

Structured Assessment 2024 – Aneurin Bevan University Health Board

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Summary report

About this report

- 1 This report sets out the findings from the Auditor General's 2024 structured assessment work at Aneurin Bevan University Health Board. Our structured assessment work is designed to help discharge the Auditor General's statutory requirement under section 61 of the Public Audit (Wales) Act 2004 to be satisfied that NHS bodies have made proper arrangements to secure economy, efficiency, and effectiveness in their use of resources. Our review of the Health Board's corporate approach to setting new well-being objectives in accordance with the sustainable development principle was undertaken to help discharge the Auditor General's duties under section 15 of the Well-being of Future Generations (Wales) Act 2015.
- Our 2024 Structured Assessment work took place at a time when NHS bodies were continuing to respond to a broader set of challenges associated with the cost-of-living crisis, the climate emergency, inflationary pressures on public finances, workforce shortages, and an ageing estate. In addition, NHS bodies are still dealing with the legacy of the COVID-19 pandemic. More than ever, therefore, NHS bodies and their Boards need to have sound corporate governance arrangements that can provide assurance to themselves, the public, and key stakeholders that the necessary action is being taken to deliver high-quality, safe and responsive services, and that public money is being spent wisely.
- 3 The key focus of the work has been on the Health Board's corporate arrangements for ensuring that resources are used efficiently, effectively, and economically, with a specific focus on:
 - corporate approach to planning;
 - corporate approach to financial management;
 - board transparency, cohesion, and effectiveness; and
 - corporate systems of assurance.

We have not reviewed the Health Board's operational arrangements as part of this work.

- 4 Our work has been informed by our previous structured assessment work, which has been developed and refined over a number of years. It has also been informed by:
 - model Standing Orders, Reservation and Delegation of Powers
 - model Standing Financial Instructions
 - relevant Welsh Government health circulars and guidance
 - the Good Governance Guide for NHS Wales Boards (Second Edition)
 - other relevant good practice guides

We undertook our work between June 2024 and September 2024. The methods we used to deliver our work are summarised in **Appendix 1**. Our work was

conducted in accordance with the auditing standards set by the International Organization of Supreme Audit Institutions.

5 We also provide an update in this report on the Health Board's progress in addressing outstanding recommendations identified in previous structured assessment reports in **Appendix 2**.

Key findings

- 6 Overall, we found that the Health Board's Board and committee governance arrangements are stable and generally effective. However, given its financial and performance challenges, the Health Board's development of a new longterm strategy and delivery of its three-year route map are crucial to enabling the organisation to transform services to meet current and future demand.
 - we considered whether the Health Board has a sound corporate approach to producing strategies and corporate plans and overseeing their delivery. We found that the Health Board's approach for developing and delivering strategic plans is not yet enabling it to deliver sustainable services that meet demand. It is imperative that its ongoing long-term strategy development provides the basis and ambition for planning and transforming services that meet current and future needs.
 - we considered whether the Health Board has a sound corporate approach to managing its financial resources. We found that the Health Board is improving its financial controls and has a stronger focus on value and savings delivery. However, its significant ongoing financial challenges suggest that it needs a longer-term and more detailed financial strategy aligned to sustainable care models.
 - we considered whether the Health Board's Board conducts its business appropriately, effectively, and transparently. We found that despite reasonably effective Board and committee arrangements, the Health Board should increase the frequency of the finance and performance committees' meetings to enable more detailed scrutiny and oversight, increase the number of patient safety leadership walkrounds and improve committee chairs' reporting to Board.
 - we considered whether the Health Board has a sound corporate approach to managing risks, performance, and the quality and safety of services. We found that while the Health Board is strengthening its assurance arrangements and its performance management approach is improving, further work is needed.

Recommendations

7 **Exhibit 1** details the recommendations arising from our work. The Health Board's response to our recommendations is summarised in **Appendix 3**.

Exhibit 1: 2024 recommendations

Recommendations

- R1 As part of its ongoing long-term strategy and clinical services plan development, the Health Board should:
 - R1.1 Ensure the organisation's new long-term strategy and clinical services plan clearly defines the required sustainable service solutions and decisions for the medium to longer term. This should include a strong focus on population health and prevention. (Paragraph 14)
 - R1.2 Ensure there is comprehensive engagement with clinical and other staff across all domains of the organisations service provision to feed into the development of the clinical services plan.
 (Paragraph 15)
 - R1.3 Publish well-being objectives either alongside or within its new long-term strategy and ensure Well-being of Future Generations (2015) Act requirements are an integral part of the strategy. (Paragraph 16)
- R2 To enable more effective scrutiny of delivery of corporate plans and strategies, the Health Board should ensure that progress reports are clear and contain performance targets and comparative benchmarks, where possible. Reports should also contain clear progress against established milestones to aid scrutiny of progress. (**Paragraph 28**)
- R3 To become financially sustainable in the longer-term, the Health Board should develop a detailed longer-term financial plan that is linked to the new long term strategy currently in development and three-year route-map and ensure progress against delivery is monitored appropriately. (**Paragraph 39**)
- R4 The Health Board should strengthen its oversight of Standing Financial Instruction and Single Tender Actions by:

Rec	Recommendations				
	R4.1 introducing a self-assessment on Standing Financial Instruction compliance; (Paragraph 43) and				
	R4.2	ensuring Single Tender Action reports include total contract values, setting out whether Board or Welsh Government approval was needed, and provide trend analysis of numbers and total values of Single Tender Actions for comparative periods in previous years. (Paragraph 43)			
R5	Board s	ble deeper scrutiny of operational finance and performance the Health should increase the frequency of the finance and performance ttee meetings. (Paragraph 48)			
R6	The Health Board should ensure there is effective separation of responsibilities between the role of the Health Board Chair and the Chair of the Partnerships, Population Health and Planning Committee. The Health Board should seek to appoint a separate committee chair from the wider cohort of independent members. (Paragraph 64) .				
R7	for the	ealth Board needs to allow sufficient time on Board meeting agendas committee chairs to report assurance to the Board and escalate any ns. (Paragraph 67)			
R8	strategi	ealth Board should ensure there is a clear approach that links the ic risks in its risk register to the strategic objectives in its annual plan. raph 86)			
R9	commu	ealth Board should ensure there is a stronger focus on primary and inity care performance within its Integrated Performance reports. raph 95)			

Detailed report

Corporate approach to planning

- 8 We considered whether the Health Board has a sound corporate approach to producing strategies and corporate plans and overseeing their delivery.
- 9 We found that the Health Board's approach to developing and delivering strategic plans is reasonably effective. However, the approach is not yet enabling it to deliver sustainable services that meet demand. As a result, it is imperative that its ongoing long-term strategy development provides the basis and ambition for planning and transforming services that meet current and future needs.

Corporate approach to producing strategies and plans

- 10 We considered whether the Health Board has a sound corporate approach to producing, overseeing, and scrutinising the development of strategies and corporate plans. We were specifically looking for evidence of:
 - a clear Board approved vision, appropriate objectives and a long-term strategy in place which are future-focussed, rooted in population health, and informed by a detailed and comprehensive analysis of needs, opportunities, challenges, and risks;
 - the long-term strategy underpinned by an appropriate Board approved longterm clinical strategy;
 - appropriate and effective corporate arrangements in place for developing and producing the Integrated Medium-Term Plan (IMTP), and other corporate plans; and
 - the Board appropriately scrutinising the IMTP and other corporate plans prior to their approval.
- 11 We found that the Health Board has generally effective arrangements for developing strategic plans built on good engagement. Developing a new long-term strategy is a clear priority for the Health Board. However, it needs to ensure clinical services plans are developed in consultation with all relevant stakeholders and fully reflects the changes needed to further deliver sustainable clinical service models.
- 12 The Health Board's Clinical Futures Strategy, its long-term organisational strategy, has been extant for more than a decade. However, the Health Board is now working in a more challenging environment and dealing with the legacy of the COVID-19 pandemic, increasing demand, and greater financial pressures. It is also seeing increasing oversight by Welsh Government following the recent change to its escalation status¹. Although the Health Board's extant Clinical Futures Strategy

¹ Targeted Intervention (Level 4) for finance, strategy and planning, and Enhanced Monitoring (Level 3) for urgent and emergency care at the Grange University Hospital.

has helped guide service sustainable developments and supporting infrastructure, it needs to be updated to enable the organisation to sustainably meet population health needs and address the current challenges it faces. A symptom of this is reflected in the performance and financial challenges the Health Board is currently facing.

- As a result, the Health Board is currently developing a new long-term strategy that will focus on population health, community-based services, and providing sustainable acute services. There is a clear timeline and governance arrangements in place for the strategy development, which the Board agreed in September 2023. The Health Board is also focussing on its replacement clinical futures strategy and at the time of our work implementing its enhanced Local General hospital (ELGH) reconfiguration programme.
- 14 The Health Board aimed to publish the long-term strategy in September 2024 but has since revised this to January 2025. Despite this, the Health Board's timetable remains ambitious especially considering the need for it to fully consider the changes needed to create sustainable clinical service models. Immediate pressures relate to service performance and finance, which require improvements in the acute setting and stronger cost control. However, longer-term population health challenges and the expected aging patient demographic are likely to require a far greater focus on health and prevention, targeting inequalities, as well as an increased focus on integrated community services. The Health Board, therefore, will need to ensure its long-term strategy clearly defines the required changes and sustainable service solutions that are needed in both the medium- and longer-term whilst maintaining adequate focus on addressing immediate performance and financial challenges. **(Recommendation 1.1)**
- 15 The Health Board is actively engaging with the community to inform its new strategy. Its approach 'A Conversation for a Healthy Future' focusses on the single question of "What's important to feel healthy?" Whilst its community focussed strategy engagement is positive, the Health Board also needs to ensure sufficient and full engagement with clinical and administrative staff across the organisation as part of its clinical strategy development. (Recommendation 1.2)
- 16 The Health Board also needs to take the opportunity presented through the development of its new long-term strategy to more fully integrate the requirements of the Well-being of Future Generations (Wales) Act 2015 across the organisation and set well-being objectives (**Recommendation 1.3**). We discuss this in more detail in the following section.
- 17 The Health Board is working to an Annual Plan for 2024-25 as it was unable to submit to Welsh Government an approvable, financially balanced Integrated Medium-Term Plan for 2024-27. Its 2024-25 Annual Plan continues to build on the

Health Board's 'life course approach'², setting out outcomes and measures to achieve them. While the actions in the plan are reasonably clear for the current 12-month period, there is less clarity on its proposed actions beyond this. We also understand that the Health Board received some challenge from Welsh Government on the draft plan this year requiring it, for example, to demonstrate greater ambition for improvement and service recovery.

18 The Health Board continues to demonstrate a good approach to engaging with both internal and external stakeholders in the development of the Annual Plan. It routinely shares draft strategies/plans with Independent Members supported by discussion, where needed, at Board Development sessions before formal approval at public Board meetings.

Corporate approach to setting well-being objectives

- 19 We considered whether the Health Board has a sound corporate approach to setting its well-being objectives in accordance with the sustainable development principle³. We were specifically looking for evidence of:
 - appropriate arrangements in place for setting well-being objectives which are underpinned by the sustainable development principle;
 - appropriate consideration given to how the organisation will ensure delivery of its well-being objectives; and
 - appropriate arrangements in place to monitor progress and improve how the organisation applies the sustainable development principle.
- 20 We found that while the Health Board works well with partners to assess and understand population needs, it needs to review its well-being objectives and ensure their delivery features more explicitly in corporate plans.
- 21 During 2023-24, the Health Board worked with its partners on the Gwent Public Service Board to use the Gwent Well-being Assessment to inform the development of a regional <u>well-being plan</u>. This plan, which covers the period 2023-28, includes broad strategic aims and steps to improve population well-being in the region, including improving the availability and quality of housing, tackling the impact of the cost of living, addressing climate change, and improving health and well-being.
- 22 The Health Board has also worked collaboratively with partners to develop the 2023 <u>Gwent Joint Strategic Assessment</u>. This provides an evidence base to inform Health Board planning and priority setting. The Gwent partners have also adopted

² The Health Board has defined five life course goals which focus on what matters to individuals and what will improve their healthy life expectancy, from giving every child the best start in life, to dying well as part of life.

³ Under The Well-being of Future Generations (Wales) Act 2015, the Health Board is required to set and publish well-being objectives that are designed to maximise its contribution to achieving each of the well-being goals.

the 'Marmot' principles⁴, which align well to many of the Well-being of Future Generation (Wales) Act 2015 requirements.

23 While the Health Board is working in partnership focussing on population wellbeing and its 'life-course' approach, it is also required to be clear as an organisation on its well-being objectives and review and publish these periodically. The Health Board last formally published its well-being objectives and well-being statement in 2017-18. As mentioned previously, it now needs to take the opportunity presented by the long-term strategy development to review these (see **Recommendation 1.3**).

Corporate approach to overseeing the delivery of strategies and plans

- 24 We considered whether the Health Board has a sound corporate approach to overseeing and scrutinising the implementation and delivery of corporate plans. We were specifically looking for evidence of:
 - corporate plans, including the IMTP, containing clear strategic priorities/objectives and SMART⁵ milestones, targets, and outcomes that aid monitoring and reporting; and
 - the Board appropriately monitoring the implementation and delivery of corporate plans, including the IMTP.
- 25 We found that corporate plans are in the main supported by SMART actions; however, some progress reports can be overly narrative and lack clarity on progress and outcomes.
- 26 The Health Board's corporate plans and strategies include clear objectives and measurable outcomes. This is the case both for its current Annual Plan and Quality Strategy, which we reviewed. Both contain appropriate information about priorities, supporting actions, milestones for delivery and intended outcomes.
- 27 Our 2023 Structured Assessment recommended the Health Board strengthen its IMTP/Annual Plan progress report. The Health Board has improved its approach to reporting by using its quarterly progress report to track progress in delivering its plan priorities and milestones, as well as ministerial priorities. There is a clear summary of progress with an assessment of whether actions are off track and what steps are being taken to address any performance concerns (see **Appendix 2 Structured Assessment 2023 R7**).
- 28 However, the Health Board needs to ensure that reporting on the progress of other strategies and plans is fit for purpose. For example, the Quality Strategy quarterly

⁴ The 'Marmot' principles recognises that health and health inequalities are mostly shaped by social determinants, i.e. the environment in which people live and their lifestyles.

⁵ Specific, measurable, achievable, relevant, and time-bound

report which was last presented in September 2024 was long and the presentation was difficult to read. This report also lacked detail on performance targets and comparative benchmarks which would aid readers in identifying areas of concern. We have seen similar issues in the July 2024 People Strategy update. While setting out progress made over the past 12 months, it was again was very narrative based which made it difficult to establish progress and outcomes against the set milestones. (**Recommendation 2**)

Corporate approach to managing financial resources

- 29 We considered whether the Health Board has a sound corporate approach to managing its financial resources.
- 30 We found that the Health Board is improving its financial controls and has a stronger focus on value and savings delivery. However, its significant ongoing financial challenges suggest that it needs a longer-term and detailed financial strategy aligned to sustainable care models.

Financial objectives

- 31 We considered whether the Health Board has a sound corporate approach to meeting its key financial objectives. We were specifically looking for evidence of:
 - the organisation meeting its financial objectives and duties for 2023-24, and the rolling three-year period of 2021-22 to 2023-24; and
 - the organisation being on course to meet its objectives and duties in 2024-25.
- 32 We found that despite additional funding from Welsh Government, the Health Board did not meet its key financial objectives and duties for 2023-24. Furthermore, it will be challenging to achieve its key financial targets for 2022-25.
- 33 The Health Board did not meet its financial objectives and duties for 2023-24. The original Financial Plan for 2023-24 forecasted an in-year deficit of £112.8 million. However, it received £88.3 million of extra funding from Welsh Government in November 2023⁶. As a result, it closed the 2023-24 year with a deficit of £49.7 million, thus failing to meet its deficit control total of £13 million and breaching its duty to break even over the three-year rolling period 2021-22 to 2023-24. The Health Board did, however, have a small underspend on its capital resource limit.
- 34 The Health Board's current and forecast financial position for 2024-25 is challenging. Concerns about the financial position contributed to the Welsh

⁶ Written Statement: LHB Allocations and Target Control Totals

Government's decision to escalate the Health Board to targeted intervention⁷ in February 2024. As a result of the 2023-24 year-end position and ongoing underlying deficit, the Health Board was unable to submit a balanced Financial Plan for 2024-2027. Instead, it is working to an Annual Plan deficit of £48.9 million for 2024-25, which the Board set at the beginning of the financial year. The Health Board was showing a slight improvement in its forecasted year end position at Month 5 2023-24 (£47.8 million deficit). However, this has improved further. In December 2024, the Welsh Government made an in-year recurrent £9.5 million allocation and a conditionally recurrent £31 million allocation to the Health Board. The conditions for gaining the £31 million allocation recurrently include meeting the revised control total, ensuring a financially balanced IMTP and securing improvements in planned care and regional working. Based on the additional allocation, the revised year end position is expected to be a forecast deficit of £7.3 million, which is also the Health Board's new revised Target Control Total for the 2024-25 financial year.

Corporate approach to financial planning

- 35 We considered whether the Health Board has a sound corporate approach to overseeing and scrutinising financial planning. We were specifically looking for evidence of:
 - clear and robust corporate financial planning arrangements in place;
 - the Board appropriately scrutinising financial plans prior to their approval;
 - sustainable, realistic, and accurately costed savings and cost improvement plans in place which are designed to support financial sustainability and service transformation; and
 - the Board appropriately scrutinising savings and cost improvement plans prior to their approval.
- 36 We found that while there is improving engagement and oversight of financial planning, there is a clear need to develop a more detailed longer-term financial recovery plan linked to the emerging long-term strategy and threeyear financial route-map.
- 37 The Health Board has improving arrangements for Board and committee oversight of financial planning. Board members recognise the financial challenges facing the organisation, which include the operational pressures and external factors driving significant growth in costs. This year's Financial Plan was developed with good engagement from Board members through a series of Board briefings and Board Development Sessions.
- 38 The Health Board delivered a significant savings programme in 2023-24, achieving savings of £43 million, the highest level for the Health Board since its inception,

⁷ <u>https://www.gov.wales/nhs-wales-escalation-and-intervention-arrangements</u>

and the highest in Wales. Savings plans for 2024-25 remain ambitious but will be challenging to deliver in full. The Health Board has strengthened its structures and resources to support divisional savings delivery and there is stronger accountability and shared ownership for savings led by the bi-weekly Value and Sustainability Board. An Executive Director leads each theme supported by a programme board for most areas. As at Month 4 2024-25, the Health Board was planning to achieve £42.2 million in savings against a target of £40.5 million. Whilst it was making good progress in 'de-risking' the saving schemes (i.e. ensuring actions are taken to make savings realistically deliverable), it had only delivered £9.9 million of actual savings, leaving a challenging delivery target for the remainder of the year.

39 Despite the progress with savings arrangements, a savings focussed approach is unlikely to lead to longer-term financial sustainability. Indeed, our 2024 Review of Cost Savings Arrangements found that the Health Board needs to develop a longer-term financial plan focused on achieving recurrent savings from transformational service change. The Health Board, therefore, needs to develop a detailed longer-term financial plan linked to its long-term strategy and sustainable service models. The Health Board has started this process and is moving in the right direction with the three- year route-map to financial sustainability, which was approved by Board in July 2024. This sets out strategic service priorities and the financial aims and assumptions of the Health Board. The three-year route-map links to changes and efficiencies required though service and estate reconfiguration, workforce redesign and productive working. It places increasing and substantial reliance on truly recurring cashable efficiencies, but there needs to be greater clarity to indicate how the Health Board will achieve this (Recommendation 3). There also needs to be consideration of health cost inflation associated with continued growing and changing service demand.

Corporate approach to financial management

- 40 We considered whether the Health Board has a sound corporate approach to overseeing and scrutinising financial management. We were specifically looking for evidence of:
 - effective controls in place that ensure compliance with Standing Financial Instructions and Schemes of Reservation and Delegation;
 - the Board maintaining appropriate oversight of arrangements and performance relating to single tender actions, special payments, losses, and counter-fraud;
 - effective financial management arrangements in place which enable the Board to understand cost drivers and how they impact on the delivery of strategic objectives; and
 - the organisation's financial statements for 2023-24 were submitted on time, contained no material misstatements, and received a clean audit opinion.

- 41 We found that **the Health Board has a generally good approach to overseeing and scrutinising financial management.**
- 42 The Board reviews Standing Orders and Standing Financial Instructions frequently, the last time being September 2024. Following a review of delegated limits across Wales, the Board approved a revision to the Scheme of Delegation in September 2024 which raised the general financial limits. It remains responsible for the approval of business cases valued over £1 million. However, the Health Board is yet to ensure clear delegated responsibility for the achievement of financial savings below executive levels in the Scheme of Delegation (see **Appendix 2 Structured Assessment 2022 R7**).
- 43 The Board delegates financial oversight to the Audit, Risk and Assurance Committee and the Finance and Performance Committee, which discharge their responsibilities appropriately. The Audit, Risk and Assurance Committee gain assurance from wider regular internal and external assurance reports in relation for financial controls and stewardship. These include overseeing reports on financial compliance, and the programme of internal audit and counter fraud work. However, there are some areas that could be improved in relation to monitoring Standing Financial Instruction compliance and single tender actions. (Recommendations 4.1 and 4.2)
- 44 The Health Board submitted its draft Financial Statements for external audit within the required timescales, following consideration by the Audit, Risk and Assurance Committee in July 2024. For 2023-24, we issued an unqualified true and fair audit opinion but issued a qualified regularity opinion because the Health Board did not meet its revenue resource allocation over the rolling three-year period 2021-22 to 2023-24.

Board oversight of financial performance

- 45 We considered whether the Board appropriately oversees and scrutinises financial performance. We were specifically looking for evidence of:
 - the Board receiving accurate, transparent, and timely reports on financial performance, as well as the key financial challenges, risks, and mitigating actions; and
 - the Board appropriately scrutinising the ongoing assessments of the organisation's financial position.
- 46 We found that the Health Board and committees appropriately oversee and scrutinise financial performance, but needs to increase the frequency of the Finance and Performance Committee meetings to enable more detailed scrutiny and oversight
- 47 The Board and Finance and Performance Committee continue to oversee the Health Board's financial performance, with finance reports providing sufficient information to enable appropriate scrutiny and oversight. Reports are transparent and supported by detailed explanation from the relevant Executive leads. They

also clearly highlight key financial challenges, risks, and mitigating actions and the potential impact on service quality and safety. The Board appropriately scrutinises the ongoing assessments of the organisation's financial position.

- 48 As noted previously, the Health Board continues to experience substantial financial challenges. Although the Finance and Performance Committee is well established, it only meets quarterly. As a result, it is unable to provide more detailed oversight of operational financial performance. Increasing the frequency of this committee to bi-monthly would enable the committee to undertake deeper dives into divisional financial and performance matters. (**Recommendation 5**)
- 49 While reports give a good overview of the financial position in the short-term, the current reporting approach makes it difficult to see how the Health Board will recover its position in the medium- to longer-term. Reports, therefore, should also focus on the Health Board's progress in delivering financially sustainable service models linked to service productivity, value, and efficiency (see **Recommendation 3**).

Board transparency, effectiveness, and cohesion

- 50 We considered whether the Health Board's Board conducts its business appropriately, effectively, and transparently.
- 51 We found despite reasonably effective Board and committee arrangements, the Health Board should, increase the number of patient safety leadership walkrounds, and improve committee chairs' reporting to Board.

Public transparency of Board business

- 52 We considered whether the Board promotes and demonstrates a commitment to public transparency of board and committee business. We were specifically looking for evidence of Board and committee meetings:
 - that are accessible to the public;
 - papers being made publicly available in advance of meetings; and
 - business and decision-making being conducted transparently.
- 53 We found that **the Board and committees continue to operate transparently with open discussion on key Health Board challenges.**
- 54 The Board continues to demonstrate a commitment to public transparency of board and committee business. Members of the public can continue to observe public Board meetings through the live stream, or by attending in person. The Health Board provides signposting and instructions to join upcoming Board meetings via the homepage on its website and its social media channels. However, public take up is low. Recordings of the public Board meetings are made publicly available 24 hours after the meeting. Private sessions of the Board are reserved for sensitive

and confidential matters. Where private sessions are used, a summary of discussions is provided at the subsequent public Board meeting.

- 55 Board members hold open and frank discussions in Board and committee meetings on the Health Board's performance, finance, and quality challenges. Executive Directors are open about the Health Board's challenges and the priority areas for action and feel well supported by the entire Board in responding to them.
- 56 The Health Board does not livestream or publish recordings of its committee meetings, although we understand that there are plans to start this in January 2025 (see Appendix 2 Structured Assessment 2023 R1). Unconfirmed committee meeting minutes are published on the Health Board's website only when included in papers for the next meeting, around 2 to 3 months after. This continues to limit timely access to records of committee business, but if live streaming of committee meetings is introduced it would improve transparency.

Arrangements to support the conduct of Board business

- 57 We considered whether there are proper and transparent arrangements in place to support the effective conduct of Board and committee business. We were specifically looking for evidence of:
 - a formal, up-to-date, and publicly available Reservation and Delegation of Powers and Scheme of Delegation in place, which clearly sets out accountabilities;
 - formal, up-to-date, and publicly available Standing Orders (SOs) and Standing Financial Instructions (SFIs) in place, along with evidence of compliance; and
 - formal, up-to-date, and publicly available policies and procedures in place to promote and ensure probity and propriety.
- 58 We found that the **Health Board continues to have good arrangements to** support the effective conduct of Board business and is taking action to address outdated policies.
- 59 The Health Board continues to have adequate arrangements to support the effective conduct of Board and committee business. It has adopted the Welsh Government's Model Standing Orders and Standing Financial Instructions and the model Scheme of Delegation. As noted previously, the Health Board has reviewed the financial limits in the Scheme of Delegation, which the Board approved in September 2024. The process for declaring interests at Board and committee meetings continues and is well established.
- 60 The Health Board has increased capacity within the Corporate Governance Team this year, which has enabled improvements. This includes developing the new Risk Management Framework and updating other important policies which have been out of date. The Health Board continues to work through an improvement plan to address out of date policies. It estimates that around 55% of its policies are out of date; however, not all policies are required, and there is targeted work ongoing to

determine the status and need for these policies. Positively, in September 2024, the Board approved a new Standards of Business Conduct Policy, which includes declarations of interest, and receipts of gifts and hospitality, as the previous version was due for review. The new policy now applies to a broader range of staff, including staff at Band 8a and above.

Effectiveness of Board and committee meetings

- 61 We considered whether Board and committee meetings are conducted appropriately and effectively. We were specifically looking for evidence of:
 - an appropriate, integrated, and well-functioning committee structure in place, which is aligned to key strategic priorities and risks, reflects relevant guidance, and helps discharge statutory requirements;
 - Board and committee agendas and work programmes covering all aspects of their respective Terms of Reference as well being shaped on an ongoing basis by the Board Assurance Framework;
 - well-chaired Board and committee meetings that follow agreed processes, with members observing meeting etiquette and providing a good balance of scrutiny, support, and challenge; and
 - committees receiving and acting on required assurances and providing timely and appropriate assurances to the Board.
- 62 We found that **the Board and committee structure is generally operating well.** Meetings are well chaired; however, there are opportunities to strengthen the quality of information presented.
- 63 The Board and its committees continue to have up to-date terms of reference, and annual cycles of business are regularly reviewed and updated as appropriate. Board and committee chairs are actively involved in the meeting agenda setting process. Meetings continue to be well chaired, mostly run to time, and demonstrate good discussion on key issues. Independent Members participate fully in meetings, providing reasonably effective scrutiny on the information presented. There is a continued focus on finance and digital matters in the relevant meetings, which is positive.
- 64 There have been no changes to the committee structure this year, and it provides an appropriate focus on strategy, delivery, performance, and culture. However, the Chair of the Health Board is also Chair of the Partnership's Population Health and Planning Committee. We recommend that this is reviewed to enable the committee to provide her with the assurance required as Chair of the Board (**Recommendation 6**). The Health Board may need to revisit its committee structure once it approves the new long-term strategy to ensure it remains fit for purpose and supports the delivery of any new strategic objectives.
- The recently established Clinical Advisory Forum held its inaugural meeting in July 2024. It reports to the Executive Committee, and there are clear terms of reference in place and appropriate muti-disciplinary attendance. The forum provides a

mechanism to seek essential contributions from clinicians to the Health Board's clinical, patient experience, and quality strategies. It oversees the Health Board's Quality Impact Assessment process and also functions as a clinical 'sounding board' and clinical voice, which will be important as the Health Board develops its longer-term strategy.

- 66 The Board and some committee meetings support both in-person and virtual attendance which continues to offer flexibility to Board members. The use of technology and virtual meeting etiquette is well embedded.
- 67 The Health Board has reasonably effective arrangements in place to support flows of assurance from committees to the Board and the referral of information between committees. However, the Health Board needs ensure that it allows sufficient time for the committee chairs to report assurance to the Board, and escalate issues raised during committee meetings. This should include setting out the proposed action that the committee would like the Board to take. (**Recommendation R7**)
- 68 There are appropriate processes to ensure actions identified in meetings are transferred to other committees where appropriate. The Chair of the Board continues to hold monthly meetings with Independent Members, both collectively and separately, which supports effective information sharing.
- 69 Board and committee papers are generally clear and contain the information required for effective decision making. However, many papers continue to be overly long, detailed and some do not identify clear actions when reports identify issues and underperformance. There is also opportunity to strengthen the use of benchmarking where this is appropriate. The Health Board is in the process of procuring external training to support report writing to improve the quality (see **Appendix 2 Structured Assessment 2022 R2, and 2023 R2 and R3**).

Board commitment to hearing from patients/service users and staff

- 70 We considered whether the Board promotes and demonstrates a commitment to hearing from patients/service users and staff. We were specifically looking for evidence of:
 - the Board using a range of suitable approaches to hear from a diversity of patients/service users, the public and staff.
- 71 We found that the Board has continues to demonstrate a positive commitment to hearing from staff and patients but needs to improve delivery of its programme of Patient Safety Leadership Walkrounds.
- 72 The Health Board has an established Communications and Engagement Strategy and has continued to strengthen its arrangements to hear from patients, service

users, and staff. The introduction of the CIVICA⁸ patient feedback system has been positive, and there are examples where this information is being reviewed at the Patient Safety, Quality and Outcomes Committee. As the Health Board sets out to develop its new long-term strategy, several engagement events were being held both in the community and online.

- 73 The Health Board has continued to include a patient and public engagement item at every public Board meeting which includes a report from the citizens' voice body, 'Llais.', and patient experience presentations with patients and families attending in person. The Patient Safety, Quality, and Outcomes Committee also receives patient, and staff stories and demonstrates a commitment to listening and learning from staff, as illustrated within its performance report.
- 74 In May 2023, the Health Board restarted its Patient Safety Leadership Walkrounds. These are for Independent Members and Executive Directors and cover inpatient, outpatient, Mental Health, and community patient care areas, as well as support services throughout the Health Board. Despite good arrangements to plan the schedule of walkrounds, only 33% of the pre-arranged visits have taken place⁹. The Health Board has investigated the reasons for this and is aiming to address this issue over the next 12 months.

Board cohesiveness and commitment to continuous improvement

- 75 We considered whether the Board is stable and cohesive and demonstrates a commitment to continuous improvement. We were specifically looking for evidence of:
 - a stable and cohesive Board with a cadre of senior leaders who have the appropriate capacity, skills, and experience;
 - the Board and its committees regularly reviewing their effectiveness and using the findings to inform and support continuous improvement; and
 - a relevant programme of Board development, support, and training in place.
- 76 We found that the **Board is cohesive and committed to continuous** improvement, with good Board member induction and training opportunities.
- 77 The Board is cohesive, with positive working relationships, good lines of communication, and awareness of respective roles and responsibilities amongst its members. Executive Director portfolios are appropriately balanced and have clearly defined responsibilities.
- 78 The Board has a stable cadre of Independent Member. However, the Health Board was unable to appoint a replacement Independent Member (Trade Union), and a

⁸ CIVICA is a national platform to enable NHS bodies in Wales to capture real-time feedback from users of its services.

⁹ Between May 2023 and October 2024.

decision was made to extend the current appointment for 12 months until a suitable candidate could be appointed. Positively, the Health Board has developed an internal Aspiring Board Member Programme to address this issue in the future. At the time of our work, there were three candidates on the programme. However, turnover is expected in 2025 including the Chair and Vice Chair of the Health Board, which the Health Board will need to manage carefully to maintain stability and minimise disruption.

- 79 The Health Board continues to have effective local induction arrangements for Executive Directors and Independent Members. These include meetings with other Board members and stakeholders alongside detailed training materials. Independent Members indicated they felt supported by the Board and have opportunities for learning and development.
- 80 Arrangements to support Board self-assessment continue to be effective. During 2023-24, the committees undertook a mid-year self-assessment, with the findings used to inform the annual assessment of the Board effectiveness in 2023-24. The Health Board continues to have a programme of Board development and Board briefing sessions which cover a range of topics, including urgent and emergency care, risk management, and the Health Boards Quality Strategy. Board Members continue to comment positively on the quality of these sessions.

Corporate systems of assurance

- 81 We considered whether the Health Board has a sound corporate approach to managing risks, performance, audit recommendations. We will comment separately on the Health Board's approach to managing the quality and safety of services as part of our Follow-up Review of Quality Governance Arrangements in 2025.
- 82 We found that while the Health Board is strengthening its assurance arrangements and its performance management approach is improving, further work is needed.

Corporate approach to overseeing strategic and corporate risks

- 83 We considered whether the Health Board has a sound corporate approach to identifying, overseeing, and scrutinising strategic risks to the delivery of strategic priorities / objectives. We were specifically looking for evidence of:
 - an up-to-date and publicly available Board Assurance Framework (BAF) in place, which brings together all of the relevant information on the risks to achieving the organisation's strategic priorities / objectives; and
 - the Board actively owning, reviewing, updating, and using the BAF to oversee, scrutinise, and address strategic risks.

- 84 We found that despite the Health Board's continued focus on refining the Board Assurance Framework and improving the content and sources of assurance, the Board still needs to clearly link its strategic risks to the strategic objectives within its Annual Plan.
- 85 The Health Board continues to use its Strategic Risk and Assurance Report (Board Assurance Framework) to set out how it manages its strategic risks. The report continues to provide a clear summary of the Health Board's strategic risks. At the time of our work, there were eight high level strategic risks. Each of these risks had been scored according to the risk appetite of the Health Board. Executive Directors within the Health Board are assigned responsibility for strategic risks within their respective portfolios, and all risks are assigned to a responsible committee.
- 86 The Health Board is continuing to strengthen its strategic risk approach by undertaking assurance mapping and identifying 'lines of defence' (the assurances it needs for each strategic risk). However, the Board has not clearly linked its strategic risks to the strategic objectives in the current Annual Plan. Therefore, the Board is not able to clearly see the strategic risks that may prevent delivery of its objectives. **(Recommendation 8)**
- 87 Our 2023 Structured Assessment review found that the Health Board needed to address gaps in the Strategic Risk and Assurance Report and strengthen how it uses this to inform committee agenda setting. The Health Board has addressed these issues sufficiently (see **Appendix 2 Structured Assessment 2023, R4**). Since our last structured assessment, the Health Board has refreshed its Risk Management Framework and underpinning policy, which provides clear guidance around the risk escalation structure, and reporting thresholds. In support of the new framework, the Health Board is rolling out training to its operational teams to improve the identification, mitigation, and escalation of risk (see **Appendix 2 Structured Assessment 2023 R5**).
- 88 The Health Board is in the process of developing an approach for reporting and managing its corporate risks. The Health Board plans to update the Board by the end of the year on its progress.

Corporate approach to overseeing organisational performance

- 89 We considered whether the Health Board has a sound corporate approach to identifying, overseeing, and scrutinising organisational performance. We were specifically looking for evidence of:
 - an appropriate, comprehensive, and up-to-date performance management framework in place, underpinned by clear roles and responsibilities; and
 - the Board and committees providing effective oversight and scrutiny of organisational performance.

- 90 We found that the Health Board's approach to performance management, accountability and oversight is improving, but there is further work to be done to improve performance reporting.
- 91 The Health Board introduced its Performance Management and Accountability Framework in September 2023¹⁰. This focusses on service quality, performance, activity, workforce, and financial expectations and includes formal approaches for review and internal escalation. The operational divisions were originally assessed in November 2023, and subsequently reviewed in September 2024. The most recent reports indicate that:
 - the Mental Health Division has been de-escalated from 'special measures' to 'enhanced monitoring', following improvements in leadership and delivering improvements in operational delivery and actions taken to address Health Inspectorate Wales recommendations
 - the Urgent Care Division has remained in 'enhanced monitoring' for quality and safety and delivery but de-escalated for finance.
- 92 This demonstrates that the Health Board is both using the framework effectively, and that the framework approach is currently an effective means for driving improvement.
- 93 In addition to the new divisional review approach, the Health Board has made broader progress in implementing the framework including:
 - issuing Director accountability letters covering service deliverables, budget delivery, and individual objectives;
 - providing clearer expectations and milestones linked to the delivery of plans; and
 - strengthening the approach and reporting for quarterly review of outcomes.
- 94 The Health Board continues to experience significant service pressures which means that performance against key Welsh Government performance measures is below target. The Health Board will need to ensure that its performance framework approach secures the necessary operational improvements, alongside the longerterm strategic service modelling needed to develop sustainable services.
- 95 Our 2022 and 2023 Structured Assessment reports highlighted opportunities to improve the Integrated Performance Dashboard. The Health Board has since strengthened its performance reporting to Board. Performance reports are divided up into four sections (quality, workforce, activity/performance, and finance). The responsible Executive Director presents each at public Board members. Key areas for improvement are summarised as well as the things that need to improve. However, whilst the performance reports show performance trends, there remains

¹⁰ The Health Board assesses each division against three domains (quality and safety, operational delivery and finance) and assigns an escalation status for each domain (supported autonomy, enhanced monitoring or special measures). A formal review is undertaken every 6 months.

a lack of benchmarking information with other health bodies, as well as a lack of focus on primary and community care performance. **(Recommendation 9)**

Corporate approach to tracking recommendations

- 96 We considered whether the Health Board has a sound corporate approach to overseeing and scrutinising systems for tracking progress to address audit and review recommendations and findings. We were specifically looking for evidence of:
 - appropriate and effective systems in place for tracking responses to audit and other review recommendations and findings in a timely manner.
- 97 We found that **the Health Board continues to have effective arrangements for tracking recommendations, but further work is required to reduce the number of overdue recommendations.**
- 98 The Health Board continues to have reasonably effective arrangements for monitoring progress against internal audit, external audit, and Healthcare Inspectorate Wales recommendations. It continues to use two trackers, one for internal and external audit recommendations which is received by the Audit, Risk and Assurance Committee at each meeting. The Healthcare Inspectorate Wales recommendations are captured on a separate tracker, which is periodically reviewed at the Patient, Quality, Safety and Outcomes Committee. The Health Board has continued to make progress in addressing overdue recommendations, but further work is needed to address the 42 recommendations that remain overdue.
- 99 The Health Board recently approved a procedure to improve both:
 - the quality of the management response to audit recommendations; and
 - clarity on the roles and responsibilities of the Executive Directors and the Audit, Risk and Assurance Committee in respect of audit tracking.

Appendix 1

Audit methods

Exhibit 2 below sets out the methods we used to deliver this work. Our evidence is limited to the information drawn from the methods below.

Element of audit approach	Description
Observations	 We observed Board meetings as well as meetings of the following committees: Public Board; Audit, Risk and Assurance Committee; Patient Safey, Quality and Outcomes Committee; Finance and Performance Committee; People and Culture Committee; and Partnerships, Population Health, and Planning Committee.

Element of audit approach	Description
Documents	 We reviewed a range of documents, including: Board and Committee Terms of Reference, work programmes, agendas, papers, and minutes; key governance documents, including Schemes of Delegation, Standing Orders, Standing Financial Instructions, Registers of Interest, and Registers of Gifts and Hospitality; key organisational strategies and plans, including the IMTP; key risk management documents, including the Board Assurance Framework and Corporate Risk Register; key reports relating to organisational performance and finances; Annual Report, including the Annual Governance Statement; relevant policies and procedures; and reports prepared by the Internal Audit Service, Health Inspectorate Wales, Local Counter-Fraud Service, and other relevant external bodies.

Interviews	 We interviewed the following Senior Officers and Independent Members: Chair of the Health Board; Chief Executive; Director of Corporate Governance; Director of Strategy, Planning and Partnerships; Director of Public Health; Director of Finance and Procurement; Independent Member – Finance & Chair of the Audit, Risk and Assurance Committee; Independent Member – Chair of the Patient Safey, Quality and Outcomes Committee; and
	Independent member – Chair of the Finance and Performance Committee.

Appendix 2

Progress made on previous years recommendations

Exhibit 3 below sets out the progress made by the Health Board in implementing recommendations from previous structure assessment reports

Recommendation	Description of progress
 Structured Assessment 2022 Quality of Information to Board and Committees R2 Information presented to Board and committees does not always provide the required assurance. Some papers are too long, detailed, and technical. Cover reports continue to follow an SBAR format, but there is variation in their use. The Health Board, therefore, should develop training and guidance for Health Board staff around the reporting expectations and quality of information presented to the Board and its committees. 	The Health Board is in the process of procuring external training to support report writing to improve the quality. More detail is provided in paragraph 70 Our assessment on progress against the recommendation: Ongoing

Recommendation	Description of progress
 Structured Assessment 2022 Performance Reporting R4 The Integrated Performance Report has remained unchanged for several years, and at present it doesn't clearly articulate the impact of past and ongoing improvement actions. The Health Board should strengthen this report to provide more information to Board and committees on the actions required to address underperformance or the impact of past actions taken. 	We recognise the progress that the Health Board has made in this area. However, we made a similar recommendation in our 2023 Structured Assessment report. More detail is provided in paragraph 96 . Our assessment on progress against the recommendation: Superseded by Structured Assessment 2024 Recommendation 6
 Structured Assessment 2022 Clinical Futures Strategy and Long-Term Clinical Plan R5 The Clinical Futures Strategy has remained in place for over a decade, but the pressures the Heath Board is facing have changed substantially in this time. The Health Board, therefore, should: a. Review the Clinical Futures Strategy to ensure it helps to shape financially and clinically sustainable service models; and b. Develop a detailed long-term clinical plan that underpins the Clinical Futures Strategy. 	The Health Board's Clinical Futures Strategy has been extant for some time. At the time of our work, the Health Board was starting to consult on the new strategy that will replace this work. More detail is provided in paragraph 13 . Our assessment on progress against this recommendation: Superseded by Structured Assessment 2024 Recommendation 1

Recommendation	Description of progress
Structured Assessment 2022 Schemes of Delegation R7 The Health Board's deteriorating financial position and deterioration in savings deliver indicates that stronger accountability for financial performance and delivery is required. The Health Board, therefore, should review its Scheme of Delegation to ensure it more strongly outlines delegated accountability for the budgetary position and achievement of financial efficiencies at and below executive levels.	The Health Board has continued to implement its performance management and accountability framework with updates reported though the finance and performance committee. Work has been undertaken to review the delegated limits for the Chair, CEO and executive directors, benchmarked across other Health Boards and a paper was approved at Board in September 2024 which approved these changes. This will then inform further detailed work on review of the scheme of delegation (to cover delegated limits and other responsibilities and delegated authorities). This includes mapping executive director delegated responsibilities to portfolios. More detail is provided in paragraph 42 .
Structured Assessment 2023 Committee Transparency R1 The Health Board should provide more timely access to records of committee meetings. It could do this either by ensuring that it livestreams or publishes recording of its committee meetings, or alternatively it could publish	The Health Board is working towards Livestreaming of committees. A programme of work is underway to determine the most appropriate solution for this as well as the products needed to ensure effectiveness. More detail is provided in paragraph 56. We consider this recommendation: Ongoing

Rec	ommendation	Description of progress
	unconfirmed committee meeting minutes shortly after the meeting.	
	ctured Assessment 2023 lity of Information	
R2	The Health Board should develop training and guidance for Health Board staff around the reporting expectations and quality of information presented to the Board and its committees.	R2 - At the time of our work the Health Board was in the process of securing externally facilitated report writing training for executive directors and senior managers. Following this the Health Board is planning to review its report and presentation templates as part of improving Board business effectiveness. More detail is provided in paragraph 70 . We consider this recommendation: Ongoing
R3	The Health Board should establish a robust quality assurance mechanism to review the quality of reports for its Board and committees.	R3 - During 2023-24 the Director of Corporate Governance implemented an organisational change process to build capacity and resilience in the Board Business function. Further work is planned on quality assuring reports as well as report writing training and revised templates. More detail is provided in paragraph 70 . We consider this recommendation: Ongoing
Stru	ctured Assessment 2023	

Recommendation		Description of progress
Strategic / Corporate Risk Management R4 The Health Board needs to rapidly complete remaining work to identify and address assurance gaps on its Strategic Risk and Assurance report and ensure it is actively owned by the Board and inform committee		R4 - The Health Board approved the revised Risk Management Framework, which features an enhanced escalation process. The template now includes detailed information on sources of assurance, any gaps in assurance and necessary actions to close the gaps. Risk is used to inform the agenda setting for committees. More detail is provided in paragraph 88.
R5	agenda setting. The Health Board needs to complete the remaining work on its Risk Management Strategy and effectively embed arrangements across the organisation to help it manage the significant finance, performance, and	We consider this recommendation: Complete R5 - In January 2024 the Board approved the risk management framework and the underpinning policy. The Health Board have started training sessions with directorates and divisions and have more scheduled in the future. More detail is provided in paragraph 88.
	quality risks it faces.	We consider this recommendation: Complete

Recommendation		Description of progress
 Structured Assessment 2023 Integrated Performance Dashboard R6 In the Integrated Performance Dashboard, the Health Board should provide more information on the actions required to address underperformance, the impact of past actions taken and where appropriate include benchmarking with other health bodies. (High Priority) 		The performance reports and quarterly reports have been refreshed to align with the annual plan outcomes and KPIs. These have been strengthened with the actions and plan for delivery over the next period. There remails work to improve the reporting on the Quality and People Strategy. This is discussed in more detail in paragraph 96 . We consider this recommendation: Ongoing
Structured Assessment 2023Integrated Medium-Term Plan Progress ReportR7The Health Board should strengthen the IMTP Progress Report to ensure that it can be used as an effective tool for monitoring progress against the delivery of its strategic objectives. By including up to date data, and clear narrative on the impact of past and ongoing improvement actions. (High Priority)		The quarterly outcomes report has been updated maintaining the balance between a mix of definitive progress measures, and population outcome measures. The new format also supports including the actions and plans to address underperformance in key areas. More detail is provided in paragraph 27 . Our assessment on progress against the recommendation: Complete

Appendix 3

Management response to audit recommendations

Exhibit 4: Aneurin Bevan University Health Board response to our audit recommendations

Ref	Recommendation	Management response Please set out here relevant commentary on the planned actions in response to the recommendations	Completion date Please set out by when the planned actions will be complete	Responsible officer (title)
R1.1	As part of its ongoing long-term strategy development, the Health Board should: R1.1 Ensure the organisation's new long-term strategy clearly defines the required sustainable service solutions and decisions for the medium to longer term. This should include a strong focus on	Population Health and Prevention will be at the heart of the organisation's new long-term strategy and have been core themes from the engagement period. The long-term strategy will set out a clear strategic direction for the organisation. It will provide clarity of long-term direction, long-term	June 2025- Strategy Publication	Director of Strategy, Planning and Partnerships

Ref	Recommendation	Management response Please set out here relevant commentary on the planned actions in response to the recommendations	Completion date Please set out by when the planned actions will be complete	Responsible officer (title)
	population health and prevention. (Paragraph 14)	outcomes and provide a framework for decision making to support the sustainability of the organisation. The long-term strategy will not set out specific service provisions however it will be supported by a number of plans. This will include the development of a refreshed clinical services plan for the organisation which will describe sustainable service solutions. Key to this will be the Strategic Outline Case for Nevill Hall Hospital which will be presented to the Board in May 2025.		
R1.2	Ensure there is comprehensive engagement with clinical and other staff across all domains of the organisations service provision to feed into the development of the new long-term strategy. (Paragraph 15)	Engagement with staff alongside the public has been core to the development of the new strategy. The engagement survey and materials were provided to all staff and over 40 face to face sessions	Completed December 2024	Director of Strategy, Planning and Partnerships

Ref	Recommendation	Management response Please set out here relevant commentary on the planned actions in response to the recommendations	Completion date Please set out by when the planned actions will be complete	Responsible officer (title)
		took place with staff at all levels. Sessions took place with all clinical and non-clinical teams through divisional meetings as well as at wider clinical forums. Alongside this open drop in sessions took place at all hospital sites to allow staff to provide their views.		
R1.3	Publish well-being objectives either alongside or within its new long-term strategy and ensure Well-being of Future Generations (2015) Act requirements are an integral part of the strategy. (Paragraph 16)	Refreshed well-being objectives will be the organisational objectives and will be set within the new long-term Strategy.	June 2025	Director of Strategy, Planning and Partnerships
R2	To enable more effective scrutiny of delivery of corporate plans and strategies, the Health Board should ensure that progress reports are clear and contain performance	Work is underway to develop report templates and supporting guidance setting out requirements and standards. Report writing training will also be delivered to senior teams	September 2025	Director of Corporate Governance

Ref	Recommendation	Management response Please set out here relevant commentary on the planned actions in response to the recommendations	Completion date Please set out by when the planned actions will be complete	Responsible officer (title)
	targets and comparative benchmarks, where possible. Reports should also contain clear progress against established milestones to aid scrutiny of progress. (Paragraph 28)	responsible for preparing board and committee papers.		
R3.1	To become financially sustainable in the longer-term, the Health Board should: R3.1 develop a detailed longer-term financial plan that is linked to the new long-term strategy currently in development and ensure progress against delivery is reported appropriately. (Paragraph 39)	The long-term financial plan will be developed alongside the long-term strategy and will triangulate service, workforce and financial aspects of the strategy once measures and metrics of change are clarified. This will be iterative to ensure clarity of affordability and outcome benefits expected.	June 2025	Director of Finance and Procurement

Ref	Recommendation	Management response Please set out here relevant commentary on the planned actions in response to the recommendations	Completion date Please set out by when the planned actions will be complete	Responsible officer (title)
R3.2	Develop a detailed route-map to support the delivery of the long- term strategy. (Paragraph 39)	As per recommendation 3.1, the financial plan will be developed alongside the service plan.	June 2025	Director of Finance and Procurement
R4.1	The Health Board should strengthen its oversight of Standing Financial Instruction and Single Tender Actions by: R4.1 introducing a self-assessment on Standing Financial Instruction compliance; (Paragraph 43) and	A self-assessment of Standing Financial Instructions will be established as part of the annual review at year end to the Audit, Risk and Assurance Committee.	March 2025	Director of Finance and Procurement
R4.2	R4.2 ensuring Single Tender Action reports include total contract values, setting out whether Board or Welsh Government approval was needed, and provide trend analysis of	Single Tender Action reporting will be updated to include these elements.	March 2025	Director of Finance and Procurement

Ref	Recommendation	Management response Please set out here relevant commentary on the planned actions in response to the recommendations	Completion date Please set out by when the planned actions will be complete	Responsible officer (title)
	numbers and total values of Single Tender Actions for comparative periods in previous years. (Paragraph 43)			
R5	To enable deeper scrutiny of operational finance and performance the Health Board should increase the frequency of the finance and performance committee meetings. (Paragraph 48)	The 2025/26 Committee Planner has established meetings of the Finance and Performance Committee to be held bi-monthly as opposed to quarterly.	Complete	Director of Corporate Governance
R6	The Health Board should ensure there is effective separation of responsibilities between the role of the Health Board Chair and the Chair of the Partnerships, Population Health and Planning Committee. The Health Board should seek to appoint a separate committee chair from the	In 2025/26 the Partnerships, Population Health and Planning Committee will be chaired by the Vice Chair.	April 2025	Director of Corporate Governance

Ref	Recommendation	Management response Please set out here relevant commentary on the planned actions in response to the recommendations	Completion date Please set out by when the planned actions will be complete	Responsible officer (title)
	wider cohort of independent members. (Paragraph 64).			
R7	The Health Board needs to allow sufficient time on Board meeting agendas for the committee chairs to report assurance to the Board and escalate any concerns. (Paragraph 67)	The format of committee chair reports to the Board will be reviewed to ensure clarity on escalation of issues that require the Board's attention whilst balancing the need to ensure the Board does not duplicate the work of its committees.	September 2025	Director of Corporate Governance
R8	The Health Board should ensure there is a clear approach that links the strategic risks in its risk register to the strategic objectives in its annual plan. (Paragraph 86)	The Strategic Risk Register will be reviewed and updated to ensure alignment of risks with the objectives of the IMTP and Annual Plan 2025/26.	April 2025	Director of Corporate Governance
R9	The Health Board should ensure there is a stronger focus on primary and community care performance	The Health Board acknowledges the recommendation and has included in the 2025/26 Planning Process is a	June 2025	Director of Strategy,

Ref	Recommendation	Management response Please set out here relevant commentary on the planned actions in response to the recommendations	Completion date Please set out by when the planned actions will be complete	Responsible officer (title)
	within its Integrated Performance reports. (Paragraph 95)	 stronger focus on Building Community Capacity and Population Health and Prevention aligned with the Ministerial Delivery Expectations. As part of the 2025/26 Plan and update of the Integrated Quarterly report, measures will be included for: Vaccinations, Diabetes recommended care process delivery Delayed Pathways of Care, Access standards Dental access, Community nursing and palliative care resource levels Enhanced Community Care These are alongside the Primary Care Minimum Data set measures which also include Optometry and GMS and the Health Board Priorities for: 		Planning and Partnerships

Ref	Recommendation	Management response Please set out here relevant commentary on the planned actions in response to the recommendations	Completion date Please set out by when the planned actions will be complete	Responsible officer (title)
		 Transforming Community Services, NCN and Place Based Care, Premature Preventable Mortality Facilitating early Discharge 		



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