



**AGENDA ITEM**

5.1

**AUDIT & RISK COMMITTEE**

**AUDIT RECOMMENDATIONS TRACKER UPDATE REPORT**

<b>Date of meeting</b>	23/06/2022
<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

**Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)**

<b>Committee/Group/Individuals</b>	<b>Date</b>	<b>Outcome</b>

**ACRONYMS**

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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.

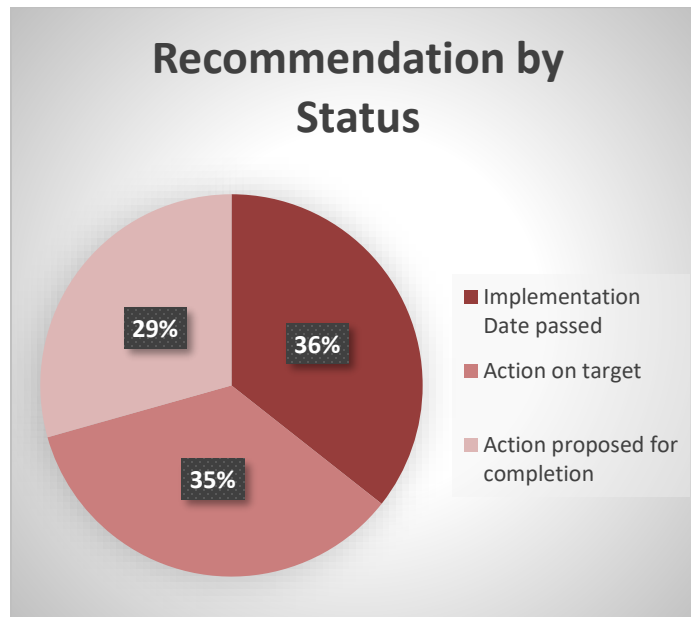
1.2 This report relates to both internal and external audit review recommendations.

## 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. Members will note a further 47 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removal from the tracker, together with 6 external audit recommendations, some of which are historical and have been superseded and explanations have been included where relevant on the tracker.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	35	20	4	7
Medium	104	30	41	33
Low	21	7	7	7

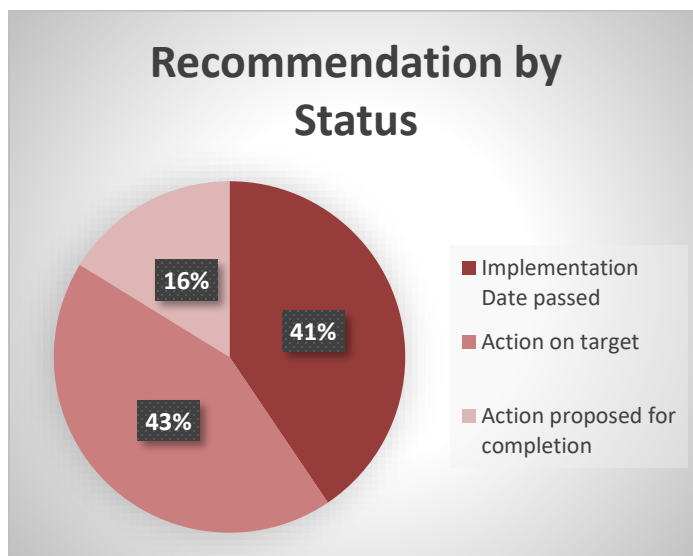
Recommendations by Executive Lead & Status					
Executive Lead	Total	Implementation Date passed	Action not on target	Action on target	Actions Completed
Director of Corporate Governance	23	9	0	11	3
Director of Finance	28	5	0	16	7
Chief Operating Officer	45	28	0	5	12
Director of Nursing	11	1	0	0	10
Director of Digital	18	2	0	9	7
Director for People	28	10	0	13	5
Director of Public Health	1	1	0	0	0
Medical Director	6	1	0	2	3



Implementation Date Extended by					
Priority	TOTAL	More than 24 Months	18-24 Months	12-18 Months	6-12 Months
High	20	2	5	5	8
Medium	36	9	3	4	20
Low	9	0	0	3	6

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	26	10	14	2
Medium/Low	11	5	2	4



Recommendations by Executive Lead & Status				
Executive Lead	Total	Implementation Date passed	Action on target	Actions Completed
Director of Corporate Governance	5	2	2	1
Director of Finance	4	0	0	4
Chief Operating Officer	6	6	0	0
Director of Nursing	16	6	9	1
Director for People	3	1	1	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	24	2	1	4	14
Medium/Low	6	5	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

<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 (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.</b>	No (Include further detail below)
	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.
<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 Goals</b>	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.