Regulatory Body	Lead Contact	Where is it tracked	Local oversight and Frequency	Board / Committee and Frequency	Escalation Trigger
CAV Food Hygiene	Director of Captial, Estates & Facilities	Locally	Monthly oversight to the Director of Capital, Estates & Facilities.	Digital & Infrastructure Committee by exception.	If outlets score less than 3, it is escalated to Welsh Government.
Health Inspectorate Wales (HIW) Quality Inspection	Assistant Director of Quality and Patient Safety / Deputy Head of Safety, Quality and Organisational Learning	AMAT used to track HIW improvement plans	Local oversight is through monthly Executive Review Meetings	Regular reporting of HIW activity and progress against improvement plans will go through Quality Committee as a standing item starting from September 2026.	
South Wales Fire & Resue Service (SWFRS)	Assistant Director of Health, Safety and Fire	Locally on spreadsheet	Managed locally by the team	Digital & Infrastructure Committee annually and by exception. The tracker was last presented at the 5th May Digital & Infrastructure Committee: https://cavuhb.nhs.wales/files/board-and-committees/digital-infrastructure-committee-2026-27/00-public-digital-infrastructure-committee-papers-05-05-26-v2-pdf/?ts=1787648531483	By exception if there was a report/finding that was of concern.
Health Education and Improvement Wales (HEIW)	Assistant Medical Director, Medical Education / Medical Education Manager	Tracked via HEIW All Wales Risk Reporting mechanisms and local UHB action planning processes - looking to move to AMAT	Medical Workforce Advisory Group (MWAG)	People & Culture, also an annual paper.	GMC getting involved would be the point of escalation.
Health & Safety Executive (HSE)	Assistant Director of Health, Safety and Fire	Locally	Managed locally by the team	Digital & Infrastructure Committee annually and by exception. The tracker was last presented at the 5th May Digital & Infrastructure Committee: https://cavuhb.nhs.wales/files/board-and-committees/digital-infrastructure-committee-2026-27/00-public-digital-infrastructure-committee-papers-05-05-26-v2-pdf/?ts=1787648531483	By exception if there was a report/finding that was of concern.
Information Commissioner's Office (ICO)	Head of Information Governance and Cyber Security	AMAT	Information Governance Group	Digital & Infrastructure Committee	All reports.
Joint Accreditation Committee ISCT-Europe & EBMT (JACIE)	Director of Operations - Specialist Services Clinical Board	Action Plan managed locally by the South Wales Blood & Marrow Transplant Programme Quality Management Team (dedicated team)	Via Specialised Services Clinical Board, therough to Tertiary Services Development Group (SWBMT is a NWJCC commissioned service)	Quality Committee and Board by exception. 2026 report has gone through SLT, Quality Committee, and UHB Board. Last went through the Quality Committee on 28th July 2026: https://cavuhb.nhs.wales/files/board-and-committees/quality-committee-202627/00-public-quality-papers-28-07-2026-v2-pdf/?ts=1785416321486	Loss of accreditation.
JAG (Joint Advisory Group on Gastrointestinal Endoscopy)	Director of Operations - Surgery Clinical Board	Locally		The UHB is not accredited at present.	
Alerts & Notices (includes MHRA, Medical Devices, Medicine Safety, Patient Safety Solutions)	Clinical Director Pharmacy & Medicines Management / Director of Nursing - CD&T Clinical Board	Tracked through IQAAP system and QPulse	Locally	Twice yearly report is due to come through the Quality Committe of compliance with all alerts and notices. Ad hoc reports as required around specific alerts and notices	Adhoc reports as required around specific alerts and notices.
Natural Resources Wales	Director of Captial, Estates & Facilities	Locally	Radiation Protection Group (RPG)	Digital & Infrastructure - would just be for information unless exceptional findings.	Reputational risk
Office for Nuclear Regulations (ONR) / IRMER	Radiographer Professional Head / Head of Nuclear Medicine Physics	Locally via AMAT	Radiation Protection Group (RPG) and Clinical Safety Group	Chairs Reports after each RPG go through the Quality Committee for noting.	Findinds needing escalation are flagged to the Flagged to the Executive Director of AHPs, Health Scientists & Community Services Development
The United Kingdom Accreditation Service (UKAS) / All Wales Genomics Laboratory	Director of All Wales Medical Genomics Service	Monitored within Q-Pulse, with outputs fed into the UKAS portal.	Regulatory Compliance Group for CD&T / AWMGS	Report on activity from the Regulatory Compliance Group for CD&T scheduled to come through the Quality Committee in Q3 2026/27. Discussions ongoing with the team on the frequency to bring this through QC.	Reputational risk / if accreditation was at risk of going.

Human Tissue Authority (HTA)	Director of Nursing - CD&T / Cellular Pathology Service Manager / Clinical Board Director - CD&T	Monitored within the Quality Management System (QMS) system Q-Pulse	VIA HTA Compliance Group (local), Regulatory Compliance Group for CD&T and Clinical Board QSE	Report on activity from the Regulatory Compliance Group for CD&T scheduled to come through the Quality Committee in Q3 2026/27. Discussions ongoing with the team on the frequency to bring this through QC.	HTA have critical, major, or other. Could be that 'critical' is when it gets escalated through the QC.
Cyber Resilience Unit (CRU)	Head of Information Governance and Cyber Security	AMAT	Cyber Security Group	Digital & Infrastructure Committee	All reports.
Authorising Engineer	Director of Captial, Estates & Facilities	Tracking is dependent on whether they accept the recommendations, but it is best practice. All reports are hosted internally.		Presented at the Digital & Infrastructure (D&I) Committee annually or by exception.. Action tracker was presented at the 4th August D&I Committee: https://cavuhb.nhs.wales/files/board-and-committees/digital-infrastructure-committee-2026-27/00-public-digital-amp-infrastructure-committee-04-08-26-paper-bundle-pdf/?ts=1785415639117	
Coroners and Justice Act 2009	Assistant Director of Patient Experience	Datix	Brought through the Learning from Mortality Group.	Annual Inquest Report comes through Quality Committee. Last presented at Quality Committee on the 30th June 2026 - https://cavuhb.nhs.wales/files/board-and-committees/quality-committee-202627/00-public-quality-committee-paper-bundle-30-06-2026-pdf/?ts=1787731440528	Regulation 28 / 29 are brought through the Committee to demonstrate compliance when received.
Civil Procedure Rules (Claims)	Assistant Director of Patient Experience	AMAT to track improvement plan from annual inspection by Welsh Risk Pool (WRP)	Locally	Annual Claims Report comes through Quality Committee. Last presented at Quality Committee on 2nd June 2026 - https://cavuhb.nhs.wales/files/board-and-committees/quality-committee-202627/00-quality-boardbook-02-06-2026-pdf/?ts=1787731405282	
Listening to People Regulations	Assistant Director of Patient Experience	AMAT & Datix to track improvement plan from annual inspection by Welsh Risk Pool (WRP)	Locally	Reports through Quality Committee via the Integrated Performance Report (IPR)	
Ombudsman	Assistant Director of Patient Experience	Datix	Locally	All public reports are presented to the Quality Committee, and the Ombudsman Annual Letter is presented once each year.	All public reports are presented at the Quality Committee.