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WALES

Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	19th May 2022		Agenda Item	5.1
Report Title	Audit Registers and Status of Recommendations			
Report Author	Len Cozens, Head of Compliance			
Report Sponsor	Hazel Lloyd, Acting Director of Corporate Governance			
Presented by	Len Cozens, Head of Compliance			
Freedom of Information	Open			
Purpose of the Report	The purpose of this report is to provide summary extracts from the Health Board's audit registers, which have been developed to assist in monitoring and reporting on the status of agreed audit recommendations and progress against management responses.			
Key Issues	<p>Action plans in respect of all final audit reports are available on the Finance Portal through SharePoint for managers and executives to access and update throughout the year.</p> <p>Training has been provided to executives and the named managers within the action plans. The deadlines for the reporting periods to the Audit Committee are clearly set out within the file set up.</p> <p>This report includes all updates to audit registers made up to and including the 22nd April 2022.</p> <p>There has been a reduction in the number of overdue actions relating to both NWSSP and Audit Wales reports.</p> <p>The Head of Compliance continues to work with Capital team colleagues to address agreed actions without calendar deadline dates, in order to establish which of these have now been completed, and to agree appropriate milestone/review dates for the remainder.</p>			
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance	Approval
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> • NOTE the current position of the Audit Registers and the status of the action plans. • AGREE any specific areas where the Committee feel that further assurance is required in order that these may be addressed with the relevant Lead Executive. 			

AUDIT REGISTERS AND STATUS OF RECOMMENDATIONS

1. INTRODUCTION

- 1.1 The purpose of this report is to provide summary extracts from the Health Board's audit registers, which have been developed to assist in monitoring and reporting on the status of agreed audit recommendations and progress against management responses.

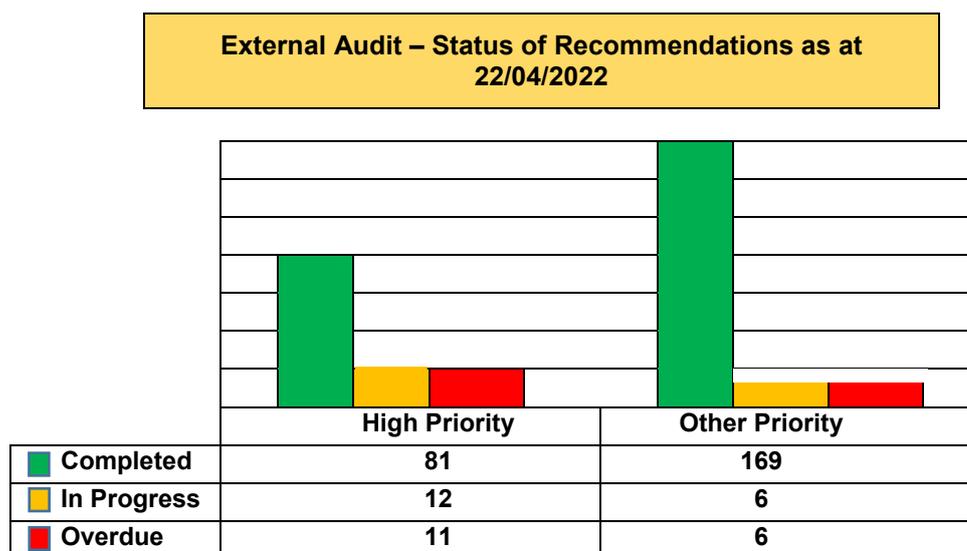
2. BACKGROUND AND CONTEXT

- 2.1 The Audit Committee receives and considers a number of reports as part of normal business, which provide information and assurance in respect of:
- The delivery of the Audit Plans;
 - Receipt of draft and final reports; and
 - Health Board management responses to recommendations contained therein
- 2.2 This report is intended to provide assurance in respect of performance in implementing agreed action across all reports received from both NWSSP Audit & Assurance, and Audit Wales.
- 2.3 Action plans in respect of all final audit reports are available on the Finance Portal through SharePoint for executives and managers to access and update throughout the year. Training has been provided to executives and the named managers within the action plans. The deadlines for the reporting periods to the Audit Committee are clearly set out within the file set up.
- 2.4 It should be noted that the charts and tables within this report relate to reports where outstanding recommendations remain, regardless of the age of the report. Where recommendations have been superseded by the content of later reports, then the original recommendation has been closed and does not form part of the following.

3. STATUS UPDATE – AUDIT WALES (FORMERLY WAO) REPORTS

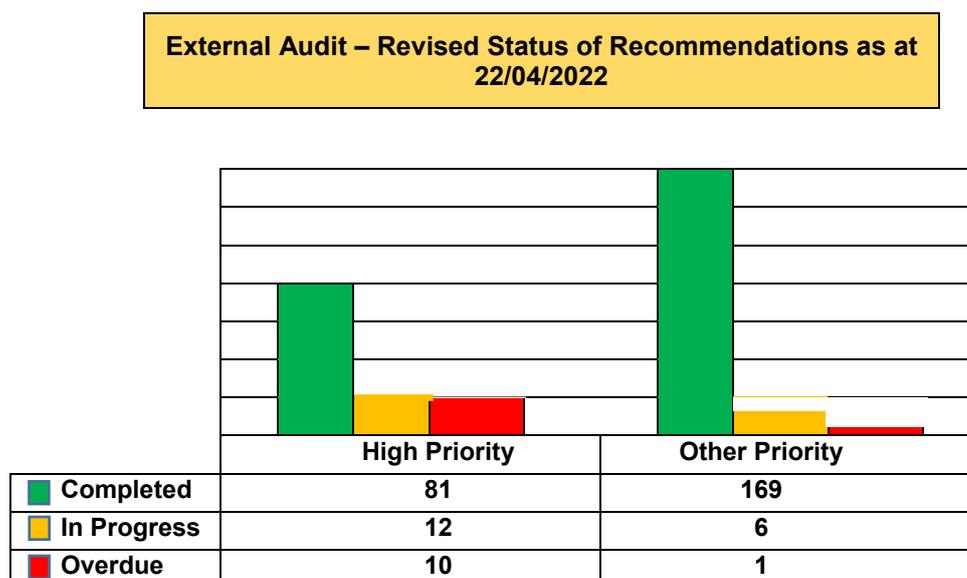
3.1 The following sets out the current position in respect of performance in implementing agreed actions stemming from Audit Wales (formerly WAO) recommendations, when measured against the **original deadlines** agreed by management at the time the reports were finalised.

Fig 1: Audit Wales Reports (Original Deadlines)



3.2 In certain circumstances, factors beyond the control of the implementing officer(s) may mean that the agreed date for implementation of the actions cannot be achieved, and a revised target implementation date is required. The following measures progress taking into account these **revised deadlines**.

Fig 2: Audit Wales Reports (Revised Deadlines)



3.3 This represents a reduction in the number of overdue recommendations when compared with the last report to Audit Committee (March 2022), which recorded a total of 15 overdue recommendations. The reason for this movement is the closure/removal of duplicate actions relating to the Discharge Planning audit.

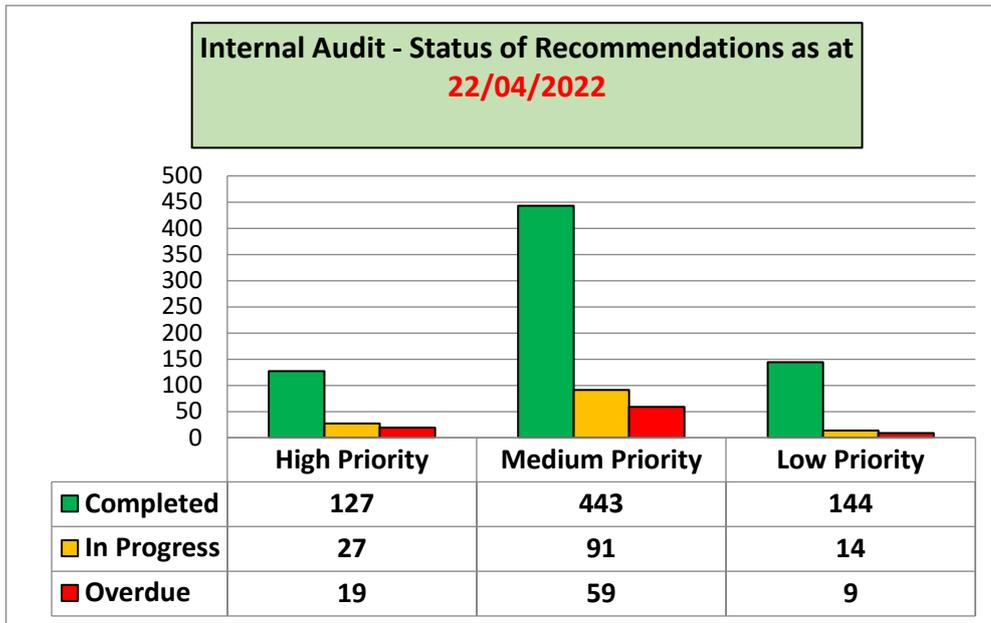
3.4 A summary of the outstanding actions is set out in the table below, with a detailed breakdown included at **Appendix A** for information.

Report Title	Number of Overdue Recommendations	
	High Priority	Other Priority
Exec Lead: Chief Operating Officer		
Discharge Planning	1	1
Primary Care Services	9	-
Total	10	1

4. STATUS UPDATE – NWSSP AUDIT & ASSURANCE REPORTS

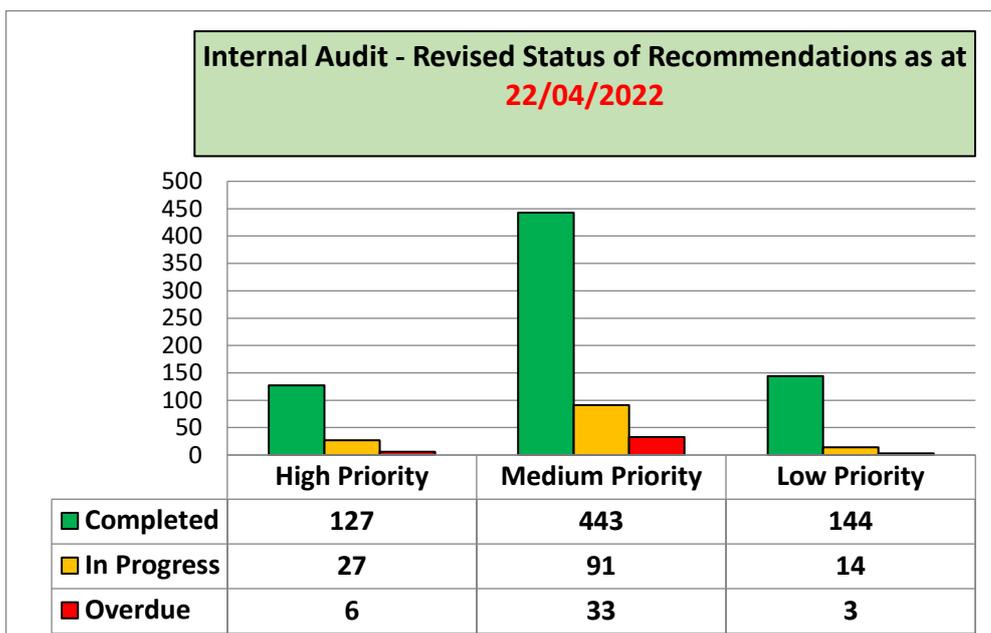
4.1 The following sets out the current position in respect of performance in implementing agreed actions stemming from NWSSP Audit & Assurance recommendations, when measured against the **original deadlines** agreed by management at the time the reports were finalised.

Fig 3: NWSSP Audit & Assurance Reports (Original Deadlines)



4.2 In certain circumstances, factors beyond the control of the implementing officer(s) may mean that the agreed date for implementation of the actions cannot be achieved, and a revised target implementation date is required. The following measures progress taking into account these **revised deadlines** as notified by management.

Fig 4: NWSSP Audit & Assurance Reports (Revised Deadlines)



- 4.3 This represents a decrease in the number of overdue recommendations when compared with the last report to Audit Committee (March 2022), which recorded a total of 51 overdue recommendations. The main reasons for this movement can be summarised as follows:
- 7 actions have been recorded as completed
 - The relevant Executive Lead or their team has extended the deadlines for 6 agreed actions.
 - A total of 4 further actions have become overdue since the last report
- 4.4 A summary of the outstanding actions reference at Fig 4 is set out at **Appendix B**, with a detailed breakdown included at **Appendix C** for information. In addition, with reference to Appendix C:
- The actions that have become overdue since the last report are highlighted in blue.
 - Where Executive Leads or their teams have indicated the need to extend the originally agreed action deadlines since the last report, these revised dates are highlighted in yellow.
- 4.5 Further detail on all actions completed since the last report, including any comment made by the Executive Leads or their teams, has been included at **Appendix D**.

5. AGREED ACTIONS WITHOUT CALENDAR DEADLINE DATES

- 5.1 As previously reported, it has become apparent that a number of agreed actions stemming primarily from NWSSP Audit & Assurance reviews do not have calendar deadline dates. Rather, it was agreed at the point of report finalisation that due to their nature, these actions would be completed at future points in ongoing projects, or as part of future projects, with no specific deadline dates being recorded. Further review has confirmed that the vast majority of these relate to reviews of capital projects.
- 5.2 The Head of Compliance continues to work with Capital team colleagues in order to establish which of these actions have now been completed, and to agree appropriate milestone/review dates for the remainder.

6. FINANCIAL IMPLICATIONS

- 6.1 There are no direct financial implications arising from this report.

7. RECOMMENDATIONS

- 7.1 Members are asked to:
- **NOTE** the current position of the Audit Registers and the status of the action plans.
 - **AGREE** any specific areas where the Committee feel that further assurance is required in order that these may be addressed with the relevant Lead Executive.

Governance and Assurance		
Link to Enabling Objectives <i>(please choose)</i>	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
Outstanding Research, Innovation, Education and Learning		<input type="checkbox"/>
Health and Care Standards		
<i>(please choose)</i>	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
Outstanding audit recommendations may affect quality, safety and patient experience. It is essential that where audit recommendations are made, they are acted upon with leadership from the relevant Executive Director. Reports addressing quality and safety issues are discussed in more detail in the Quality & Safety Committee.		
Financial Implications		
Whilst there are no direct financial implications that need to be highlighted in this report, there may be issues arising from individual audit reports or recommendations made which have financial implications for the health board.		
Legal Implications (including equality and diversity assessment)		
Failure to address audit recommendations relating to areas such as staff and/or patient safety, or legislative compliance, may lead to action being taken against the health board.		
Staffing Implications		
There are no staffing implications associated with this paper.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
A robust Governance Work Programme will assist the Board in assessing risk and gathering assurance across all corporate objectives, which span the five ways of working, and the wellbeing goals identified in the Act.		
Report History	N/A	
Appendices	Appendix A	Overdue Audit Wales Agreed Actions
	Appendix B	Overdue NWSSP Agreed Actions (Summary)
	Appendix C	Overdue NWSSP Agreed Actions (Detail)
	Appendix D	Completed NWSSP Agreed Actions

