

## **Cwm Taf Morgannwg University Health Board**

### **Internal Audit PROGRESS AND UPDATE REPORT**

**Audit & Risk Committee - December 2020**

**NHS Wales Shared Services Partnership  
Audit and Assurance Services**

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Table 1: Status of CTM 2020/21 reviews

**Please note:**

This audit progress report has been prepared for internal use only. Audit & Assurance Services reports are prepared, in accordance with the Internal Audit Charter and the Annual Plan, approved by the Audit & Risk Committee.

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## 1. Introduction

- 1.1. This progress and update report provides the Audit & Risk Committee (the 'committee') with the current position regarding the work undertaken by Internal Audit up to the submission of papers for the committee on 4 December 2020.
- 1.2. The report includes the progress made to date against individual assignments, along with relevant updates regarding the delivery of 2020/21 plan.

## 2. Summary of work

- 2.1 Since the October meeting of the committee, across the Health Board and its hosted bodies, two reports have been finalised, two have been issued in draft and we have ongoing fieldwork in 13 reviews.
- 2.2 All reports along with the allocated assurance rating are set out in the table below. The full versions of these reports are included in the committee's papers as separate items.

Reports	Assurance rating
PCH – Validation of management actions	Substantial
Head and neck directorate follow up of workforce recommendations	N/A

## 3. 2020/21 Internal Audit plan

- 3.1 Our original annual plan was based upon our discussions with management and our review of the risk register and supporting information before Covid-19. Although the plan was formally approved by the committee in April 2020, members acknowledged that the focus of the plan may change as a result of the pandemic's impact on the risk profile of the Health Board. We have previously reported updates to the original plan.
- 3.2 We continue to review our resourcing across all of our plans to work out timings and delivery for each health organisation, whilst also being mindful of the possible future impact to delivery as a result of the pandemic.

### **Covid-19 impact on annual reporting**

- 3.3 As time moves on we are seeing a continuing disruption caused by Covid-19 across our health bodies. As we have seen at the Health Board, the

experience of the year to date leads us to anticipate that it may not be possible to deliver our programmes of work in full. Therefore, we need to explore alternative routes to the provision of the Head of Internal Audit opinion if fewer reviews are delivered than planned, or the scopes of reviews are limited. There is a paper for this committee which sets out the current status of our work programme and looks forward towards the year end.

#### 4. Performance measures

4.1 In the table below we set out the current position of performance against the agreed measures for the 2020/21 programme of work.

Performance measure*	Reviews	Notes
Report turnaround: Time from fieldwork completion to draft reporting (within 10 working days) Target:80%	9/10 (100%)	IT Baseline review > 10 days
Report turnaround: Time taken for management response to draft report (within 15 working days) Target:80%	7/7 (100%)	-
Report turnaround: Time from management response to issue of final report (within 10 working days) Target:80%	7/7 (100%)	-

**Table 1: Status of CTM 2020/21 reviews to be reported at December 2020 committee or later**

Assignment	Status	Assurance	Planned Timing	Notes
IT service management	Draft	Limited	Q2	Report issued 24.11.20
IT Baseline review	Draft	N/A	Q2	Report issued 31.10.20
Data quality – patient pathway appointment management process – follow up review	Draft	Limited	-	Report issued 18.11.20
Head & neck directorate - follow up of workforce domain	Final	N/A	-	-
CAMHS – management arrangements	WIP	-	Q2	Fieldwork completed. Report being drafted.
CAMHS – compliance	WIP	-	Q2	Fieldwork completed. Report being drafted.
Estates – management arrangements	WIP	-	Q3	-
Estates – compliance	WIP	-	Q3	-
Risk management	WIP	-	Q3	Fieldwork ongoing.
Continuous improvement in response to targeted intervention	WIP	-	Q3	-

Assignment	Status	Assurance	Planned Timing	Notes
Prince Charles Hospital Development – capital project <ul style="list-style-type: none"> <li>• Validation of Management Action;</li> <li>• Governance;</li> <li>• Financial Management;</li> <li>• Technical Compliance; and</li> <li>• Covid-19 Related Issues.</li> </ul>	Final WIP WIP WIP WIP	Substantial - - - -	Q1-4	-
Facilities directorate – workforce follow up	WIP	-	Q3	
WHSSC – Financial systems	WIP	-	Q3	
Financial systems	WIP	-	Q3/Q4	
Data quality and integrity – Swansea Bay area data for performance measures	Planning	-	Q3	(Planned for December but IA staff sickness)
Transformation fund/partnership arrangements	Planning	-	Q3	Propose delay
Efficiency savings	Planning	-	Q3	Propose delay
Retention of staff - follow up	Planning	-	Q3	Fieldwork planned for December

Assignment	Status	Assurance	Planned Timing	Notes
Management of capital – Sunnyside project	Scoped	-	Q2-Q4	WG have approved so we plan to do work in Q4. Brief has been agreed.
Fire safety management	Scoped	-	Q2 Q4	Fieldwork planned Q4 work. Brief has been agreed.
Welsh Risk Pool (WRP) claim process	-	-	Q3 Q4	Management request to do in Q4 due to staff resourcing.
Quality and patient safety governance framework	-	-	Q3 Q4	Management request to move to Q4 to allow framework to bed in.
Data quality – ‘the reasonable offer process’	-	-	Q4	-
Medical rostering - follow up	-	-	Q4	-
Implementation of the operating model	-	-	Q4	Propose Delay
Health & Care Standards	-	-	Q4	-
Clinical audit	-	-	Q4	-
Digital health strategy	-	-	Q4	-
Integrated Locality Group review	-	-	Q4	-
Workforce planning	-	-	Q4	Propose Delay
Recruitment	-	-	Q4	-

Assignment	Status	Assurance	Planned Timing	Notes
Consultant job planning – follow up	-	-	Q4	-
WHSSC directorate	-	-	Q4	-
EASC – Amber review	-	-	Q4	-

**Table 2: CTM 2020/21 reviews previously reported**

Assignment	Status	Assurance	Planned Timing	Notes
Annual Governance Statement	Final	N/A	Q1	Provided feedback and input to the Health Board's governance statement
Sustainability reporting	Final	Substantial	Q1	-
Annual Quality Statement	Final	Substantial	Q2	-
Pathology directorate – follow up	Final	Reasonable	Q2	-
Covid-19 governance review	Final	Advisory	-	Advisory review
Medical agency	Final	Reasonable	-	This was a 2019/20 review that was paused due to the pandemic.