

AGENDA ITEM

4.3

AUDIT & RISK COMMITTEE

AUDIT RECOMMENDATIONS TRACKER UPDATE REPORT

Date of meeting	07/12/2021
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/IndividualsDateOutcome

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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.



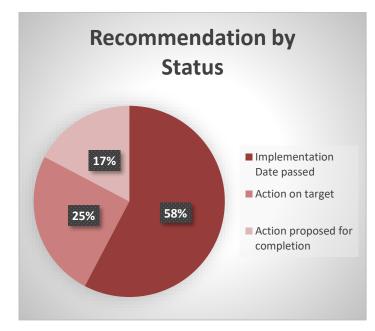
1.2 This report relates to both internal and external audit review recommendations.

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 18 internal audit recommendations have been completed and are proposed for removal from the tracker, together with 11 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:





Priority	TOTAL	Implementation Date passed	Action on target	Actions Completed
High	31	21	6	4
Medium	61	34	17	10
Low	12	5	3	4

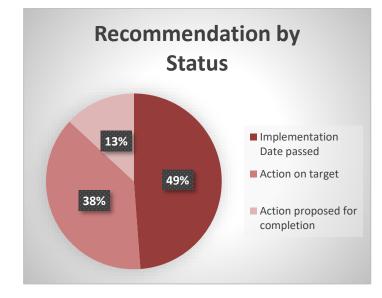
Recommendations by Executive Lead & Status				
Executive Lead	Total	Implementation Date passed	Action on target	Actions Completed
Director of Corporate Governance	2	0	1	1
Director of Finance	22	9	10	3
Director of Operations	35	22	4	9
Director of Nursing	1	1	0	0
Director for People	20	9	9	2
Director of Public Health	15	12	2	1
Medical Director	9	7	0	2

Implementation Date Extended by					
Priority	TOTAL	More than 24 Months	18-24 Months	12-18 Months	6-12 Months
High	26	5	2	10	9
Medium	28	9	4	6	9
Low	2	0	0	1	1



External Audit (Audit Wales)

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



Recommendations by Priority & Status				
Priority Inplementation Date Action on target Actions Completed				
High	56	22	25	9
Medium/Low	28	19	7	2



	R	ecommendations by Ex	xecutive Lead & Status		
Executive Lead	Total	Implementation Date passed	Action on target	Actions Completed	
Chief of Staff	3	0	2	1	
Director of Corporate Governance	14	3	7	4	
Director of Finance	8	1	5	2	
Director of Nursing	22	10	9	3	
Director of Operations	21	19	2	0	
Director of Public Health	1	1	0	0	
Director for People	9	5	4	0	
Medical Director	6	2	3	1	

Implementation Date Extended by					
Priority	TOTAL	More Than 24 Months	18-24 Months	12 - 18 Months	6 -12 Months
High	11	4	0	0	7
Medium/Low	19	5	1	0	13

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

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:	
	No (Include further detail below)	
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below. If no, please provide reasons why an EIA was not considered to be required in the box below.	
	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 Goals	Improving Care	

5. RECOMMENDATION

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