AUDIT TRACKER UPDATE WALES AUDIT OFFICE/AUDIT WALES OVERDUE ACTIONS MEASURED AGAINST ORIGINALLY AGREED DEADLINES

Executive Lead - Chief Operating Officer								
122A2015 A Comparative	Rec Ref	Findings & Recommendation	Original Response / Agreed Action	Original Agreed Deadline	Most Recent Update/Comment	Revised Deadline		
Picture of Local Orthopaedic Services Report Issued January 2015	8	Inpatient Services: Inpatient waiting times: • The percentage of patients waiting more than 26 weeks for an inpatient or day-case admission is increasing and is now above the all-Wales average.	The health board is developing plans to create a sustainable orthopaedic service in conjunction with the Welsh Orthopaedic Board. Each delivery unit will be tasked with tackling the waiting times as part of the integrated medium term plan. Both sustainable solutions and removal of backlog are critical	31/03/2018	June 2022 Update: The Development of a whole system model for NPTH as a centre for Orthopaedic and Spinal services forms a key element of our Recovery & Sustainability Plan. In addition, WAO/AW have undertaken a follow-up review in this area, and their report is awaited. This recommendation will be re-visited in light of the content of that report. Consequently, the deadline date for this action has been revised to 31/07/2022	31/07/2022		
255A2017-18 Discharge Planning Report Issued January 2018	2(b)	The Health Board has clear plans for working collaboratively with local authorities to improve discharge planning, supported by a generally comprehensive discharge policy. There are a number of pathways in place, however links between generic and specific pathways are unclear, and they are not clearly set out in the discharge policy. The Health Board should review all of the current pathways in use and use the opportunity to: - consider rationalising them (eliminating any unnecessary overlaps); - make clearer the links between each of the pathways; - make clearer any explanatory information; - set out all of the pathways in one place; and - ensure that pathways are consistent across the Health Board	Agreed. A particular focus in 2018-19 will be a review of the falls pathway for patients who have not sustained a bone injury.	30/04/2018	June 2022: This action is linked to the clearance of recommendations made as part of the NWSSP A&A review of this area, and has been delayed as a result of the secondment of the Head of Nursing (Patient Flow). An SBAR report has been produced and shared with Executive colleagues, and consideration is currently being given as to how best to take this matter forward.	30/06/2022		
	3(a)	Although staff are generally aware of the discharge planning process, there were gaps in the training arrangements and staff confidence needed to be addressed. The Health Board should ensure that attendance at training is captured on the Electronic Staff Record, which will help to improve compliance monitoring.	It is planned to reinstate the 'speed dating' sessions for hospital staff on discharge planning. Staff attending all training sessions will be encouraged to ensure that attendance is captured via ESR records.	30/04/2018	June 2022: This action is linked to the clearance of recommendations made as part of the NWSSP A&A review of this area, and has been delayed as a result of the secondment of the Head of Nursing (Patient Flow). An SBAR report has been produced and shared with Executive colleagues, and consideration is currently being given as to how best to take this matter forward.	30/06/2022		

Rec Ref	Findings X. Recommendation	Original Response / Agreed Action	Original Agreed Deadline	Most Recent Update/Comment	Revised Deadline
3(b) (iv)		Refresh nurse led discharge in a new context of right clinician led discharge (to include therapists). A clinical governance framework to promote and encourage nurse and therapy led discharge is currently under development.		June 2022: This action is linked to the clearance of recommendations made as part of the NWSSP A&A review of this area, and has been delayed as a result of the secondment of the Head of Nursing (Patient Flow). An SBAR report has been produced and shared with Executive colleagues, and consideration is currently being given as to how best to take this matter forward.	30/06/2022

	Executive Lead – Director of Corporate Governance							
1654A2019-20	Rec Ref	Findings & Recommendation	Original Response / Agreed Action	Original Agreed Deadline	Most Recent Update/Comment	Revised Deadline		
Structured Assessment 2019	1	delivery plans. It will be important that asset and capital	The health board has commissioned the services of a Specialist consultant to support the organisation in the development of an estate plan.	30/04/2020	June 2022: We have yet to receive the final 6-Facet Survey or Estates Strategy work. Suggest amended deadline of September 2022	30/09/2022		
Report Issued December 2019			An outline estate plan has been developed to underpin the clinical services plan.					
		The Health Board should ensure that there are estates and asset plans to underpin the Clinical Services Plan and will need to ensure that asset and estates requirements are clearly defined and reflected in the long-term capital plan.	The Health Board will need to undertake a condition appraisal of the estate and this work is being progressed. It is anticipated that the estates plan will be finalised by April 2020.					

Executive Lead – Director of Strategy								
1513A2019-20	Rec Ref	Findings & Recommendation	Original Response / Agreed Action	Original Agreed Deadline	Most Recent Update/Comment	Revised Deadline		
Implementing the Wellbeing of Future Generations Act Report Issued October 2019	2	Our review found that the Health Board has not explicitly set out the steps it is taking to deliver wellbeing objectives or reported progress towards meeting them. The Health Board should set out the steps it is taking to deliver well-being objectives and report the progress towards delivering them.	Through our IMTP we will set out our plans for delivering our well-being objectives. Our progress towards delivering these will be included in our Performance Management Framework. We have recently incorporated Public Health Measures in our Performance Reports, and we will look at new ways of capturing our performance reporting across all service areas, to ensure alignment with the Performance Management Framework once developed. We will use/develop our well-being measures more systematically to identify areas of best practice and target interventions at identified areas of additional support. We will need to further develop new ways of reporting to incorporate both in our Performance Reports to Board, Annual Report and other documents. We will ensure that our internal Performance Reviews have a clear focus on how we are all responding to the Act.	31/03/2020	April 2021: Reporting against the Health & Wellbeing Objectives has been integrated into the overall reporting against the R&S Plan, and the first update will be produced R&S Plan Quarter 1 report to the Management Board, and subsequently to the Board in July. Noting the foregoing, the deadline has been extended to 31/07/2022 in order to evidence reporting.	31/07/2022		
	5	It is unclear how the Health Board will evaluate the impact on health and wellbeing of staff, patients and service users to ensure that that individual sites achieve the best outcomes for users. The Health Board should determine how It will evaluate the impact on health and well-being of staff, patients and service users and ensure that that individual sites achieve the best outcomes for users.	In line with outcomes and benefits outlined in the project's Delivery Plan Biophilic Wales will develop an Outcomes Framework linked to the Project Objectives. This will include specific measurement tools such as Warwick-Edinburgh Mental Wellbeing to assess mental well-being, alongside methods to measure increase in volunteer uptake etc. Annex A of the Swansea Bay Biophilic Wales project delivery plan sets out detailed arrangements to evaluate the impact on the health and well-being of staff, patients and service users.	31/07/2020	April 2021: Reporting against the Health & Wellbeing Objectives has been integrated into the overall reporting against the R&S Plan, and the first update will be produced R&S Plan Quarter 1 report to the Management Board, and subsequently to the Board in July. Noting the foregoing, the deadline has been extended to 31/07/2022 in order to evidence reporting.	31/07/2022		