



**AGENDA ITEM**

4.3

**AUDIT & RISK COMMITTEE**

**AUDIT RECOMMENDATIONS TRACKER UPDATE REPORT**

<b>Date of meeting</b>	04/10/2021	
<b>FOI Status</b>	Open/Public	
<b>If closed please indicate reason</b>	Not Applicable - Public Report	
<b>Prepared by</b>	Emma Walters, Corporate Governance Officer	
<b>Presented by</b>	Georgina Galletly, Director of Corporate Governance/Board Secretary	
<b>Approving Executive Sponsor</b>	Director of Corporate Governance	
<b>Report purpose</b>	FOR NOTING	
<b>Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)</b>		
<b>Committee/Group/Individuals</b>	<b>Date</b>	<b>Outcome</b>
<b>ACRONYMS</b>		

**1. SITUATION/BACKGROUND**

- 1.1 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.

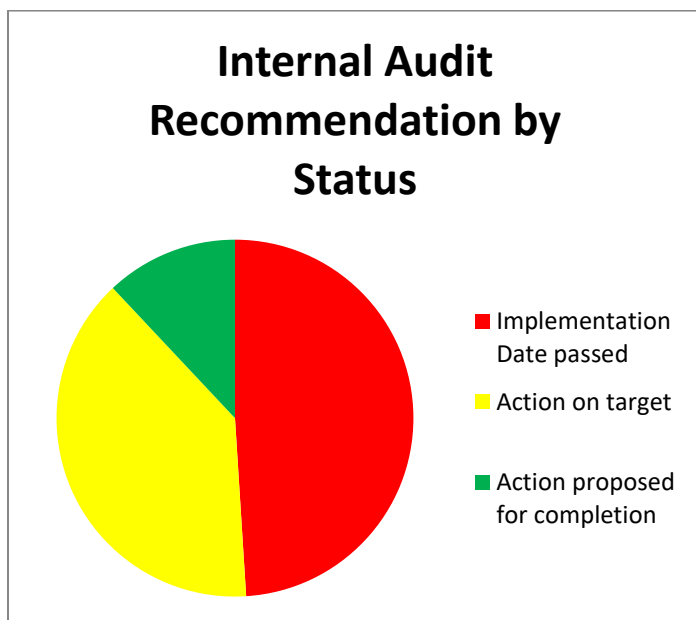
- 1.2 This report relates to both internal and external audit review recommendations.

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

- 2.1 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 12 internal audit recommendations have been completed and are proposed for removal from the tracker, together with 33 external audit recommendations.

### Internal Audit

- 2.2 The tables below provide a summary of the current position in relation to Internal Audit Recommendations, noting that there remains a large number in the proportion of red status indicating actions that won't be achieved in line with timescales, largely due to the impact of COVID-19:

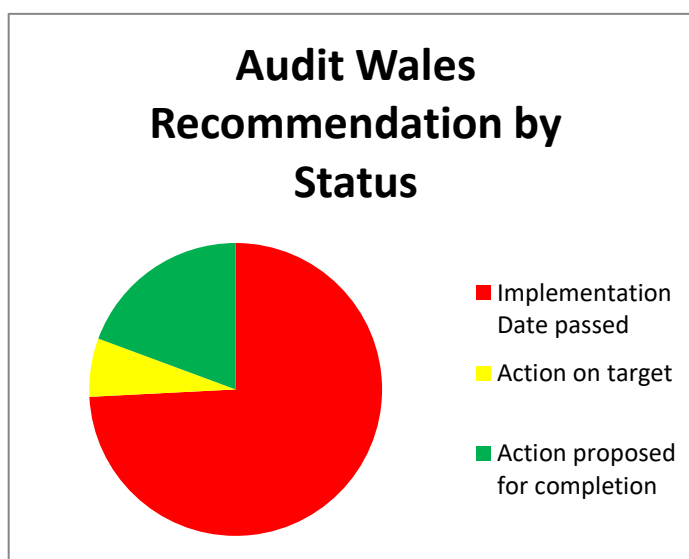




Recommendations by Priority & Status				
Priority	TOTAL	Implementation Date passed	Action on target	Actions Completed
High	27	12	12	3
Medium	61	30	23	8
Low	12	7	4	1

Recommendations by Executive Lead & Status				
Executive Lead	Total	Implementation Date passed	Action on target	Actions Completed
Director of Corporate Governance	2	1	1	0
Director of Finance	24	10	11	3
Director of Operations	30	16	9	5
Director of Nursing	2	1	0	1
Director for People	15	11	4	0
Director of Public Health	16	7	8	1
Medical Director	11	3	6	2

- 2.3 External Audit (Audit Wales)  
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 on target	Actions Completed
High	5	4	1	0
Medium/Low	112	41	38	33

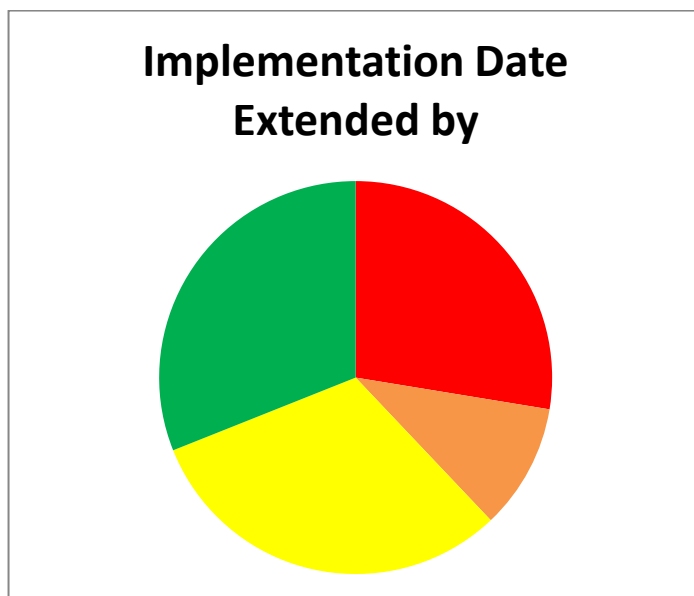


Recommendations by Executive Lead & Status				
Executive Lead	Total	Implementation Date passed	Action on target	Actions Completed
Chief of Staff	4	0	3	1
Director of Corporate Governance	21	7	7	7
Director of Finance	8	2	6	0
Director of Nursing	37	8	14	15
Director of Operations	21	20	1	0
Director of Nursing/Medical Director	1	0	0	1
Director of Primary, Community & MH	1	0	0	1
Director of Public Health	1	0	1	0
Director for People	10	5	4	1
Director of Therapies	4	0	0	4
Medical Director	9	3	3	3



- 2.4 As requested by Committee Members at the June meeting, we have also included charts which identify the recommendations which have exceeded their target dates by 24 months, 12-24 months, 12 months and by 6 months.

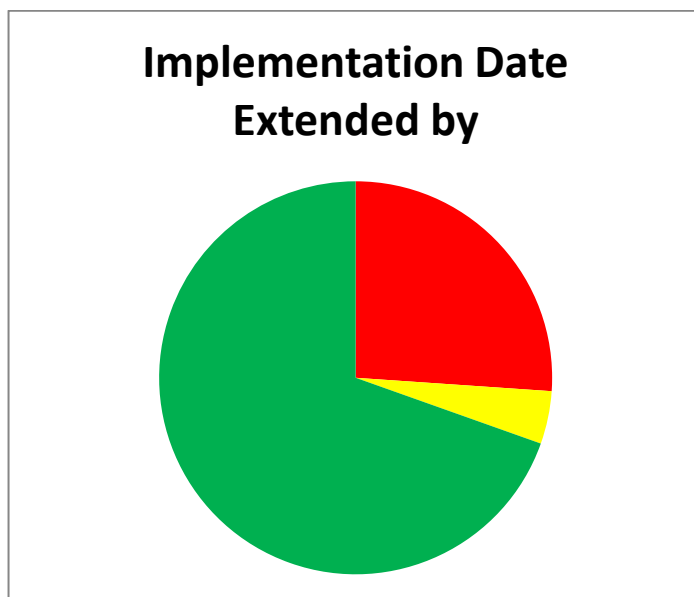
### **Internal Audit Recommendations**



Implementation Date Extended by					
Priority	TOTAL	More Than 24 Months	18-24 Months	12 Months	6 Months
High	23	2	13	3	5
Medium	26	8	3	8	7
Low	3	0	0	1	2



### **External Audit Recommendations**



Implementation Date Extended by					
Priority	TOTAL	More Than 24 Months	18-24 Months	12 Months	6 Months
High	4	4	0	0	0
Medium/Low	23	6	0	1	16

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

- 3.1 As outlined in section 2, the audit tracker will continue to be updated.
- 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

<b>Quality/Safety/Patient Experience implications</b>	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.
<b>Related Health and Care standard(s)</b>	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
<b>Equality impact assessment completed</b>	No (Include further detail below)
	Not required
<b>Legal implications / impact</b>	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.
<b>Resource (Capital/Revenue £/Workforce) implications / Impact</b>	There is no direct impact on resources as a result of the activity outlined in this report.
<b>Link to Strategic Well-being Objectives</b>	Provide high quality, evidence based, and accessible care

#### 5. RECOMMENDATION

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