



**AGENDA ITEM**

3.2.2

**DIGITAL & DATA COMMITTEE**

**INTERNAL AUDIT – SERVICE MANAGEMENT – FOLLOW UP**

**Date of meeting**

22/06/2022

**FOI Status**

Open/Public

**If closed please indicate reason**

Not Applicable - Public Report

**Prepared by**

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Corporate Governance Manager

**Presented by**

Andrew Nelson, Chief Information Officer

**Approving Executive Sponsor**

Stuart Morris, Director of Digital

**Report purpose**

FOR NOTING

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

**Committee/Group/Individuals**

**Date**

**Outcome**

Digital Delivery Board

10/02/2022

Noted

Digital & Data Committee

23/03/2022

Noted

Audit & Risk Committee

28/04/2022

Noted

**ACRONYMS**

CTMUHB

Cwm Taf Morgannwg University Health Board



## 1. SITUATION/BACKGROUND

- 1.1 The purpose of this report is to inform the Digital & Data Committee of the progress against the Internal Audit into Service Management.
- 1.2 An initial Internal Audit was completed in March 2021 and resulted in a 'Limited Assurance' rating.
- 1.3 This follow-up report completed in March 2022 has been categorised as 'Reasonable Assurance' and was presented to the Audit & Risk Committee on the 28 April 2022 for noting.

## 2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING

- 2.1 Of the 12 observations identified 8 are closed.
- 2.2 All high priority observations have been closed.
- 2.3 The remaining actions are due to be completed during September 2022.
- 2.4 A new Head of Service Management has been appointed and took up post in the Spring of 2022.
- 2.5 The follow-up report is appended as 3.2.2b.

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

- 3.1 There are no key risks for escalation to the Board.

## 4. IMPACT ASSESSMENT

|   |   |
|---|---|
| <b>Quality/Safety/Patient Experience implications</b>   | There are no specific quality and safety implications related to the activity outlined in this report.  |
| <b>Related Health and Care standard(s)</b>  | Effective Care  |
| <b>Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.</b> | No (Include further detail below)<br><br>EIA will be considered as part of any new or changed processes |



|   |   |
|---|---|
| <b>Legal implications / impact</b>                                  | There are no specific legal implications related to the activity outlined in this report. |
| <b>Resource (Capital/Revenue £/Workforce) implications / Impact</b> | Yes (Include further detail below)<br>Appointment: New Head of Service Management         |
| <b>Link to Strategic Goals</b>                                      | Improving Care  |

## 5. RECOMMENDATION

- 5.1 The Committee are requested to **NOTE** the contents of the report and ongoing management actions.