

Cwm Taf Morgannwg University Health Board

Audit & Risk Committee Internal Audit Progress Report

February 2023

NWSSP Audit and Assurance Services



Partneriaeth Cydwasanaethau Gwasanaethau Archwilio a Sicrwydd Shared Services Partnership Audit and Assurance Services

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Appendix A – Tables showing detailed progress against audit plans



Audit and Assurance Services conform with all Public Sector Internal Audit Standards as validated through the external quality assessment undertaken by the Institute of Internal Auditors.

Acknowledgement

NHS Wales Audit & Assurance Services would like to acknowledge the time and co-operation given by management and staff during the course of this review.

Disclaimer notice - please note

This audit report has been prepared for internal use only. Audit & Assurance Services reports are prepared, in accordance with the Service Strategy and Terms of Reference, approved by the Audit & Risk Committee.

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1 Introduction

- 1.1 This progress report provides the Audit & Risk Committee (the 'Committee') with the current position of the work undertaken by Internal Audit as at **31 January 2023**. This report provides information on the status of progress of our reviews.
- 1.2 We report the progress made to date against individual assignments along with details regarding the delivery of the plans and any required updates.

2 Reports Issued

2.1 Since the December meeting of the Committee three reports have been finalised, two reports have been issued in draft, and we have ongoing fieldwork in relation to ten reviews. A summary of the position of the finalised reports, including a summary of number of recommendations, is provided below in Table 1.

Assignments	High	Medium	Low	Total	Assurance rating
Wellbeing	-	1	4	5	Substantial
Medical variable pay – agency costs	4	2	-	-	Limited
Follow up – Fire safety	-	2	-	-	Reasonable

Table 1 – Summary of finalised reports

3 Delivering the Plan

3.1 Our agreed performance indicators are set out in table 2 below:

Table 2 – Performance Indicators 2022/23

Indicator	Status	Actual	Target	Red	Amber	Green
Report turnaround: time from fieldwork completion to draft reporting [10 days]	Green	93% (13/14)	80%	v>20%	10% <v <20%</v 	v<10%
Report turnaround: time taken for management response to draft report [15 days per Internal Audit Charter]	Amber	67% (8/12)	80%	v>20%	10% <v <20%</v 	v<10%
Report turnaround: time from management response to issue of final report [10 days]	Green	100% (12/12)	80%	v>20%	10% <v <20%</v 	v<10%

4 Feedback

4.1 Our final reports are issued with a post audit questionnaire, which is our way of getting feedback on the audit process so that we can look to make improvements. In 22/23 we have issued the questionnaires in relation to the finalised reports, and have received six responses to date.

5 Other activity

Meetings

5.1 We continue to meet regularly with the officers of the Health Board, Counter Fraud, Audit Wales colleagues.

Planning for 2023/24

5.2 We have started our planning and will meet with directors and independent members over the next few weeks. We aim to present the plan at the next meeting of the Committee.

<u>Appendix A</u>

Table 3: 2022/23 reviews on main programme of work

Plan Ref.	Review	Rating	Review period	Status	Notes
27	Follow up - CAMHS - Workforce	Reasonable	1	Final	Went to August Committee
30	Follow up - Single cancer pathway: data quality and integrity	Reasonable	1	Final	Went to August Committee
1	Digital operating model	Limited	1	Final	Went to October Committee
6	Medical records management	Reasonable	1	Final	Went to October Committee
16	iCTM improvement team	Reasonable	3- 1	Final	December Committee
3	Clinical service group review - Radiology	Reasonable/ Limited	1	Final	December Committee
9	Wellbeing	Reasonable	2	Final	December Committee
20	Cyber security	Reasonable	3	Final	December Committee
2	Decarbonisation	Advisory	1 2	Final	December Committee
26	Follow up - Fire safety	Reasonable	-	Final	February Committee

Plan Ref.	Review	Rating	Review period	Status	Notes
8	Board awareness of digital	Reasonable	2	Draft	Planned February Committee
12	Medical variable pay	Limited	2	Draft	February Committee
4	Reasonable offer	-	1 2	WIP	Planned February Committee, but fieldwork has taken longer to complete.
28	Follow up - Bridgend transfer of IT	-	4	WIP	Fieldwork ongoing
N/A	Follow up - Facilities governance	-	3	WIP	Fieldwork started 16.01.23
14	Risk management	-	3 4	WIP	Move to Q4 as prior year was delayed to 21/22 Q4. Fieldwork started 21.12.23
15	Performance monitoring and management	-	3	WIP	Fieldwork started 12.01.23
17	SLA arrangements		3	WIP	Fieldwork started 16.01.23
N/A	Follow up - Patient pathway appointment management process	-	4	WIP	Fieldwork ongoing

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Plan Ref.	Review	Rating	Review period	Status	Notes
5	National incident framework	-	1 4	WIP	Moved to Q4 new framework needs time to embed. Fieldwork started 23.01.23
24	Welsh Risk Pool	-	4	Planned	Brief agreed
29	Follow up - Concerns	-	4	Planned	Brief agreed
7	Financial systems (financial savings)	-	2 4	Planning	Request move to Q4 for implementation of OM. Brief issued 26.01.23
18	Health system	-	3	Planning	Initial planning meeting held on 22.11.22
13	Recruitment and retention	-	2 4	Planning	Planning meeting 11.07.22. Management request to move to Q4
10	Service configuration to meet cancer targets	-	2 4	Planning	Management request to move to Q4. Discussed with COO 01.12.22. Awaiting information.
25	Decontamination	-	4	Planning	Planning meeting 21.12.22 and second 19.01.23

Plan Ref.	Review	Rating	Review period	Status	Notes
11	Interventions Not Normally Undertaken (INNU)	-	2 4	Planning	Discussed with COO 01.12.22. Awaiting information.

Table 4: Status of PCH plan 2022/23

This table sets out the position of our work relating to the Prince Charles Hospital development that was outstanding at the time of the previous meeting of the committee.

Assignment	Status	Assurance	Notes
1B Final Account	Final	Substantial	-
Validation of management action	Final	Substantial	-
Change, risk and contingency	WIP	-	Audit work a little behind. Will go to April Committee.
Governance	WIP	-	Audit work a little behind. Will go to April Committee.

Table 5: Hosted bodies plan 2022/23

Ref.	Review	Rating	Status	Notes
32	WHSCC – Quality unit	-	Final	-
33	WHSSC – Neurosciences	-	Final	-
31	EASC review	-	Planning	Draft brief issued 16.01.23
35	WHSSC – Mental health	-	Defer	Defer to next year as mental health strategy yet to be finalised.