



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd
Addysgu Powys
Powys Teaching
Health Board

**AUDIT, RISK & ASSURANCE COMMITTEE
CONFIRMED**

**MINUTES OF THE MEETING HELD ON TUESDAY 16 NOVEMBER
2021 VIA MICROSOFT TEAMS MEETING**

Present:

Tony Thomas	Independent Member – Finance (Committee Chair)
Mark Taylor	Independent Member – Capital and Estates
Matthew Dorrance	Independent Member – Local Authority
Rhobert Lewis	Independent Member
Ronnie Alexander	Independent Member

In Attendance:

Carol Shillabeer	Chief Executive
Alison Davies	Director of Nursing and Midwifery (for Item 3.2c & 3.7 only)
Hayley Thomas	Director of Planning and Performance (for Item 3.2a only)
Wayne Tannahill	Head of Estates and Property (for Item 3.2a only)
Ian Virgil	Internal Audit
Jayne Gibbon	Internal Audit
Melanie Goodman	Internal Audit
Pete Hopgood	Director of Finance and IT
Rani Mallison	Board Secretary
Sarah Pritchard	Head of Financial Services
Alice Rushby	External Audit
Anne Beegan	External Audit
Bethan Hopkins	External Audit
Kirsty James	PTHB Counter Fraud
Matthew Evans	Swansea Bay Counter Fraud

Committee Support

Shania Jones	Charity Administrative Support Officer
--------------	--

Apologies

Vivienne Harpwood	PTHB Chair
Claire Powell	CHC
Rebecca Collier	Health Inspectorate Wales
Alison Butler	External Audit

ARA/21/69	<p>WELCOME AND APOLOGIES</p> <p>The Committee Chair welcomed everyone to the meeting, and confirmed that a quorum was present. Apologies for absence were noted as recorded above.</p>																												
ARA/21/70	<p>DECLARATIONS OF INTERESTS</p> <p>The Committee Chair INVITED Members to declare any interests in relation to the items on the Committee agenda.</p> <p>None were declared.</p>																												
ARA/21/71	<p>MINUTES FROM THE PREVIOUS MEETING FOR RATIFICATION</p> <p>The minutes of the meeting held on 14 September 2021 were RECEIVED and AGREED as being a true and accurate record.</p>																												
ARA/21/72	<p>MATTERS ARISING FROM PREVIOUS MEETINGS</p> <p>There were no matters arising from the previous meeting.</p>																												
ARA/21/73	<p>COMMITTEE ACTION LOG</p> <p>The Committee received the action log and the following updates were provided.</p> <p>ARA/21/23: This will be scheduled for Q4, 2021/22</p>																												
ARA/21/74	<p>APPLICATION FOR SINGLE TENDER WAIVERS (STWs)</p> <p>Sarah Pritchard presented the previously circulated report, seeking the Committee's ratification of STW requests made between 1 September 2021 and 31 October 2021.</p> <p>Sarah Pritchard advised that there were two STW requests made between 1 June 2021 and 31 August 2021 for Trade Waste Collection and the upgrade of Electrical Facilities Infrastructure to Llandrindod Wells Hospital details of which had been provided to Committee.</p> <table border="1" data-bbox="284 1563 1509 1957"> <thead> <tr> <th data-bbox="284 1563 427 1776">Single Tender Reference</th> <th data-bbox="427 1563 523 1776">Request to waive QUOTE or TENDER threshold</th> <th data-bbox="523 1563 651 1776">Name of Supplier</th> <th data-bbox="651 1563 794 1776">Item</th> <th data-bbox="794 1563 975 1776">Reason for Waiver</th> <th data-bbox="975 1563 1091 1776">Date of Approval</th> <th data-bbox="1091 1563 1187 1776">Value £</th> <th data-bbox="1187 1563 1294 1776">Length of Contract</th> <th data-bbox="1294 1563 1430 1776">Prospective / Retrospective</th> <th data-bbox="1430 1563 1509 1776">Appendix Ref</th> </tr> </thead> <tbody> <tr> <td data-bbox="284 1776 427 1957">POW2122008</td> <td data-bbox="427 1776 523 1957">TENDER</td> <td data-bbox="523 1776 651 1957">Not included due to commercial sensitivities</td> <td data-bbox="651 1776 794 1957">Trade Waste Collection</td> <td data-bbox="794 1776 975 1957">Maintain service whilst formal tender process undertaken</td> <td data-bbox="975 1776 1091 1957">01/09/2021</td> <td data-bbox="1091 1776 1187 1957">£88,528</td> <td data-bbox="1187 1776 1294 1957">12 Months</td> <td data-bbox="1294 1776 1430 1957">Prospective</td> <td data-bbox="1430 1776 1509 1957">A1</td> </tr> </tbody> </table>									Single Tender Reference	Request to waive QUOTE or TENDER threshold	Name of Supplier	Item	Reason for Waiver	Date of Approval	Value £	Length of Contract	Prospective / Retrospective	Appendix Ref	POW2122008	TENDER	Not included due to commercial sensitivities	Trade Waste Collection	Maintain service whilst formal tender process undertaken	01/09/2021	£88,528	12 Months	Prospective	A1
Single Tender Reference	Request to waive QUOTE or TENDER threshold	Name of Supplier	Item	Reason for Waiver	Date of Approval	Value £	Length of Contract	Prospective / Retrospective	Appendix Ref																				
POW2122008	TENDER	Not included due to commercial sensitivities	Trade Waste Collection	Maintain service whilst formal tender process undertaken	01/09/2021	£88,528	12 Months	Prospective	A1																				

	POW212200 7	TENDER	Not included due to commercial sensitivities	Upgrade of Electrical Utilities Infrastructure to Llandrindod Wells Hospital	Sole Supplier of Utilities and owner of Transformer unit where Infrastructure requirement is being upgraded to enable additional power to the hospital	20/10/20 21	£32,49 0	6 Months	Prospective	A2
--	----------------	--------	--	--	--	----------------	-------------	-------------	-------------	----

Reflecting on the previous committee meeting a procedure was scheduled to be put in place to minimise the need for these, where does this procedure now sit?

Pete Hopgood explained that in terms of procedure there were procurement rules and policies in place. A STW was triggered when the circumstance fell outside the procurement policy. As an organisation the number of single tender waivers was low which was positive as the aim was to have as few as possible.

It was previously requested that Board members receive training in procurement, when is that scheduled for?

Rani Mallison has confirmed that this has been scheduled to be held within Board Development meeting in February 2022.

Why was there a split in costs between the Health Board and Western Power for the Llandrindod project?

Sarah Pritchard explained that the hospital within Llandrindod Wells is a large consumer of electricity. Western Power needed to upgrade the transformer and as the Hospital were not the sole users of power in the area the costs of the upgrade were split.

The Committee RATIFIED the approval of the STWs as detailed in the report.

ARA/21/75

INTERNAL AUDIT PROGRESS REPORT

Ian Virgil presented the previously circulated report, which included details of the progress made to date against individual assignments, outcomes and findings from the reviews, along with details regarding the delivery of the plan and any required updates.

Ian Virgil advised that four audits has been finalised so far this year, with one at the draft report stage. In addition, there were three audits that were currently work in progress with a further six at the planning stage.

Could Ian provide clarity regarding the annual audit opinion? Could the audit opinion be affected?

Ian Virgil explained that the team was hoping to provide assurance by identifying the potential audits that were seen as a lower risk or less critical. Then from the remaining audits within the plan, the aim will be to

	<p>provide enough coverage in order to produce the internal audit opinion for the year.</p> <p><i>Is this approach uncommon?</i> Ian Virgil confirmed that this was a similar process for other Health Boards.</p> <p><i>In regard to the workforce futures framework and the change to occupational health. Please can you clarify, as it could be seen as a reduction within scope of the audit.</i> Ian Virgil explained that because of the current position of the workforce futures project, it was more useful to give focus to the occupational health area. This will then feed into the workforce's health and wellbeing. It was seen as more appropriate to focus on this area with the potential to review the workforce futures framework during the planning of next year's internal audit plan.</p> <p>The Committee RECEIVED and NOTED the Internal Audit Progress Report 2021-22.</p> <p style="text-align: right;"><i>Hayley Thomas and Wayne Tannahill joined the meeting.</i></p>
ARA/21/76	<p>INTERNAL AUDIT REPORTS:</p> <p>a) CONTROL OF CONTRACTORS (LIMITED ASSURANCE) Melanie Goodman presented the previously circulated report, which outlined the results of the review that was undertaken to evaluate the processes and procedures that support the management and control of contractors working for the THB, within Capital and Estates, and compliance with Health and Safety Executive (HSE) and other associated guidance and legislation.</p> <p>Melanie Goodman advised that the review identified ten recommendations for improvement: four high priority; four medium priority; and, two low priority.</p> <p><i>Mark Taylor expressed disappointment in the level of assurance however, considered it was not surprising due to the difficulty in the business terms of managing this area. Where attention needed to be given was in looking at controlling aspects such as signing in, management on site and checking quality of work. This would be an area that control and focus can be given too.</i></p> <p><i>A second point around performance and compliance which had been previously raised regarding the management response. There is a slight disconnect between the environment group and the delivery and performance committee in terms of seeing those issues of non-compliance being reported through. This would be something to consider moving forward.</i></p>

Hayley Thomas responded to the comments regarding the performance and compliance, and expressed disappointment around the timing of the limited assurance rating. This was during the time of working flexibly across the teams and as a result there was additional training targeted to ensure the process was rectified. The progress will be tracked against the 12 recommendations, a few have already been completed and there was plan in place to move progress forward. Attention was drawn to the key issue of geography and the importance of the Health Board implementing across the whole of Powys.

Wayne Tannahill gave further assurance, explaining that a significant piece of work was currently ongoing to move from individual appointment of the contractors (reactive) to a position where contractors would be appointed to a 2-3 year contract. This included specialist work, and the hope to offer a more robust delivery in terms of estates services moving forward. It was important to note that estates teams was small and was currently covering the whole of Powys.

There are deliverables here that are timed for the end of the year (December 2021). Please can you give assurance that the progress on these are good and moving forward? Are we able to achieve these in the time constraints?

Hayley reassured the Committee that yes, they are on target to meet the intended deadline of December 2021.

b) MEDICAL EQUIPMENT AND DEVICES (REASONABLE ASSURANCE)

Ian Virgil presented the previous circulated report, which outlined the results of the review that was undertaken to evaluate and determine the adequacy of the systems and controls in place for the management of medical equipment & devices and point of care testing.

Ian Virgil advised that the review identified seven recommendations for improvement: three high priority; three medium priority; and, one low priority.

Regarding the assurance summary on page 3, it is noted that 6 of the 13 items have received limited assurance on the table. Is this correct?

Ian Virgil explained that the team was only able to give limited assurance. However, it was felt that giving it a reasonable assurance would be appropriate to reflect the progress that has been since the previous audit, as policies and procedures have been put into place. It was also considered the current situation and the on-going pandemic, and the ability of the management to full implement.

How much non-compliance is due to COVID generated pressures and how much is not? Bearing in mind these pre-date the pandemic. Where will we be in 6 months' time with all these pressures?

Ian Virgil responded and explained that this audit was advisory therefore, did not lead to formal recommendations to then be included on the Health Board's recommendations tracker and formally monitored moving forward. The key recommendations highlighted from this report have been agreed with management and now appropriate action can be undertaken within a set timescale, it will also be monitored through a tracker.

Rani Mallison further explained that the Patient Experience, Quality and Safety Committee will receive this audit report and it is expected to have 6 monthly updates to that committee regarding the progress of the improvements.

Carol Shillabeer gave further reassurance and additionally added that the Executive Committee will also be reviewing the progress. There was a comprehensive system in place to enable the review of progress trackers.

*Hayley Thomas and Wayne Tannahill left the meeting.
Alison Davies joined the meeting.*

c) MIDWIFERY SAFEGUARDING SUPERVISION (REASONABLE ASSURANCE)

Ian Virgil presented the previous circulated report, which outlined the results of the review that was undertaken to evaluate and determine the adequacy of the systems and controls in place within the Health Board for Midwifery – Safeguarding Supervision.

Ian Virgil advised that the review identified two medium recommendations for improvement.

Is Powys not facing the same issues identified in other Health Board across the country?

Alison Davies explained that the internal audit report was around a specific element of maternity services which related to the uptake of the safeguarding supervision. It was an essential element of clinical care and safeguarding supervision that the midwifery teams can identify and act appropriately upon any safeguarding concerns that occur within any families they are work with. There had been a considerable amount of work to get to this position and we were pleased to receive the audit report which provides reasonable and substantial assurance in a number of areas.

The reports in England and Wales regarding the maternity services had highlighted long standing issues that had been identified in professional and regulatory reports, Powys Teaching Health Board are sighted on these issues, particularly, if commissioned services were from those providers. In

	<p>terms of PTHB maternity services, community-based midwifery services are provided and this report was in respect of our provider element.</p> <p>The Committee RECEIVED and NOTED the Internal Audit Reports.</p>
ARA/21/77	<p>RISK MANAGEMENT FRAMEWORK</p> <p>Rani Mallison presented the previously circulated report, which provided the revised Risk Management Framework (RMF), including Risk Appetite Statement, ahead of presentation to the Board in November 2021. Rani Mallison advised that the RMF would help build and sustain an organisational culture that encouraged appropriate risk taking, to continuously improve the quality of the services provided and commissioned by the health board.</p> <p><i>We are already in the position where our services are greatly stretched, and our waiting times are far beyond what could have been predicted. Does this mean our risk appetite is changing or is the tolerance of risk changing? How does the document reflect the current reality?</i></p> <p>Rani Mallison explained the risk appetite statement sets out the Board’s strategic approach to risk taking. The Board would not necessarily want to actively take a greater level of risk around quality however, there would be times the Board will need to tolerate a greater level of risk. The Corporate Risk Register in this context was fundamental, there were a number of high rated risks which were not being managed at appetite. An honest conversation needed to be had about were we doing everything possible to manage these risks at the level we are maintaining therefore, we are tolerating above appetite. This framework alone cannot articulate the picture of the corporate risk register which would give a strategic view for the Board and public.</p> <p>Carol Shillabeer further explained that this was discussed at the Executive Committee. It was necessary to be transparent and explicit about the level of risk at the moment within the system. It was not the level of risk that was aspired to or tolerated therefore, it is important to consider what was being done to manage this and how successful this was. This would be further discussed at Board next week.</p> <p><i>Regarding the process and the move to Datix, which is now the delivery vehicle. What are the particular significance or issues surrounding this?</i></p> <p>Rani Mallison explained that the Once for Wales complaints management system had a risk management module</p> <p>There was national group looking at how that it can be used and designed to suit organisational needs, managed through the Once for Wales complaints management system programme board, which Pete Hopgood leads. At present the programme is in design phase with implementation planned for n April 2022, after which training and support will be required.</p>

One of the concerns seen with the move from internal or corporate services is the loss of historical data. Has that been considered?
 Pete Hopgood explained that there is a process of maintaining historic or legacy information to ensure that is retained. The benefits of moving to the national approach will be the ability to look at a national and local data to allow more insight and ability to improve. There are process in place to protect that legacy information.

The Committee RECEIVED and NOTED the Risk Management Framework.

ARA/21/78

IMPLEMENTATION OF AUDIT RECOMMENDATIONS

Rani Mallison presented the previously circulated report, which provided an overview of the current position relating to the implementation of Audit Recommendations, arising from reviews undertaken by Internal Audit, External Audit (Audit Wales) and Local Counter Fraud Services.

Rani Mallison advised that the overall summary position in respect of overdue audit recommendations is: -

Overdue Internal Audit Recommendations							
Covid-19 Prioritisation	2017/18	2018/19	2019/20	Internal Audit Priority	2020/21	2021/22	TOTAL OUTSTANDING
	Number				Number		
Priority 1	0	0	0	High	2	0	1
Priority 2	5	1	9	Medium	6	0	28
Priority 3	1	0	9	Low	1	0	20
Not Yet Prioritised	0	0	1				1
TOTAL	6	0	19		9	0	34

Overdue External Audit Recommendations				
	2018/19	2019/20	2020/21	TOTAL OUTSTANDING
	Number	Number	Number	Number
Priority 1	0	0	2	0
Priority 2	2	0		2
Priority 3	1	0		1
Not Yet Prioritised	0	0		2
TOTAL	3	0	2	5

Local Counter Fraud Services Recommendations		
	2021/22	TOTAL OUTSTANDING
	Number	Number
Overdue	0	0
TOTAL	0	0

The Committee RECEIVED and NOTED the progress in respect of the implementation of audit recommendations.

ARA/21/79

WELSH HEALTH CIRCULARS

Rani Mallison presented the previously circulated report, which provided an overview of the current position relating to the implementation of Welsh Health Circulars (WHCs). WHCs are received from Welsh Government by

the Corporate Governance Team, where they are logged and then distributed to the appropriate Executive Director for action. Rani Mallison advised that the overall summary position in respect of WHCs is: -

	2018	2019	2020	2021
No Progress	0	0	0	0
Partially Complete	1	2	2	8
Complete	47	36	15	9
TOTAL NUMBER ISSUED	48	38	17	17

In regard to Welsh Health Circulars, do they all have different levels of priority or are they issued with an expectation that the priority for all of them would be equal?

Rani Mallison explained that WHCs were issued with the same status, some will have different deadlines therefore, they are prioritised in that way. Additionally, PTHB received Ministerial Directions issued by letter which are a priority.

The Committee RECEIVED and NOTED the update in respect of Welsh Health Circulars.

ARA/21/80

ANNUAL GOVERNANCE PROGRAMME REPORTING

Rani Mallison provided the previously circulated report, which provided a progress update on delivery of the Annual Governance Programme for 2021/22, as at Quarter 2. The Annual Governance Programme outlined key governance priorities, informed by internal audit, external audit and the Board's review of its effectiveness. The Annual Governance Programme included detailed actions for implementation. These actions were led by the Board Secretary, and were delivered in partnership with relevant members of the Board. Progress was reported to the Audit, Risk and Assurance Committee, in line with the Committee's role in assuring the Board on governance, risk and assurance arrangements.

Rani Mallison advised of Quarter 2 Achievements in the following areas: -

- Purpose, Roles and Responsibilities
- Board Effectiveness
- Risk and Assurance system

The Committee RECEIVED and NOTED the Annual Governance Programme update.

ARA/21/81

AUDIT WALES REVIEW OF QUALITY GOVERNANCE ARRANGEMENTS

Anne Beegan introduced the previously circulated report, which provided the results of the audit that examined whether the organisation's governance arrangements support delivery of high quality, safe and effective services. The review focused on both the operational and

	<p>corporate approach to quality governance, organisational culture and behaviours, strategy, structures and processes, information flows and reporting.</p> <p>Anne Beegan advised that overall, the review found that the Health Board was committed to ensure high quality, safe and effective services and had taken steps to improve its quality governance arrangements. There remained work to embed these arrangements, articulate the quality priorities of the organisation and ensure there were measures in place to demonstrate and monitor achievement to drive improvements across the full range of services provided and commissioned.</p> <p><i>In regarding patient feedback, how is this audit group going to be sighted on the general progress being made because would it still be a concern to us due to it sitting under the audit banner?</i></p> <p>Rani Mallison explained that the report would be presented to the next Patient Experience, Quality and Safety Committee and the Audit Wales team would be attendance in order to present, with Alison Davies delivering the management response. It was expected the process of this would be incorporated into Patient Experience, Quality and Safety Committee workplan. This Committee would still receive progress updates via the implementation of the audit recommendation and through the tracking progress. Therefore, the Board will receive assurance from both committees.</p> <p><i>It is mentioned that there is an alignment with the clinical quality framework and the commissioning assurance framework, in practice what would it mean?</i></p> <p>Alison Davies explained that there was a suggestion around better alignment of commissioning assurance framework and the clinical quality framework. It was important to note that the clinical quality framework was an umbrella document, it incorporated the approach to quality within the Health Board, the commissioning assurance framework was an element of that. A project is in place to establish the commissioning assurance framework process for the provider element that will further strengthen the overview of our patient pathways.</p> <p>The Committee RECEIVED and NOTED the Audit Wales Review of Quality Governance Arrangements.</p> <p style="text-align: right;"><i>Alison Davies left the meeting.</i></p>
ARA/21/82	<p>EXTERNAL AUDIT PROGRESS REPORT 2021-22</p> <p>Anne Beegan provided the previously circulated report, which provided an update on current and planned Audit Wales work. Accounts and performance audit work were considered, and information was also provided on the Auditor General’s wider programme of national value-for-money examinations and the work of our Good Practice Exchange (GPX). Anne Beegan advised that the following audit work is currently underway:</p>

Accounts audit work			
Area of work		Current status	
Audit of the 2020-21 Charitable Funds Account		Audit work due to commence in November.	
Performance audit work			
Area of work	Exec Lead	Focus of the work	Current status
Orthopaedic services – follow up	Medical Director	This review will examine the progress made in response to our 2015 recommendations. The findings from this work will inform the recovery planning discussions that are starting to take place locally and help identify where there are opportunities to do things differently as the service looks to tackle the significant elective backlog challenges.	Report being drafted
Structured Assessment	Chief Executive	This work will continue to reflect the ongoing arrangements of NHS bodies in response to the COVID-19 emergency. The work will be undertaken in two phases. Phase 1 will review the effectiveness of operational planning arrangements to help NHS bodies continue to respond to the challenges of the pandemic and to recover and restart services. Phase 2 will examine how well NHS bodies are embedding sound arrangements for corporate governance and financial management, drawing on lessons learnt from the initial response to the pandemic.	Phase 1 – Completed and report presented to Committee in July Phase 2 - Fieldwork Underway, to be presented to Committee January 2022
Renewal Programme	Director of Planning & Performance	This local work will examine the arrangements put in place to deliver the Health Board’s renewal programme.	Scoping

The Committee RECEIVED and NOTED the External Audit update.

ARA/21/83

LOSSES AND SPECIAL PAYMENTS REPORT

Sarah Pritchard presented the previously circulated report, which provided an interim report for the period 1st April 2021 to 31st October 2021. Sarah Pritchard advised that losses and special payments were items that the Welsh Government would not have contemplated when they passed legislation or agreed funds for the NHS; such payments would also include any ex gratia payments made by the THB. By their nature they are items which should be avoidable and should not arise. They are subject therefore to special control procedures and are included within a separate note in the THB’s annual accounts.

	No. of payments/Receipts	No. of cases	£
Clinical Negligence /Personal Injury (Payment)	16	8	£83,351.70
Total	16	8	£83,351.70

	No. of payments/receipts	No. of cases	£
Redress Payments	23	16	£11,193.70
Total	23	16	£11,193.70
Redress Receipts	0	0	£0.00
Total	23	16	£11,193.70

	No. of payments/receipts	No. of cases	£
GMPI Payments	2	1	£612.00
Total	2	1	£612.00
GMPI Receipts	0	0	0.00
Total	2	1	£612.00

	No. of payments/receipts	No. of cases	£
Other Special Payments	3	3	£37,318.43
Total	3	3	£37,318.43

Have any of these financial payments been affected by COVID-19?

Sarah Pritchard explained that there had not been any claims in relation to a COVID related matters. There were delegated authority and limits in place to manage the on-going cases which had not been severely impacted by the pandemic.

This covers a six-month period therefore, could it be presumed that they would be updated end of the financial year? What does this look like in terms of trend analysis? If there is no trend analysis would it be helpful to have incorporate one, so the committee can see what the direction is?

Sarah Pritchard explained that previously there had been trend analysis, and it may be worth including something in the next reporting cycle of this. The difficulty the Health Board have in regard to claims, is that it is based on an experience for example, clinical negligence and personal injury. As a Health Board PTHB has minimal claims compared to larger Health Boards.

Rani Mallison further explained that Patient Experience, Quality and Safety Committee regularly receives an update on Putting Things Right claims and Wales' risk analysis.

Did the last item in appendix four come as result of counter fraud or another process?

	<p>Sarah Pritchard explained that it came through from the primary care management of contracts, which was currently in operation within the Health Board. It was a matter being dealt with by the primary care team and being support by legal and risk.</p> <p>The Committee RECEIVED and NOTED the Losses and Special Payments Report.</p>
ARA/21/84	<p>AUDIT WALES REVIEW OF PICTURE OF PUBLIC SERVICES 2021</p> <p>Anne Beegan presented the previously circulated report, which was part of a series of Pictures of Public Services 2021 outputs. It summarised some key trends in public finances and set out their independent perspective on some of the key issues for future service delivery. The aim in producing this report was to support scrutiny of public services in the Senedd, within individual public bodies and in wider society. It also provided insight than could help with collective planning of public service delivery. The report drew on their own published work and research by other organisations.</p> <p>Anne Beegan advised that the COVID-19 pandemic had had a devastating impact on many families and communities, yet it had also brought out much of the best in our public services. Everyone at Audit Wales pay tribute to the dedication and extraordinary efforts of public servants across Wales through this tumultuous period.</p> <p>As we emerge from the pandemic, public services in Wales face many challenges. They are grappling with three over-arching crises of global proportion: the public health crisis of COVID; the environmental crisis of climate change; and an economic crisis.</p> <p>After a long period of austerity and the economic hit from the pandemic, the coming years will offer little respite for the public finances. For services already stretched before COVID-19 hit, the pandemic had created new challenges like its longer-term health impacts, backlogs of patients on waiting lists and lost learning in schools, colleges and universities. As they respond, there is expectation that public services will also address some of the big issues of inequality in our society. This must be done at a time when an emerging set of constitutional issues post-Brexit may complicate the response, especially to the economic challenges in Wales. Yet this daunting agenda is not without opportunity. The pandemic has demonstrated great strengths in the public service in Wales. The opportunity now is to build on the progress made in rapidly transforming the way services are provided during the pandemic to tackle the long-standing challenges that have pre-occupied Welsh public services for some time.</p> <p>In these circumstances, it is essential that public services get the most value out of the available resources. Value is not just about delivering more outputs more efficiently. Value for money is also about outcomes:</p>

	<p>making progress in improving the wellbeing of individuals and communities.</p> <p>The Committee RECEIVED and NOTED the Audit Wales Report.</p>
ARA/21/85	<p>AUDIT WALES REVIEW OF TAKING CARE OF THE CARERS?</p> <p>Anne Beegan presented the previously circulated report, which describes how NHS bodies have supported the wellbeing of their staff during the COVID-19 pandemic, with a particular focus on their arrangements for safeguarding staff at higher risk from COVID-19.</p> <p>Anne Beegan advised that the resilience and dedication shown by NHS staff at all levels in the face of the unprecedented challenges and pressures presented by the pandemic has been truly remarkable. It was inevitable, however, that this would have taken a considerable toll on the wellbeing of NHS staff, who now also face the challenges of dealing with the pent-up demand in the system caused by COVID-19. It was assuring to see that NHS bodies had maintained a clear focus on staff wellbeing throughout the pandemic and had implemented a wide range of measures to support the physical health and mental wellbeing of their staff during the crisis. It was vital that these activities were built upon and that staff wellbeing remained a central priority for NHS bodies as they dealt with the combined challenges of recovering services, continuing to respond to the COVID-19 pandemic, and managing seasonal pressures which are expected to be greater this winter than they were last year. Taking care of those who care for others was more important now than it has ever been before.</p> <p><i>What does transformation mean for this Health Board? Can you give an acknowledgement of prioritisation, the fact the funds will be limited?</i></p> <p>Anne Beegan explained that the report within the pack was a broader picture of public services but some points were referred to in the supplementary reports that sit underneath.</p> <p>The Committee RECEIVED and NOTED the Audit Wales Report.</p>
ARA/21/86	<p>COMMITTEE WORK PROGRAMME</p> <p>Rani Mallison presented the previously circulated report, which provided the Committee with its work programme for 2020-21.</p> <p>Rani Mallison advised that the work programme has been developed in-line with respective terms of reference, the Board's Assurance Framework and Corporate Risk Register. The work programme will be reviewed routinely at each meeting.</p> <p>The Committee RECEIVED and NOTED the Committee Work Programme 2021/22.</p>
ARA/21/87	<p>ITEMS TO BE BROUGHT TO THE ATTENTION OF THE BOARD AND OTHER COMMITTEES</p>

	<p>Rani Mallison explained that the risk management framework would be presented to the Board for approval.</p> <p>Rani Mallison also brought attention to matters that would be taken to other Committees including; the review of quality governance arrangements, medical devices and the midwifery safeguarding supervision would be presented to the Patient Experience, Quality and Safety Committee. Updates regarding the control of contracts would be taken to the Performance and Delivery Committee and the Taking Care of the Carers report will be taken to Workforce and Culture Committee.</p>
ARA/21/88	<p>ANY OTHER URGENT BUSINESS</p> <p>There was no other urgent business for discussion. The Chair declared the meeting closed at 11.35 am.</p>
ARA/21/89	<p>DATE OF NEXT MEETING</p> <p>20 January 2021, 10:00 am, Microsoft Teams</p>