Quarterly Report		BET	Public	✓	✓	✓	✓		
	Health and Safety Terms of Reference		BET	Public	✓				For assurance that the planned activity for the year fulfils the requirements of the group, as a sub group of the Committee.	
	Health and Safety Work Plan 2026-27		BET	Public	✓				For assurance and assurance, that the planned activity for the year fulfils the requirements of the group, as a sub group of the Committee.	
Managing Risk	Strategic Risk	Executive Director Nursing, Quality, and Information Governance	BET	Public	✓	✓	✓	✓	For assurance that risks within the remit of the Committee are management appropriately.	
	Corporate Risk Register		LT	Public	✓	✓	✓	✓		
Governance & Accountability	Summary of policies Bi-Annual Update	Board Secretary and Head of Board Business Unit	LT	Public	✓		✓		For assurance on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee and to approve any policies and procedures proposed to be removed from the register.	
	Policies for approval (as required)		LT / BET	Public	✓	✓	✓	✓	To approve policies and procedures within its remit, as outlined in the Policy, Procedure and other written control documents Policy.	
	Committee Annual Report 2026-27		Exec Lead	Public					✓	For recommendation to Board, to provide assurance that the Committee is fulfilling its terms of reference.
	Review of Committee Effectiveness		Exec Lead	Public	✓				✓	As part of the overall Board and Committee Performance and Effectiveness review, the Committee will consider the outcomes of the Committee effectiveness survey, and identify any areas of improvement for the following year.
	Committee Terms of Reference Review		BET	Public	✓				✓	For recommendation to Board on any proposed changes to the Committee's Terms of reference (As required under Standing Orders).
	Committee Work Plan		Exec Lead	Public	✓	✓	✓	✓	✓	For information, and for assurance that the Committee is fulfilling its terms of reference.
Audit and other Reviews	Audit Action Log Progress Update (within the remit of the Committee) (as needed)	Board Secretary and Head of Board Business Unit	Exec Lead	Public	✓	✓	✓	✓	Update on the implementation of the management response to the audit, for assurance.	
	Audit Report (as needed)	Relevant Executive Lead	Exec Lead	Public	✓	✓	✓	✓	Where the subject matter of an audit report falls within the remit of one of the other Board Committees, the report is also submitted to that Committee, following consideration at ACGC. (Refer to Audit Protocol). The role of the Remit Committee is to receive the report and to consider the recommendations made in the context of its work plan, and the areas of focus within its remit. Where relevant, the information contained in the reports will then be used to inform discussions of items on the work plan for the Committee.	
NHS Wales Performance and Improvement Unit (P&I)	NHS Performance and Improvement Quarterly Quality Governance Report	NHS Wales Performance and Improvement	BET	Public	✓	✓	✓	✓	To provide the Committee with assurance on the NHSE Compliance with the following areas: Health and Safety, National Reportable Incident Reporting , Complaints (including PTR if applicable), Claims reporting, DATIX, Safeguarding	
	NHS Performance and Improvement Unit Annual Compliance Statement		BET	Public	✓	✗			To provide the Committee with: Duty of Quality compliance, Duty of Candor compliance, Socio Economic Duty compliance, Wellbeing of Future Generations Act Compliance, Emergency Planning, Clinical Governance	

Remuneration and Terms of Service Committee Work Plan 2026/27

Remit	Item	Purpose		Exec Lead	Approval Route	As required	Sep	Mar
Payments	Voluntary Early Release Scheme Applicatione	Approval	Consider and approve redundancy and Early Release Applications, noting that where the settlement is £50,000 or above subsequent agreement of Welsh Government is required	Director People and Organisational Development	Chief Executive	✓		
	Redundancy Payments	Approval				✓		
	Employment Severance agreements / Claims settlements	Approval	Consider and approve any employment severance type agreements / claim settlements where the settlement sum is over £50,000, or in any event could be regarded as novel, contentious or repercussive. Under £50,000 is approved by the Chief Exec.			✓		
Appointments	Remuneration Assurance Report (Non Executive and Executive)	Assurance	Report for assurance on a 6 monthly basis to confirm the Exec and Non Executive level pay is appropriate.	Director People and Organisational Development	Chief Executive		✓	✓
	Remuneration and Terms of Service for Chief Executive, Executive Directors and other Very Senior Managers	Approval	Approve Board level, and Very Senior Management remuneration and terms of service.			✓		
	Appointments of Executive Directors / Members of the Executive Team	Approval	Approve Board level appointments.			✓		
	Approve the discipline and dismissal of any Executive level appointments (incl Hosted Bodies)	Approval	Includes senior employees (including in hosted bodies), in accordance with Ministerial Instructions e.g. the Board Secretary	Chief Executive		✓		
Performance Management	Annual Performance Management	Assurance	The performance management system in place for Non-Executive Directors, Chief Executive, Executive Directors and Members of the Executive Team and receive assurance in relation to the system in place.	Chair and Chief Executive	Chair and Chief Executive (Joint Report)			✓
	Report (Exec and Non-Exec)							
Executive Team Changes	Executive Team Changes	Assurance	Assurance to the Board on the planning and composition of the Executive Team to include proposed changes to roles (and use of interim posts)	Chief Exec	Chief Executive	✓		
Committee Governance	Minutes and Action log	Approval	For approval to ensure appropriate record of the meetings are held and actions progressed.	Board Secretary and Head of Board Business Unit	Chair	✓		✓
	Work Plan	Approval	Review at each meeting, and approve on an annual basis		Board Secretary	✓	✓	✓
	Review Terms of Reference	Recommend to the Board	For review and recommendation of any changes to Board					✓