



**GIG**  
CYMRU  
**NHS**  
WALES

Iechyd Cyhoeddus  
Cymru  
Public Health  
Wales

**Name of Meeting**  
Audit and Corporate Governance Committee  
**Date of Meeting**  
14 January 2025  
**Agenda item:**  
10

## Audit and Corporate Governance Committee Assurance Report

### NHS Wales Executive – For period 1 August 2024 to 30 November 2024

<b>NHS Executive Director Leads:</b>	Claire Green, National Director of Financial Planning & Delivery and Responsible Officer Iain Hardcastle, Interim National Director of Networks and Planning Dr Meinir Jones, Interim National Clinical Director
<b>Author:</b>	Rosemary Fletcher, Project Team, NHS Wales Executive
<b>Approval/Scrutiny route:</b>	Approval/scrutiny route for the NHS Wales Executive is via the Senior Leadership Team (SLT).  Report presented for approval at the SLT Business Meeting on 18 December 2024.  Report presented to Audit and Corporate Governance Committee 14 January 2025

#### **Purpose**

The purpose of this report is to provide an assurance report to the Audit and Corporate Governance Committee (ACGC), on the relevant governance compliance areas as outlined in the NHS Executive Hosting Assurance Schedule.

This report provides assurance on the following areas:

For the period 1 August 2024 to 30 November 2024:

- **Risk management**
- **Audit activity**
- **Counter fraud compliance**
- **Information governance compliance**

Recommendation:				
APPROVE	CONSIDER	RECOMMEND	ADOPT	ASSURANCE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

The Committee is asked to:

#### Risk Management

- **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

- **Note** that the approach for audit for 2024/25 for the NHS Executive is being reported separately.
- **Note** that no new audit activity has been initiated during the reporting period.

#### Counter Fraud Compliance

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

#### Information Governance Compliance

- **Take assurance** that the NHS Executive has complied with Public Health Wales Information Governance Policy and processes.
- **Take assurance that** any non-compliance which represents a regulatory risk to Public Health Wales is being appropriately managed.

#### 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 26<sup>th</sup> January 2023 and took effect from the launch of the NHS Wales Executive on 1<sup>st</sup> April 2023.

The Agreement remains extant and, to take account of variations to the Agreement, an Addendum was approved by the PHW Board on 28<sup>th</sup> 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	
<b>Equality and Health Impact Assessment</b>	A specific Equality and Health Impact Assessment (EHIA) is not required to support this report.
<b>Risk and Assurance</b>	This report provides assurance on the implementation of the relevant policy and procedures within the NHS Wales Executive, ensuring good governance is maintained.

<b>Health and Social Care (Quality and Engagement) (Wales) Act</b>	This paper supports the Quality themes.
<b>Financial implications</b>	There are no financial implications as a result of this report.
<b>People implications</b>	There are no people implications as a result of this report.

## 1. Purpose / situation

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

This report covers the period 1 August 2024 to 30 November 2024 and provides assurance on the following areas:

For the period 1 August 2024 to 30 November 2024:

- **Risk management**
- **Audit activity**
- **Counter fraud compliance**
- **Information governance compliance**

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

## 2. Risk Management

The NHS Executive is required to report to the Committee for assurance on the risk management arrangements in place, in line with the NHS Executive Hosting Assurance Schedule.

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 in November 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. A governance and accountability framework is in place, which takes account of the NHS Executive's hybrid governance model. An appointment has been made to a new, permanent post of Assistant Director of Corporate Governance and Business Support, who will take up post in January 2025. Work is in progress to design the structure for a central support team, drawing on information gathered through the corporate services review.

Steps are being taken with PHW to implement DATIX for risk management within the NHS Executive. A briefing/presentation was provided to the SLT by the PHW Head of Risk Management on 5<sup>th</sup> November. Nominated staff are attending Level 1 and Level 2 training. Dedicated Level 2 training sessions are being provided from November through to January 2025.

## 3. Audit Activity

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

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 9<sup>th</sup> 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 has been reported through the Networks and Planning Senior Management Team and through to the NHS Executive Senior Leadership Team.
- Specific finance training for the Networks has been undertaken through induction meetings. Specialist finance training will be delivered with the support of the PHW Finance team across the wider NHS Executive.
- All other actions in the action plan have now been delivered.

Four audit breaches are being reported to Committee in January, based on the reporting period 1<sup>st</sup> August to 30<sup>th</sup> November 2024. For two of the four breaches parties involved have been informed, and the other two breaches are under review. Learning and management actions will be identified.

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. It was confirmed with the Committee in September 2024 that audit plans for the NHS Wales Executive would be prepared as an addendum to the PHW annual audit plan. In November 2024, a draft document was received from Internal Audit colleagues. This proposes audits will fall into three categories:

- Audits in the PHW's audit plan that include or relate to the NHS Executive
- Audits agreed directly with the NHS Executive
- Audits undertaken as part of NWSSP's Internal Audit plan that will include testing of the NHS Executive

Feedback has been provided to NWSSP Internal Audit on the draft audit document. The approach for audit for the NHS Wales Executive will be reported separately by NWSSP Internal Audit to the Committee for approval.

#### **4. Counter Fraud Compliance**

In line with the NHS Executive Hosting Assurance Schedule, the NHS Executive is required to report to the Committee on a quarterly basis for assurance on the NHS Executive's 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**

The NHS Executive is required to report to the Committee for assurance on its compliance with the Public Health Wales Information Governance Policy, in line with the NHS Executive Hosting Assurance Schedule.

For/during the reporting period:

- As confirmed in the previous report to ACGC, the roles of Deputy Caldicott Guardian and Deputy Senior Information Risk Officer (SIRO) within the NHS Executive have been designated respectively to the Interim National Clinical Director and Deputy Director Data & Analytics. These colleagues have regular meetings with PHW to ensure consistency of approach and for any issues to be raised.
- The NHS Executive has an Information Asset Register, in the format recommended by PHW, and this is available via [Information Asset Register](#). Information Asset Owners will continue to review for accuracy and completeness.
- The new procedures within PHW for information asset management and data protection impact assessments are acknowledged and additional training dates shared with the 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 complete with the inclusion of TEC Cymru on 1<sup>st</sup> September 2024) or on induction for new recruits. Staff are advised that they are required to work within relevant PHW policies.
- Staff are required to complete and maintain statutory and mandatory training and, in respect of information governance, compliance as of 4<sup>th</sup> November 2024 was:

Competence Name	Assignment Count	Required	Achieved	Compliance %
Information Governance (Wales) - 2 Years	457	457	407	89.06%

## 6. Conclusion

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

The Committee is asked to note that:

- The approach for audit for 2024/25 for the NHS Executive is subject to a separate report to Committee
- Work is continuing with PHW to implement DATIX for risk management within the NHS Executive.

## 7. Recommendation

The Audit and Corporate Governance Committee is asked to:

### **Risk Management**

- **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**

- **Note** that the approach for audit for 2024/25 for the NHS Executive is being reported separately.
- **Note** that no new audit activity has been initiated during the reporting period

### **Counter Fraud Compliance**

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

### **Information Governance Compliance**

- **Take assurance** that the NHS Executive has complied with Public Health Wales Information Governance Policy and processes.
- **Take assurance that** any non-compliance which represents a regulatory risk to Public Health Wales is being appropriately managed.