



AGENDA ITEM

6.3

AUDIT & RISK COMMITTEE

AUDIT RECOMMENDATIONS TRACKER UPDATE REPORT

Date of meeting	08/02/2021	
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 receipt/consideration at Committee/group)		
Committee/Group/Individuals	Date	Outcome
ACRONYMS		

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.



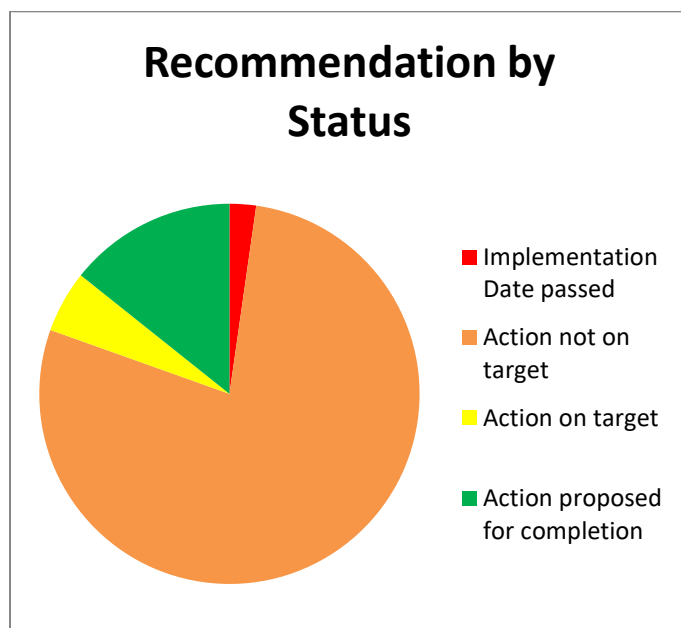
- 1.2 The main purpose of this report is to present an update to the Audit & Risk Committee on reported progress of Audit report recommendations in the revised format.
- 1.3 This report relates to both internal and external audit review recommendations.
- 1.4 Work is underway to incorporate other audit activity within an organisational tracker e.g. Counter Fraud, Delivery Unit, Healthcare Inspectorate Wales related audit recommendations etc. this will allow greater opportunity to review recommendations from various regulatory bodies to identify themes. A report on progress made to date will be presented to the March Quality & Safety Committee.

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

- 2.1 Following discussion at the December Audit & Risk Committee, meetings have been arranged with Executive Leads, Internal and External Audit colleagues, to discuss the recommendations which remain open on the tracker and review the management action plans and progress to agree a way forward in terms of closure. These meetings have been scheduled to take place at the end of February/beginning of March 2021.
- 2.2 Steps have been taken to seek updates from Management leads in relation to outstanding internal and external audit recommendations which are classed as high/medium/low priority. Despite the pressures being experienced by teams in relation to Covid-19, Members will note a further 19 internal audit recommendations have been completed, together with 13 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 in collaboration with audit colleagues as outlined above, to ensure the audit recommendations tracker is fully up to date, in preparation for the next Audit & Risk Committee 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	43	1	34	4	4
Medium	74	0	61	0	13
Low	16	2	9	3	2

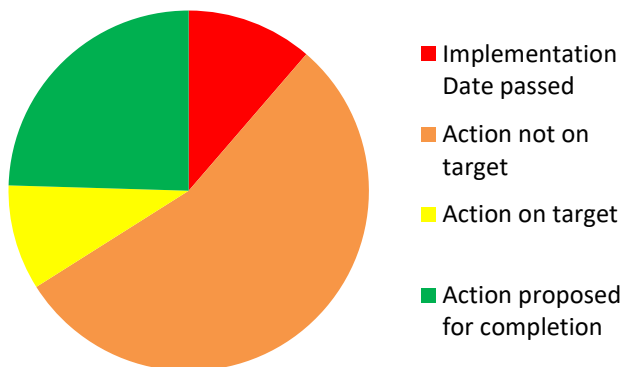


Recommendations by Executive Lead & Status					
Executive Lead	Total	Implementation Date passed	Action not on target	Action on target	Actions Completed
Director of Corporate Governance	2	0	1	0	1
Director of Finance	2	0	2	0	0
Director of Operations	65	0	51	4	10
Director of Nursing	5	0	3	0	2
Director of Planning & Performance	16	0	16	0	0
Director of Workforce & OD	34	2	24	2	6
Director of Public Health	3	1	2	0	0
Medical Director	6	0	5	1	0

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



Recommendation by Status



Recommendations by Priority & Status					
Priority	TOTAL	Implementation Date passed	Action not on target	Action on target	Actions Completed
High	7	0	6	1	0
Medium/Low	46	6	23	4	13

Recommendations by Executive Lead & Status					
Executive Lead	Total	Implementation Date passed	Action not on target	Action on target	Actions Completed
Director of Finance	4	0	0	4	0
Director of Nursing	1	0	1	0	0
Director of Operations	35	6	16	0	13
Director of Planning & Performance	4	0	4	0	0
Director of Primary, Community & MH	3	0	3	0	0



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 standard(s)	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
Equality impact assessment completed	No (Include further detail below)
	Not required



Legal implications / impact	Yes (Include further detail below)
	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	Provide high quality, evidence based, and accessible care

5. RECOMMENDATION

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