

AGENDA ITEM

7.1

## AUDIT COMMITTEE

## AUDIT RECOMMENDATIONS TRACKER UPDATE REPORT

Date of meeting	14/12/2020
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Emma Walters, Corporate Governance Officer
Presented by	Georgina Galletly, Director of Corporate Governance/Board Secretary
Approving Executive Sponsor	Director of Corporate Governance
Report purpose	FOR NOTING

Engagement (internal/external) undertaken to date (including<br/>receipt/consideration at Committee/group)Committee/Group/IndividualsDateOutcome

ACRO	NYMS	

#### 1. SITUATION/BACKGROUND

1.1 As reported in previous Committee meetings the Health Board has implemented a new format for the Audit Tracker based upon best practice across NHS Wales as identified by the Head of Internal Audit.



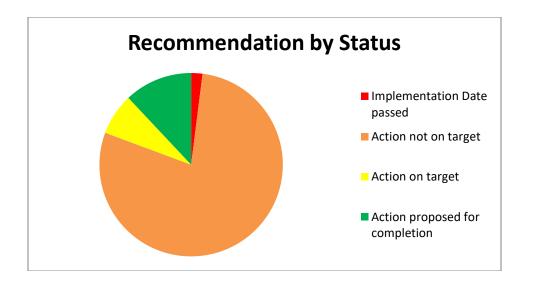
- 1.2 The main purpose of this report is to present an update to the Audit & Risk Committee on reported progress of Audit report recommendations in the revised format.
- 1.3 This report relates to both internal and external audit review recommendations.
- 1.4 Work is underway to incorporate other audit activity within the tracker e.g. Delivery Unit, Health Inspectorate Wales recommendations etc. An example of Healthcare Inspectorate Wales recommendations has been included this month for Members to consider. Further narrative with support the Healthcare Inspectorate Wales and Delivery Unit entries where the direct migration may not match the fields currently used, and explanatory notes will be added in this respect.

# 2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 2.1 Following a request made by Members at the October 2020 meeting, a focus had been placed on the High Priority Recommendations which still remained open on the tracker. Out of the 48 high priority Internal Audit recommendations, five are being proposed for closure. Out of the remaining 43, updates have been provided against the majority of recommendations with revised target dates identified. Out of the 11 high priority External Audit recommendations, four are being proposed for closure. Out of the remaining seven high priority recommendations, updates have been provided with revised target dates identified.
- 2.2 Steps have been taken to seek updates from Management leads in relation to the remainder of the outstanding internal and external audit recommendations which are classed as medium/low priority. Despite the pressures being experienced by teams in relation to Covid-19, Members will note a further 13 internal audit recommendations have been completed, together with eight external audit recommendations.
- 2.3 In light of the current position in relation to COVID-19, and the inevitable impact on timeliness of implementation of management actions, responses have been sought against outstanding areas to determine revised implementation dates.
- 2.4 Work will continue over the next few weeks to ensure the audit recommendations tracker is fully up to date, in preparation for the next meeting.



2.5 The tables below provide a summary of the current position in relation to Internal Audit Recommendations, noting a significant increase in the proportion of orange status indicating actions that won't be achieved in line with timescales, largely due to the impact of COVID-19:

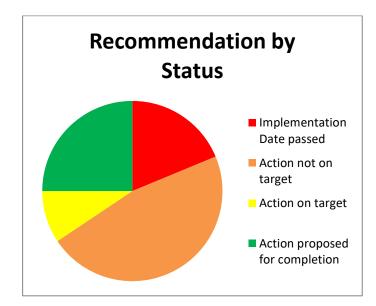


Recommendations by Priority & Status					
Priority	TOTAL	Implementation Date passed	Action not on target	Action on target	Actions Completed
High	48	1	40	2	5
Medium	83	1	66	5	11
Low	19	1	12	4	2



	R	ecommendations by E	xecutive Lead &	Status	
Executive Lead	Total	Implementation Date passed	Action not on target	Action on target	Actions Completed
Director of Corporate Governance	2	0	2	0	0
Director of Finance	1	0	0	0	1
Director of Operations	69	0	58	7	4
Director of Primary, Community & MH	3	0	0	0	3
Director of Nursing	8	1	5	0	2
Director of Planning & Performance	16	0	16	0	0
Director of Workforce & OD	35	2	29	3	1
Director of Public Health	3	0	3	0	0
Medical Director	13	0	5	1	7

2.6 The tables below provide a summary of the current position in relation to External Audit Recommendations:





Recommendations by Priority & Status					
Priority	TOTAL	Implementation Date passed	Action not on target	Action on target	Actions Completed
High	11	0	6	1	4
Medium/Low	21	6	9	2	4

Recommendations by Executive Lead & Status					
Executive Lead	Total	Implementation Date passed	Action not on target	Action on target	Actions Completed
Director of Corporate Governance	1	0	0	0	1
Director of Finance	3	0	0	2	1
Director of Operations	9	6	3	0	0
Director of Planning & Performance	7	0	4	0	3
Director of Primary, Community & MH	6	0	3	0	3
Director of Public Health	6	0	5	1	0



## 3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 As outlined in section 2, the audit tracker will continue to be updated over the next month.
- 3.2 The revised format will continue to be further refined over time, but aims to provide a more thorough tracker and audit tool for the Audit Committee.

### 4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)		
	Robust internal processes aligned with a strong governance framework is essential to ensuring patients experience the greatest possible levels of safety and quality.		
Related Health and Care	Governance, Leadership and Accountability		
standard(s)	If more than one Healthcare Standard applies please list below:		
Equality impact assessment completed	No (Include further detail below)		
completed	Not required		
	Yes (Include further detail below)		
Legal implications / impact	There may be an adverse effect on the organisation if the UHB does not fully implement learning and improvements identified as part of Audit arrangements.		
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.		
Link to Strategic Well-being Objectives	Choose an item.		



# **5. RECOMMENDATION**

5.1 The Audit & Risk Committee are being asked to **NOTE** the report.