





| Report | Meeting Date | 15 th September | 2022 | Agenda Item | | 2.3 |
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| Report Sponsor | Report Title | Audit Registers | and Status of R | ecommendation | s | |
| Presented by Freedom of Information 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 aud recommendations and progress against management responses. Key Issues Action plans in respect of all final audit reports are available on the Finance Portal through SharePoint for managers and executive to access and update throughout the year. The deadlines for the reporting periods to the Audit Committee are clearly set out within the file setup. This report includes all updates to audit registers made up to an including the 24th August 2022. In respect of AW/WAO reports, there are currently five action overdue when measured against their revised deadline dates which represents a small increase when compared to the last report. In respect of NWSSP reports, there are currently 21 action overdue when measured against their revised deadline dates which represents a small decrease when compared to the last report. In terms of overall trajectory, there has been a significant reduction in the number of overdue actions over the last 18 months. Guidance notes have been produced and distributed to assist users in the review and update of the Tracker. Specific Action Required (please choose one only) Members are asked to: NOTE the current position of the Audit Registers and the status of the action plans, and the improved performance trajectory over the last 18 months. | Report Author | Len Cozens, Head of Compliance | | | | |
| Purpose of the Report | Report Sponsor | | | | | |
| Information | Presented by | Len Cozens, He | ad of Compliance | | | |
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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. The deadlines for the reporting periods to the Audit Committee are clearly set out within the file set up, and guidance notes have been produced and distributed to assist users in the review and update of the Tracker.
- 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. PERFORMANCE TRAJECTORY

3.1 In order to provide Committee members with additional assurance regarding overall performance in dealing with overdue actions, an analysis has been undertaken which compares the position reported to the Committee in January 2021, with that reported in July 2022. It should be noted that this analysis measures performance against the original deadlines agreed by management at the time the reports were finalised. It takes no account of any subsequently extended deadline dates.

Audit Wales (Wales Audit Office)

| | Recommendation Priority Rating | | |
|----------------------------------------|--------------------------------|-------|-------|
| | High | Other | Total |
| Overdue Actions January 2021 Report | 31 | 62 | 93 |
| Overdue Actions July 2022 Report | 2 | 5 | 7 |
| Reduction (%) | 93.5% | 91.9% | 92.5% |

NWSSP Audit & Assurance

| | Recommendation Priority Rating | | | |
|----------------------------------------|--------------------------------|--------|-------|-------|
| | High | Medium | Low | Total |
| Overdue Actions January 2021 Report | 37 | 132 | 25 | 194 |
| Overdue Actions July 2022 Report | 28 | 62 | 12 | 102 |
| Reduction (%) | 24.3% | 53.0% | 52.0% | 47.4% |

4. STATUS UPDATE - AUDIT WALES (FORMERLY WAO) REPORTS

4.1 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.

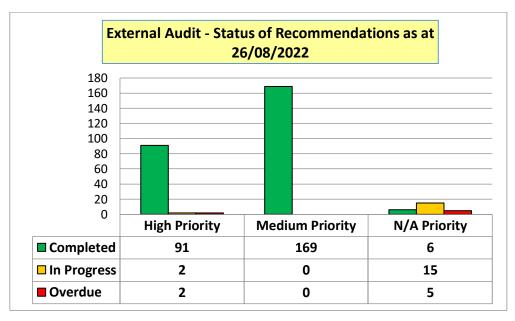


Fig 1: Audit Wales Reports (Original Deadlines)

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**.

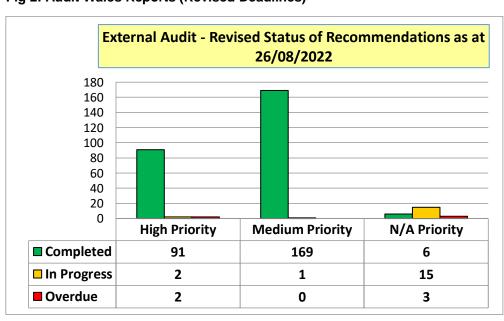


Fig 2: Audit Wales Reports (Revised Deadlines)

4.3 This represents a small increase in the number of overdue actions when compared with the last report to Audit Committee (July 2022), which recorded no overdue actions based on revised timescales. The reason for this movement is that five actions have become overdue since the last report. A summary of these overdue actions is set out in the table below:

| Panart Titla | Number of Overdue Actions | | |
|-------------------------------------|---------------------------|----------------|--|
| Report Title | High Priority | Other Priority | |
| Exec Lead: Chief Operating Officer | | | |
| Discharge Planning | 2 | 1 | |
| Exec Lead: Director of Strategy | | | |
| Wellbeing of Future Generations Act | - | 2 | |
| Total | 2 | 3 | |

5. STATUS UPDATE - NWSSP AUDIT & ASSURANCE REPORTS

5.1 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.

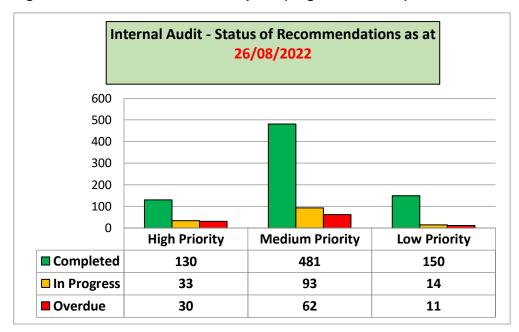


Fig 3: NWSSP Audit & Assurance Reports (Original Deadlines)

5.2 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.

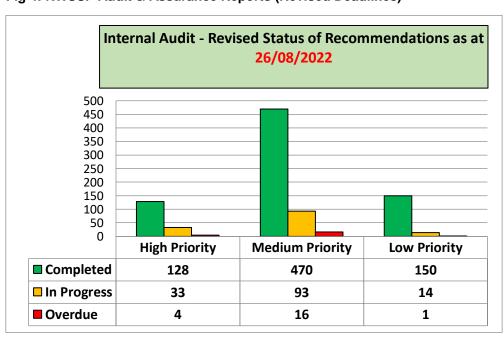


Fig 4: NWSSP Audit & Assurance Reports (Revised Deadlines)

- 5.3 This represents a decrease when compared with the last report to the Audit Committee (July 2022), which recorded a total of 28 overdue actions. The primary reasons for this movement can be summarised as follows:
 - The extension to deadlines and closure of agreed actions stemming from the Discharge Planning audit, following the identification of dedicated resource to take this piece of work forward.
 - The closure of further actions relating to Capital Assurance follow-up work.
 - This has however been offset by recommendations becoming overdue within the following reports
 - Quality & Safety Framework
 - Environmental Infrastructure Modernisation Programme
 - Elective Orthopaedic Unit
- 5.4 A summary table of all actions in progress is set out at **Appendix A**.

6. AUDIT TRACKER USER GUIDANCE NOTES

6.1 During July 2022, the Audit Tracker was moved onto a newer version of the SharePoint system, resulting in a change to some elements of functionality. This was used as an opportunity to produce a User Guide to assist users in navigating their way around the Tracker and updating their entries. A copy of the guide has been attached at **Appendix B** for information.

7. FINANCIAL IMPLICATIONS

7.1 There are no direct financial implications arising from this report.

8. RECOMMENDATIONS

- 8.1 Members are asked to:
 - NOTE the current position of the Audit Registers and the status of the action plans, and the improved performance trajectory over the last 18 months.
 - 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(s).

| Governance and Assurance | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|
| Link to Enabling | Supporting better health and wellbeing by actively empowering people to live well in resilient communities | promoting and | | | |
| Objectives | Partnerships for Improving Health and Wellbeing | | | | |
| (please choose) | Co-Production and Health Literacy | | | | |
| (January 1 | Digitally Enabled Health and Wellbeing | | | | |
| | Deliver better care through excellent health and care services achieving the outcomes that matter most to people | | | | |
| | Best Value Outcomes and High Quality Care | | | | |
| | Partnerships for Care | | | | |
| - | Excellent Staff | | | | |
| - | | | | | |
| - | Digitally Enabled Care Outstanding Research Innovation Education and Learning | | | | |
| | Outstanding Research, Innovation, Education and Learning | | | | |
| Health and Care | e Standards | _ | | | |
| (please choose) | Staying Healthy | | | | |
| | Safe Care | | | | |
| | Effective Care | | | | |
| | Dignified Care | \boxtimes | | | |
| | Timely Care | \boxtimes | | | |
| | Individual Care | | | | |
| | Staff and Resources | | | | |
| 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 Implic | ations | | | | |
| 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 | g implications associated with this paper. | | | | |
| Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015) | | | | | |
| | e Work Programme will assist the Board in assessing risk and ga objectives, which span the five ways of working, and the wellbein | | | | |
| Report History | N/A | | | | |
| Appendices | Appendix A Overdue NWSSP Agreed Actions (Summary) | | | | |
| , wpolidioos | Appendix B Audit Tracker User Guidance Notes | | | | |

Audit Tracker User Guidance Notes

Appendix B