

 <p> GIG CYMRU NHS WALES </p> <p> Iechyd Cyhoeddus Cymru Public Health Wales </p>	<p>Name of Meeting Audit and Corporate Governance Committee</p> <p>Date of Meeting 10 September 2024</p> <p>Agenda item: 10</p>
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<p>Audit and Corporate Governance Committee (ACGC) Quarterly Assurance Report NHS Wales Executive – For the period 1 April 2024 to 31 July 2024</p>	
<p>NHS Executive Director Leads:</p>	<p>Claire Green, National Director of Financial Planning & Delivery and Responsible Officer Iain Hardcastle, Acting National Director of Planning Dr Meinir Jones, Interim National Clinical Director</p>
<p>Author:</p>	<p>Rosemary Fletcher, Project Team, NHS Wales Executive</p>
<p>Approval/Scrutiny route:</p>	<p>Approval/scrutiny route for the NHS Wales Executive has been via the Senior Leadership Team (SLT).</p> <p>Draft received and considered at SLT weekly meeting on 6th August 2024.</p> <p>Report approved at the SLT Business Meeting on 8th August 2024</p>

<p>Purpose</p> <p>The purpose of this report is to provide a quarterly assurance report to the Audit and Corporate Governance Committee, on the relevant governance compliance areas as outlined in the NHS Executive Assurance Schedule.</p> <p>This report provides assurance on the following areas:</p> <p>For the period 1 April 2024 to 31 July 2024:</p> <ul style="list-style-type: none"> - Risk Management (Quarterly) - Audit Activity (Quarterly) - Counter Fraud Compliance (Quarterly) - Information Governance compliance (Quarterly)

For the period 1 April 2024 to 31 July 2024:

- **NHS Executive Agreements Register (Bi Annual)**
 - **Declarations of Interest Register (Bi Annual)**
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Recommendation:

APPROVE

CONSIDER

RECOMMEND

ADOPT

ASSURANCE

The Committee is asked to:

Risk Management (Quarterly)

- **Take assurance** that there is an effective risk management process within the NHS Executive.
- **Take assurance** that any risk identified by the NHS Executive in this report is relevant to Public Health Wales and has been appropriately escalated.

Audit Activity (Quarterly)

- **Note** that action has been initiated to clarify audit plans for 2024/25 for the NHS Executive.
- **Take assurance** that the management response for the Internal Audit Advisory Review on 'the management and governance of service arrangements within the Networks and Planning function' has been reported to Welsh Government for accountability, and that the NHS Executive is appropriately acting upon the matters raised in the Audit through the implementation of the management response.
- **Note** that two audit breaches are being reported to ACGC in September, one has been resolved and detail has been requested by the NHS Executive on the second.
- **Note** that no new audit activity has been initiated during the reporting period

Counter Fraud Compliance (Quarterly)

- **Note** that there has been no Counter Fraud activity reported to the NHS Executive.

Information Governance Compliance (Quarterly)

- **Take assurance** that the NHS Executive has complied with Public Health Wales Information Governance Policy and processes.
- **Note** one exception identified as a data breach and **take assurance** that the non-compliance has been reviewed and discussed with the Public Health Wales Information Governance lead, and appropriate action taken.
- **Take assurance that** any non-compliance which represents a regulatory risk to Public Health Wales is being appropriately managed.

NHS Executive Agreements Register (Bi Annual)

- **Take assurance** that action is being taken by the NHS Executive to collate a register of joint working agreements, and which will be maintained, in line with the Joint Working Framework requirements.

Declarations of Interest (Bi Annual)

- **Take assurance** that the NHS Executive maintains a register of declarations of interests of relevant senior roles in accordance with the Public Health Standards of Behaviour Policy.

Link to Public Health Wales [Strategic Plan](#)

Public Health Wales is the Host Organisation for the NHS Wales Executive ('the Hosted Unit'). The *Hosting Agreement ('the Agreement')* between Public Health Wales (PHW) NHS Trust and The Welsh Ministers was approved by the PHW Board on 26th January 2023 and took effect from the launch of the NHS Wales Executive on 1st April 2023.

The Agreement remains extant and, to take account of variations to the Agreement, an Addendum was approved by the PHW Board on 28th March 2024.

Public Health Wales is not responsible or accountable for setting the direction for, or the work programme of, the Hosted Unit or for the delivery/quality or management of work undertaken by the Hosted Unit on behalf of Welsh Government.

Summary impact analysis

Equality and Health Impact Assessment	A specific Equality and Health Impact Assessment (EHIA) is not required to support this report.
Risk and Assurance	This report provides assurance on the implementation of the relevant policy and procedures within the NHS Wales Executive, ensuring good governance is maintained.
Health and Social Care (Quality and Engagement) (Wales) Act	This paper supports the Quality themes.
Financial implications	There are no financial implications as a result of this report.
People implications	There are no people implications as a result of this report.

1. Purpose / situation

The purpose of this report is to provide a quarterly assurance report to the Audit and Corporate Governance Committee, on the relevant governance compliance areas as outlined in the NHS Executive Assurance Map.

This report covers the period 1 April 2024 to 31 July 2024 and provides assurance on the following areas:

For the period 1 April 2024 to 31 July 2024:

- **Risk Management (Quarterly)**
- **Audit Activity (Quarterly)**
- **Counter Fraud Compliance (Quarterly)**
- **Information Governance compliance (Quarterly)**

For the period 1 April 2024 to 31 July 2024:

- **NHS Executive Agreements Register (Bi Annual)**
- **Declarations of Interest Register (Bi Annual)**

The sections below provide a summary of the current status for the areas listed above.

2. Risk Management

In line with the NHS Executive Assurance Map, the NHS Executive is required to report to the Committee on a quarterly basis for assurance on the risk management arrangements in place.

Risk registers are maintained by each of the Directorates in the NHS Wales Executive and a corporate risk register is also maintained. The full suite of risk registers is routinely reported to the SLT Business Meeting on a quarterly basis, which is chaired by the Deputy Chief Executive, NHS Wales.

Within the corporate risk register, as reported to the SLT Business Meeting in June 2024, and of relevance to PHW as the host organisation, is a risk relating to *'If there is a lack of common, clear and consistent governance processes, capacity and capability in the NHS Executive to support effective operational management and accountability then there will be weak internal control resulting in governance failings and non-compliance with statutory and regulatory requirements impacting on PHW as the host body and WG as the sponsor'*. This risk is being mitigated through interim corporate leadership/management arrangements and steps are being taken to recruit a permanent corporate services lead and a central support team. The PHW CEO and other PHW senior colleagues have been briefed through hosting liaison meetings with the Deputy CEO NHS Wales and the Responsible Officer for the NHS Executive. A corporate services review has been undertaken and recommendations are being overseen by a subgroup of the SLT.

Steps are being taken with PHW to implement DATIX within the NHS Executive. Once the hierarchy is populated and training has been provided, DATIX will be used to record and manage risk within the NHS Executive.

3. Audit Activity

In line with the NHS Executive Assurance Schedule, the NHS Executive is required to report to the Committee on a quarterly basis for assurance on the Audit arrangements in place.

An Internal Audit Advisory Review was completed in April 2024 on *'the management and governance of service arrangements within the Networks and Planning function in the NHS Wales Executive'*

- A representative of the NHS Wales Executive attended ACGC on 9th May to present the management response
- The Advisory Report and management response were reported to the NHS Executive Business meeting in May 2024 and have been shared with the Deputy CEO, NHS Wales and Director of Strategic Planning (Health Social Care and Early Years Group), Welsh Government) who are supportive of the management action plan
- Progress against the action plan will be reported through the Networks and Planning Senior Management Team and through to the NHS Executive Senior Leadership Team
- All actions will be delivered by no later than September 2024

- Representatives of the NHS Executive are due to be in attendance at the ACG Committee meeting to provide an update on progress against the action plan

Two audit breaches are being reported to ACGC in September, one has been resolved and detail has been requested by the NHS Executive on the second.

No new audit activity has been initiated during the reporting period.

The NHS Wales Executive will engage fully in all audit work where required to do so and as outlined in audit plans determined by NHS or Welsh Government Internal Audit or at the explicit involvement of the Auditor General. At the time of preparing this report, the NHS Wales Executive has not received confirmation of audit plans for 2024/25, however this is being followed up with PHW and Internal Audit colleagues, and clarification will follow through a paper to be prepared by Internal Audit.

4. Counter Fraud Compliance

In line with the NHS Executive Assurance Map, the NHS Executive is required to report to the Committee on a quarterly basis for assurance on the NHS Executives response to any Counter Fraud Activity.

There has been no counter fraud activity reported to the NHS Executive during the reporting period.

5. Information Governance compliance

In line with the NHS Executive Assurance Schedule, the NHS Executive is required to report to the Committee on a quarterly basis for assurance on the NHS Executive's compliance with the Public Health Wales Information Governance Policy.

For/during the reporting period:

- The NHS Wales Executive confirmed that the roles of Deputy Caldicott Guardian and Deputy Senior Information Risk Officer (SIRO) have been designated respectively to the Interim National Clinical Director and Deputy Director Data & Analytics. The requirements for these deputy roles, as set out in documents prepared by PHW, have been discussed between PHW and NHS Executive leads.
- The importance of training to ensure the deputy roles can be effectively discharged is acknowledged, and training has been arranged for the Interim National Clinical Director for August 2024 and for the Deputy Director Data & Analytics on 12th September.
- The Interim National Clinical Director will meet quarterly with the PHW Caldicott Guardian and other designated Deputy Caldicott Guardians.
- The draft hosting schedule for Quality, Nursing and AHPs (QNAHPs) was

prepared by PHW and incorporates detail on information governance. The draft QNAHPS schedule was received by SLT at its business meeting in June 2024. Following liaison with the relevant lead SLT Directors, feedback on the schedule has been provided to PHW. This revised version was reported to the SLT business meeting on 8th August and supported.

- A data breach was identified, and the NHS Executive worked with the PHW information governance team to ensure it was investigated and reported appropriately. Action is planned to provide a communication to all staff to demonstrate lessons learned.
- The NHS Executive has an Information Asset Register, in the format recommended by PHW, and this is available to view on request.
- The new procedures within PHW for information asset management and data protection impact assessments are acknowledged and the training dates shared with SLT for relevant NHS Executive staff to attend.
- Staff are made aware of the hosting relationship on transfer into the NHS Executive (i.e. Phase 2 transfer effective from 1st April 2024) or on induction for new recruits. Staff are advised that they are required to work within relevant PHW policies. In June, a two-day induction programme was provided to staff of the newly established strategic clinical networks. PHW colleagues supported and provided input and a session on Information Governance was delivered by the PHW Head of Information Governance.
- The NHS Wales Executive worked with PHW colleagues to agree the approach to managing and responding to FOI requests (set out in a flow-chart), in accordance with FOI policies and procedures. A register of FOIs is maintained.
- The opportunity was taken to remind all NHS Wales Executive staff of the importance of a professional approach in all communication. With the support of PHW colleagues, an article was prepared and included in the monthly NHS Executive staff newsletter (June 2024) to raise awareness of Freedom of Information (FOI) requests and Subject Access Requests (SAR), and to signpost to relevant guidance documents.
- Staff are required to complete and maintain statutory and mandatory training and, in respect of information governance, compliance as at 3rd July 2024 was:

Competence Name	Assignment Count	Required	Achieved	Compliance %
NHS CSTF Information Governance (Wales) - 2 Years	416	416	386	92.79%

6. NHS Executive Agreements Register

In line with the NHS Executive Assurance Schedule, the NHS Executive is required to report to the Committee on a Bi-Annual basis for assurance that the NHS Executive maintains a register of joint working agreements in line with the Joint Working Framework.

An Agreements Register is being prepared and this is being overseen by the interim National Director of Planning.

7. Declarations of Interest

In line with the NHS Executive Assurance Schedule, the NHS Executive is required to report to the Committee on a Bi-Annual basis for assurance that the NHS Executive maintains a register Declarations of Interest in line with the Standards of Behaviour Policy.

In accordance with the Hosting Agreement and PHW's policy, on an annual basis as a minimum, staff are contacted with an explanation of the requirements for Declarations of Interest and a request to complete the standard Declaration of Interest form, where applicable. The annual review was completed in March 2024 and a further review has been conducted as a reminder of the requirement and the register is being updated as necessary. New staff are made aware of the policy through induction.

A copy of the Declarations of Interest Register for the NHS Executive as at August 2024 will be provided to the Board Secretary in support of this report.

8. Conclusion

The report provides assurance to the Committee that the NHS Executive is meeting the requirements for each of the area reports or actions are in progress, where identified.

The Committee is asked to note that:

- Action has been initiated to clarify with PHW and Internal Audit audit plans for 2024/25 for the NHS Executive
- Two audit breaches are being reported to ACGC in September, one has been resolved and detail has been requested by the NHS Executive on the second
- Steps are being taken with PHW to implement DATIX within the NHS Executive. Once the hierarchy is populated and training has been provided, DATIX will be used to record and manage risk within the NHS Executive
- Action is planned to provide a communication to staff to demonstrate lessons learned from a data breach
- An Agreements Register is being prepared.

9. Recommendation

The Audit and Corporate Governance Committee is asked to:

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