



AGENDA ITEM

5.1

AUDIT & RISK COMMITTEE

AUDIT RECOMMENDATIONS TRACKER UPDATE REPORT

Date of meeting	22/08/2022	
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 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.

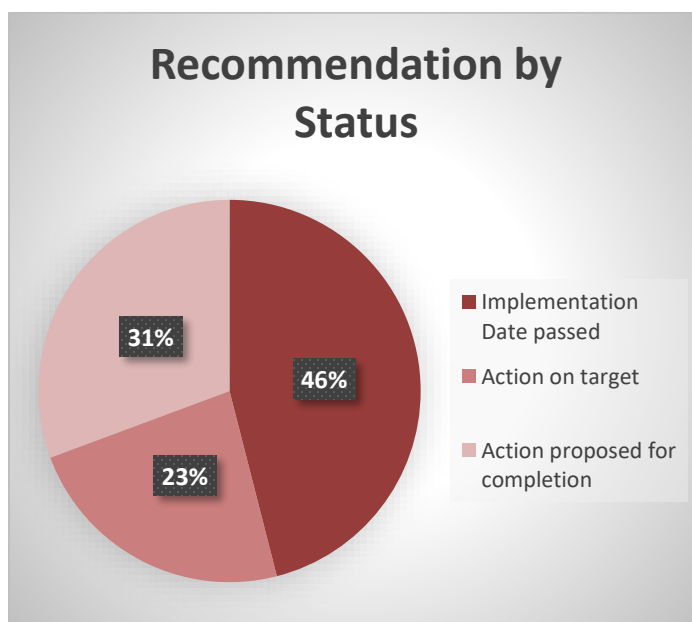
- 1.2 This report relates to both internal and external audit review recommendations.
- 1.3 It has been proposed that a workshop is held with Executive Directors during September to focus on the long standing recommendations which still remain outstanding following the August updates received. This workshop has been schedule to take place on the afternoon of Tuesday 20 September.

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. Members will note a further 50 internal audit recommendations have been completed/closed and are proposed for removal from the tracker, together with 6 external audit recommendations, some of which are historical and have been superseded and explanations have been included where relevant on the tracker.

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	45	27	6	12
Medium	95	41	29	25
Low	23	7	3	13

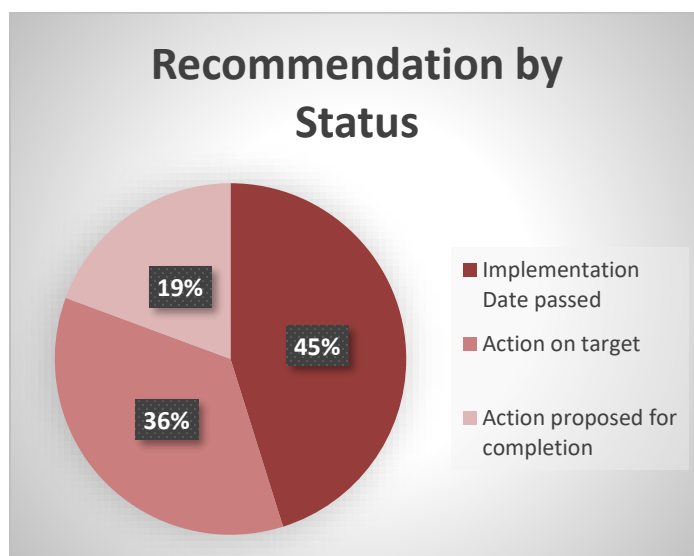
Recommendations by Executive Lead & Status				
Executive Lead	Total	Implementation Date passed	Action on target	Actions Completed
Director of Corporate Governance	24	10	10	4
Director of Finance	54	25	5	24
Chief Operating Officer	46	23	9	14
Director of Nursing	1	0	0	1
Director of Digital	11	4	2	5
Director for People	23	12	9	2
Director of Public Health	1	1	0	0
Medical Director	3	0	3	0



Implementation Date Extended by					
Priority	TOTAL	More than 24 Months	18-24 Months	12-18 Months	6-12 Months
High	19	4	2	3	10
Medium	38	9	1	8	20
Low	6	0	0	4	2

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	TOTAL	Implementation Date passed	Action on target	Actions Completed
High	24	11	9	4
Medium/Low	7	3	2	2



Recommendations by Executive Lead & Status				
Executive Lead	Total	Implementation Date passed	Action on target	Actions Completed
Director of Corporate Governance	4	0	4	0
Chief Operating Officer	6	3	1	2
Director of Nursing	16	10	2	4
Director for People	3	1	2	0
Medical Director	2	0	2	0

Implementation Date Extended by					
Priority	TOTAL	More Than 24 Months	18-24 Months	12 - 18 Months	6 -12 Months
High	18	1	3	4	10
Medium/Low		4	0	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.
- 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 (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below)
	<p>If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below.</p> <p>If no, please provide reasons why an EIA was not considered to be required in the box below.</p>
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 Goals	Improving Care

5. RECOMMENDATION

5.1 The Audit & Risk Committee are being asked to **NOTE** the report and agree assurances provided in particular relation to closed recommendations.