Internal Audit Progress Report

Audit Committee

September 2021

Swansea Bay University Health Board

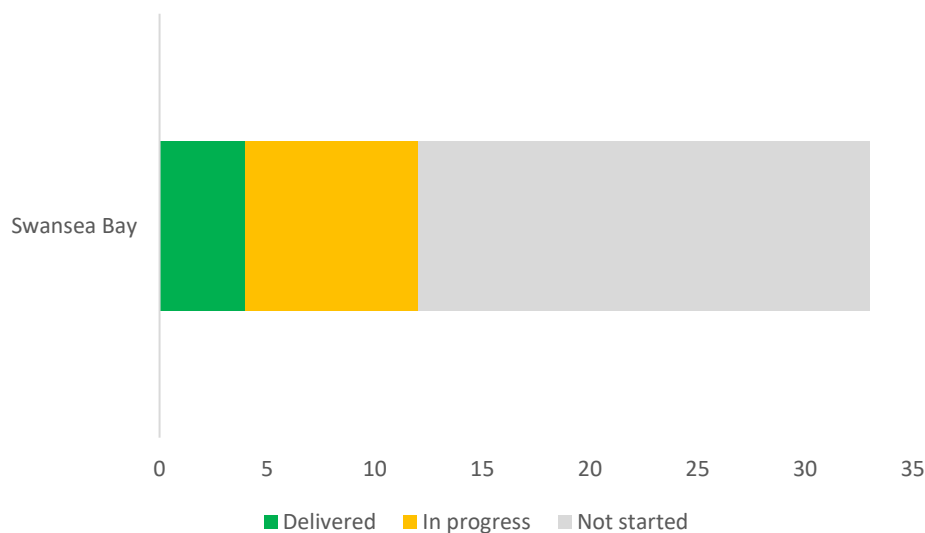NWSSP Audit and Assurance Services

Contents

1. Introduction

The purpose of this report is to:

- highlight progress of the 2021/22 Internal Audit Plan to the Audit Committee; and

- provide an overview of other activity undertaken since the previous meeting.

2. Progress against the 2021/22 Internal Audit Plan

There are 33 reviews in the 2021/22 Internal Audit Plan, and overall progress is shown below.

Detailed progress in respect of each of the reviews in the 2021/22 Internal Audit Plan is summarised in Appendix A.

3. Proposed changes to approved plan

- Our review of decarbonisation moves from quarter 2 to quarter 4 due to WG timelines;

- Management has requested that our review of I.T. project management be deferred to Q4 from Q2 as planned due to resource availability; and

- Service governance arrangements – as this work is still at development stage, following discussion with management, we propose to support in an advisory capacity and defer the full review to early 2021/22.

4. Engagement

The following meetings have been held/attended during the reporting period:

- Observation of Board and Committee meetings;

- Audit scoping and debrief meetings;

- Liaison with senior management; and

- Liaison with external regulators.

5. Key Performance Indicators

- Correct on 31 August 2021

Indicator	Status	Actual	Target
Operational Audit Plan agreed for 2021/22	🟢	March	By 30 June
Audits reported over planned	🟢	3	4
Work in progress		6	
Report turnaround: time from fieldwork completion to draft reporting [10 days]	🟢	3 out of 3	80%
Report turnaround: time taken for management response to draft report [15 days]	🟢	*2 out of 2*	80%
Report turnaround: time from management response to issue of final report [10 days]	🟢	*1 out of 1*	80%

Key:

- 🔴 v>20%
- 🟡 10%<v<20%
- 🟢 v<10%

6. Recommendation

- The Audit Committee is invited to note the above; and
- Approve the proposed changes at section 3.

Appendix A: Progress against 2021/22 Internal Audit Plan

Review	Status	Rating	Summary of recommendations	Anticipated Audit Committee[1]
Risk management and BAF	Not started			TBC
Quality & Safety Governance Framework	Not started			TBC
Financial reporting & monitoring	Not started			TBC
Delivery Framework	Planning			November
NIS Directive	Not started			March 2022
Controlled Drugs Governance Framework	Not started			January 2022
Welsh Language Standards Compliance	Not started			TBC
Standards of Business Conduct - Declarations	Not started			TBC
Covid-19 review	Not started			TBC
Partnership governance- SBUHB & HDHB	Not started			TBC
Mental health legislative compliance	Work in progress			November
Annual planning approach	Draft report	Reasonable		November
Planned care recovery arrangements	Not started			TBC
Digital Strategy implementation	Not started			January
Procurement & tendering	Work in progress			November
External Standards assurance	Not started			TBC

[1] May be subject to change

Review	Status	Rating	Summary of recommendations	Anticipated Audit Committee[1]
Safety notices & alerts	Not started			January 2022
Child & Adolescent Mental Health Services (CAMHS)	Work in progress			November
E-prescribing	Work in progress			November
I.T. project management	Management request to delay			March
Service management	Draft report	Reasonable		September
Service Group governance arrangements	Not started			N/A
General Dental Services	Work in progress			November
Staff wellbeing & occupational health	Final report	Reasonable	Seeking feedback to assess the effectiveness of the health and wellbeing initiatives the health board has invested in; seeking feedback on recommendations made by the service in response to referrals received; manager training; and monitoring and reporting progress made in implementing the OH Transformation Plan.	September
Electronic Staff Record (ESR) – manager self service	Not started			January
Capital & Estates				
Waste management	Not started			TBC
Decarbonisation	Not started			TBC
Follow Up Action Tracker	Not started			TBC
Follow up (Capital)	Not started			TBC
Follow up (Estate's assurance)	Not started			TBC

Review	Status	Rating	Summary of recommendations	Anticipated Audit Committee[1]
Elective Orthopaedic Unit development	Work in progress			November
Singleton Hospital replacement cladding	Work in progress			November
Environmental/modernisation infrastructure programme	Final report	Reasonable	The need to: assess and quantify residual risk and monitor against contingency; monitor costs against approved funding and contracts; and monitor and pay according to a defined and costed activity schedule.	September

[1] May be subject to change