



GIG
CYMRU
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Ymddiriedolaeth Brifysgol GIG
Gwasanaethau Ambiwylans Cymru
Welsh Ambulance Services
University NHS Trust

AUDIT, RISK AND ASSURANCE COMMITTEE ANNUAL REPORT 2025/26

INTRODUCTION

1. The Trust's Standing Orders and Committee Terms of Reference require that Board Committees evaluate their effectiveness annually and present an annual report to the Trust Board.
2. As the factors underpinning effective governance can change, for example as people leave, organisations restructure, or strategy shifts, regular reviews of Board Committees ensure governance remains fit for purpose.
3. Standing Orders, Committee terms of reference, and Codes of Governance provide that Boards should routinely assess the effectiveness of their governance arrangements, of which the Board's Committees form an integral part.
4. The committee met on 2 March 2026 to review the outcome of the committee sub-group review of the National Audit Office toolkit, its terms of reference, and its operating arrangements. This annual report reflects on the effectiveness of the committee in 2025/26 and proposes changes to terms of reference.
5. The trust board has commissioned an external effectiveness review which will be undertaken in early 2026 by the Good Governance Institute (GGI). The GGI will be reviewing the board committee framework within quarter four 2025/26 and quarter one of 2026/27 which may necessitate further changes throughout 2026/27, including potential material changes to this committee.

PURPOSE OF THE COMMITTEE

6. The purpose of the committee is to advise and assure the board and the Accountable Officer on whether effective arrangements are in place - through the design and operation of the Trust's system of assurance - to support them in their decision taking, and in discharging their accountabilities for securing the achievement of the Trust's objectives, in accordance with the standards of good governance determined for the NHS in Wales. Where appropriate, the committee will advise the board and the Accountable Officer on where, and how, its system of assurance may be strengthened and developed further.

MEMBERSHIP AND ATTENDANCE

7. The committee met five times in public and four times in private session as scheduled in 2025/26 and was quorate on each occasion. Pre-meets were held with the Chair and Auditors.
8. In 2025/26 the Committee was supported by the Chair and three Non-Executive Directors (NEDs) as members, and several prescribed attendees with good attendance
9. As at year end of the committee membership is Peter Curran, Ceri Jackson and Rhiannon Beaumont-Wood. Rhiannon Beaumont-Wood left the trust board on the 8 February 2026 and consequently the committee membership from the same date.
10. The chart below illustrates attendance of members and prescribed attendees as listed in the terms of reference for 2025/26. Audit Wales and Internal Audit were in attendance, and the committee welcomed non prescribed attendees at various meetings. The Chief Executive Officer attended two meetings in 2025/26: Jason Killens attended the June 2025 meeting, and Emma Wood (Chief Executive effective 1 October 2025) attended the December 2025 meeting. The committee welcomed non prescribed attendees at various meetings as well as external guests.

COMMITTEE ATTENDANCE					
Name	1 May 2025 ¹	24 Jun 2025 ²	2 Sep 2025	2 Dec 2025 ³	2 Mar 2026
Peter Curran					
Ceri Jackson					
Rhiannon Beaumont- Wood					Hayley Hutchings
Chris Turley			Ed Roberts	Ed Roberts	
Audit Wales	Fflur Jones	Fflur Jones	Fflur Jones	Fflur Jones	Fflur Jones
Julie Boalch					
Judith Bryce	Jon Sweet		Pete Brown		
Christian Fox				Hugh Parry	
Carl Kneeshaw					Liz Rogers
Osian Lloyd					
Trish Mills					
Liam Williams		Wendy Herbert		Wendy Herbert	
Carl Window					
Damon Turner					

	Attended
	Deputy attended
	Apologies received
	No longer member

¹ The chairs of the Finance and Performance Committee (Jayne Beeslee) and QUEST (Bethan Evans) were in attendance for the committee effectiveness reviews
² Jason Killens, CEO, joined for the presentation and endorsement of the annual report and audited accounts
³ Emma Wood, CEO joined this meeting

COMMITTEE VIEWS ON EFFECTIVENESS

Feedback from membership

11. In previous years, members of the committee were asked to complete the extensive NAO Audit and Risk Assurance Committee Effectiveness Toolkit questionnaire. Recognising the need for a more engaging and efficient process, the committee adopted a new approach for the current effectiveness review, commencing in April 2024 This process was also applied to the 2025 review.
12. A subgroup of ARAC members met to address the 180 questions in the toolkit by identifying and addressing any gaps in advance. This preliminary work aims to streamline the effectiveness review by allowing the committee to focus on key areas of improvement and maintain continuous oversight of their responsibilities.
13. The ARAC sub-group agreed that the 2025/26 responses to the questions were appropriate and spent time reviewing the three areas below in more detail:
 - A. Communication: Question 1.2.9 indicates that it is good practice for the ARAC Chair and others to keep in touch on a continuing basis between meetings:

- Members agreed that they remain connected through touchpoint meetings during the year, and Non-Executive Director (NED) meetings allow the ARAC Chair to raise any issues with NED colleagues. Regular meetings of the ARAC sub-group take place with the recent focus being the review of the board's committee framework. There were no changes requested to these arrangements.
- The ARAC Chair and the Executive Director of Finance and Corporate Resources also meet regularly on a one-to-one basis, and both attend agenda setting meetings. The Chair also meets with the auditors regularly, and it was agreed that the sub-group will continue to meet quarterly with the Chair feeding back to the committee on issues discussed.

B. Skills and experience of members:

- Sub-group members noted that committee members are appointed for their experience and skills, particularly executive and senior leaders whose portfolios align with a committee's remit. Where a committee does not have specific expertise in an area, members are encouraged to seek bespoke development, either through the board development programme or through deep dive sessions. This is particularly important in areas identified in the toolkit such as cyber, digital, environmental and sustainability, commercial and procurement.
- The sub-group proposed that this issue is raised at board to ensure that, pending the broader review of the skills mix, chairs of all board committees (including ARAC) continue to encourage targeted upskilling where it is needed. This will help maintain robust oversight and understanding, while avoiding the risk of committees becoming overly operational. The ARAC agreed that this should be taken forward, with the ARAC overseeing progress/development.
- Related to this, the sub-group recognised that there may be work for ARAC to undertake at board level to review the board skills matrix, to ensure it is fit for purpose and that the distribution of NEDs and directors across committees aligns with remit and the matrix. The ARAC agreed with the proposal from the sub-group that this should be taken forward, with the ARAC overseeing progress/development. It was agreed that the ARAC subgroup would progress development of a refined skills matrix, aligned to organisational priorities and committee responsibilities. This work will be brought back to ARAC before being reported to the Board.

Management of the committee's work programme

14. The committee has a cycle of business that is aligned to its terms of reference. All matters scheduled for oversight and review have been brought to the Committee and in this respect, it has discharged its responsibilities in providing assurance to the board aligned to its terms of reference. The revised cycle of business for the committee was reviewed at the meeting on the 28 April 2026.
15. The board is kept informed of the committee's oversight of a range of issues by way of an 'Alert', 'Assure' and 'Advise' (AAA) report to the Board after each meeting. Any issues of concern are escalated to the board in the 'Alert' section, and the chair of this committee presents that report at each board meeting.
16. Other than that which is set out in this report, the substantial detail of the work of the committee in 2025/26 is included in the committee AAA reports which are linked below:
 - 16.1. AAA: [1 May 2025](#)
 - 16.2. AAA: [24 June 2025](#)
 - 16.3. AAA: [25 September 2025](#)
 - 16.4. AAA: [2 December 2025](#)
 - 16.5. AAA: [2 March 2026](#)
17. The board received a highlight (AAA) report from this Committee by email circulation following each meeting which included alerts, advice, and areas of assurance. This AAA report included reporting at a high level of matters taken in private session.
18. The committee is not serviced by any sub-committees or task and finish groups that this time in addition to the sub-group which considered the NAO effectiveness tool. In year, all papers were published in line with the trust's board and committee's secretariat standard operating procedure,

PROPOSED CHANGES TO THE TERMS OF REFERENCE

19. The proposed changes to terms of reference for this committee for 2025/26 were endorsed by the committee at its meeting on the 2 March 2026. The only change proposed is the adjustment to the membership to include the Deputy Director of Quality and Putting Things Right in place of the Executive Director of Quality and Nursing.

COMMITTEE PRIORITIES

Priorities for 2025/26

20. The committee received an update on progress against its priorities at each meeting. The 2025/26 priorities were:

Priority	Progress
<ul style="list-style-type: none"> Monitoring progress of the committee effectiveness review 'part II' throughout 2025/26 (as set out at the 01 May 2025 ARAC) with respect to the committee delegations, membership and meeting frequency. 	<ul style="list-style-type: none"> This committee reviewed its own quality and governance at the March 2026 meeting and completed the discussion with the review of the annual report from 2025/26 and cycle of business for 2026/27 at the April 2026 meeting. In December 2025 the committee considered the options for the wider board committee framework changes and endorsed option 1, to be deferred until the outcomes of the externally facilitated board effectiveness review are received and considered (noting this may be mid-year in 2026/27). They also approved the approach to the quality and effectiveness review for ARAC, being that the ARAC sub-group will review the NAO effectiveness toolkit and provide this and any key issues to the March 2026 meeting, alongside responses to a short qualitative survey of members. They also recommended to the board that their quality and governance review includes a repeat of the survey conducted in 2024/25. A project plan was agreed with a sub-group of ARAC. The Director of Corporate Governance/Board Secretary presented a paper at the meeting of the Audit Risk and Assurance Committee on 2 September 2025 regarding the 2025/26 Effectiveness Review and has facilitated an ongoing discussion with a sub-group of ARAC regarding this work.