



AGENDA ITEM

5.1

AUDIT & RISK COMMITTEE

AUDIT RECOMMENDATIONS TRACKER UPDATE REPORT

Date of meeting	24/02/2022
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Emma Walters, Corporate Governance Officer
Presented by	Georgina Galletly, Director of Corporate Governance/Board Secretary
Approving Executive Sponsor	Director of Corporate Governance
Report purpose	FOR NOTING

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome

ACRONYMS

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1. SITUATION/BACKGROUND

- 1.1 The main purpose of this report is to present an update to the Audit & Risk Committee on reported progress of Audit report recommendations in the revised format.

1.2 This report relates to both internal and external audit review recommendations.

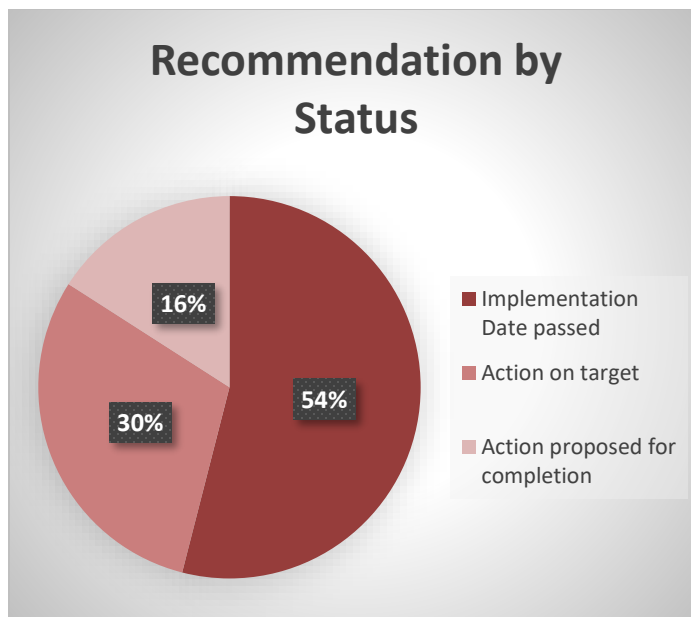
2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1 Steps have been taken to seek updates from Management leads in relation to outstanding internal and external audit recommendations which are classed as high/medium/low priority. Despite the pressures being experienced by teams in relation to Covid-19, Members will note a further 18 internal audit recommendations have been completed and are proposed for removal from the tracker, together with 16 external audit recommendations.

2.2 In relation to the External Audit Tracker and the recommendations relating to Orthopaedics, the picture on Orthopaedic services has changed considerably since this report was issued. Also the impact of COVID19 means that although these issues are still prevalent the approach to addressing them will be different. As Audit Wales will be producing a new output on Orthopaedics next year (2022) Audit Wales have proposed removing these recommendations with a view to new updated recommendations being added following their updated report which will better reflect the current context, challenge as well as management arrangements.

Internal Audit

2.3 The tables below provide a summary of the current position in relation to Internal Audit Recommendations, noting that there remains a large number in the proportion of red status indicating actions that won't be achieved in line with timescales, largely due to the impact of COVID-19:



Recommendations by Priority & Status				
Priority	TOTAL	Implementation Date passed	Action on target	Actions Completed
High	36	20	12	4
Medium	62	32	17	13
Low	15	11	3	1

Recommendations by Executive Lead & Status				
Executive Lead	Total	Implementation Date passed	Action on target	Actions Completed
Director of Corporate Governance	1	0	1	0
Director of Finance	19	13	6	0
Director of Operations	49	21	17	11
Director of Nursing	1	1	0	0
Director for People	18	13	4	1

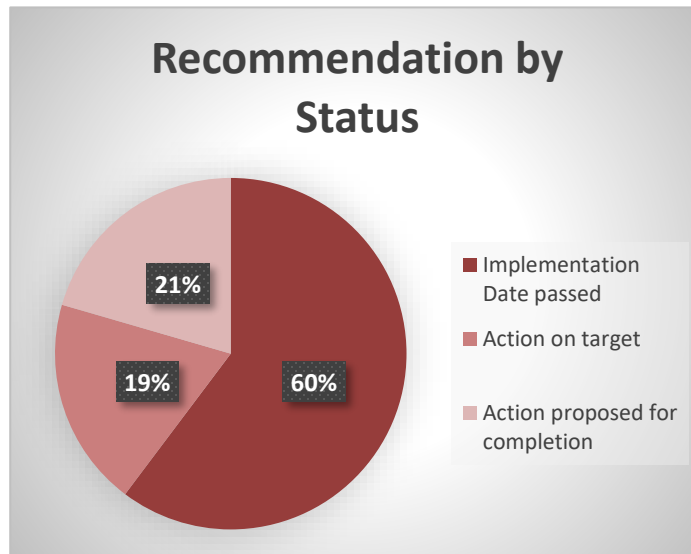


Director of Public Health	1	0	1	0
Director of Digital	17	12	2	3
Medical Director	7	3	1	3

Implementation Date Extended by					
Priority	TOTAL	More than 24 Months	18-24 Months	12-18 Months	6-12 Months
High	24	4	6	9	5
Medium	31	8	6	7	10
Low	5	0	0	4	1

External Audit (Audit Wales)

2.4 The tables below provide a summary of the current position in relation to External Audit Recommendations:



Recommendations by Priority & Status				
Priority	TOTAL	Implementation Date passed	Action on target	Actions Completed
High	46	26	7	13
Medium/Low	32	18	6	8



Recommendations by Executive Lead & Status				
Executive Lead	Total	Implementation Date passed	Action on target	Actions Completed
Chief Of Staff	3	0	1	2
Director of Corporate Governance	12	7	1	4
Director of Finance	5	1	4	0
Director of Operations	22	14	2	6
Director of Nursing	19	16	2	1
Director for People	9	4	1	4
Director of Public Health	1	0	0	1
Medical Director	7	2	2	3

Implementation Date Extended by					
Priority	TOTAL	More Than 24 Months	18-24 Months	12 - 18 Months	6 -12 Months
High	13	0	0	2	11
Medium/Low	16	1	1	12	2

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 As outlined in section 2, the audit tracker will continue to be updated.
- 3.2 The revised format will continue to be further refined over time, but aims to provide a more thorough tracker and audit tool for the Audit Committee.

4. IMPACT ASSESSMENT



Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	Robust internal processes aligned with a strong governance framework is essential to ensuring patients experience the greatest possible levels of safety and quality.
Related Health and Care standard(s)	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below)
	<p>If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below.</p> <p>If no, please provide reasons why an EIA was not considered to be required in the box below.</p>
Legal implications / impact	Yes (Include further detail below)
	There may be an adverse effect on the organisation if the UHB does not fully implement learning and improvements identified as part of Audit arrangements.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Goals	Improving Care

5. RECOMMENDATION

5.1 The Audit & Risk Committee are being asked to **NOTE** the report.