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Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>17<sup>th</sup> November 2022</b>	<b>Agenda Item</b>	<b>2.2</b>
<b>Report Title</b>	<b>Audit Registers and Status of Recommendations</b>		
<b>Report Author</b>	Len Cozens, Head of Compliance		
<b>Report Sponsor</b>	Hazel Lloyd, Director of Corporate Governance		
<b>Presented by</b>	Len Cozens, Head of Compliance		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	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.		
<b>Key Issues</b>	<p>Action plans in respect of all final audit reports are available on the Finance Portal through SharePoint for managers and executives 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.</p> <p>This report includes all updates to audit registers made up to and including the 21<sup>st</sup> October 2022.</p> <p>In respect of AW/WAO reports, there are currently 11 actions overdue when measured against their originally agreed deadline dates, which represents a small increase when compared to the last report.</p> <p>In respect of NWSSP reports, there are currently 84 actions overdue when measured against their originally agreed deadline dates, which represents a significant decrease when compared to the last report.</p> <p>In terms of overall trajectory, there has been a significant reduction in the number of overdue actions since January 2021.</p> <p>Guidance notes have been produced and distributed to assist users in the review and update of the Tracker.</p>		
<b>Specific Action Required</b> <i>(please choose one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE</b> the current position of the Audit Registers and the status of the action plans, and the improved performance trajectory since January 2021.</li> <li>• <b>AGREE</b> 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).</li> </ul>		

# **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 included in this report. 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 revised milestone/target completion dates.

#### Audit Wales

	Recommendation Priority Rating		
	High	Other	Total
Overdue Actions January 2021 Report	31	62	93
Overdue Actions Nov. 2022 Report	2	9	11
<b>Reduction (%)</b>	<b>93.5%</b>	<b>85.5%</b>	<b>88.2%</b>

#### NWSSP Audit & Assurance

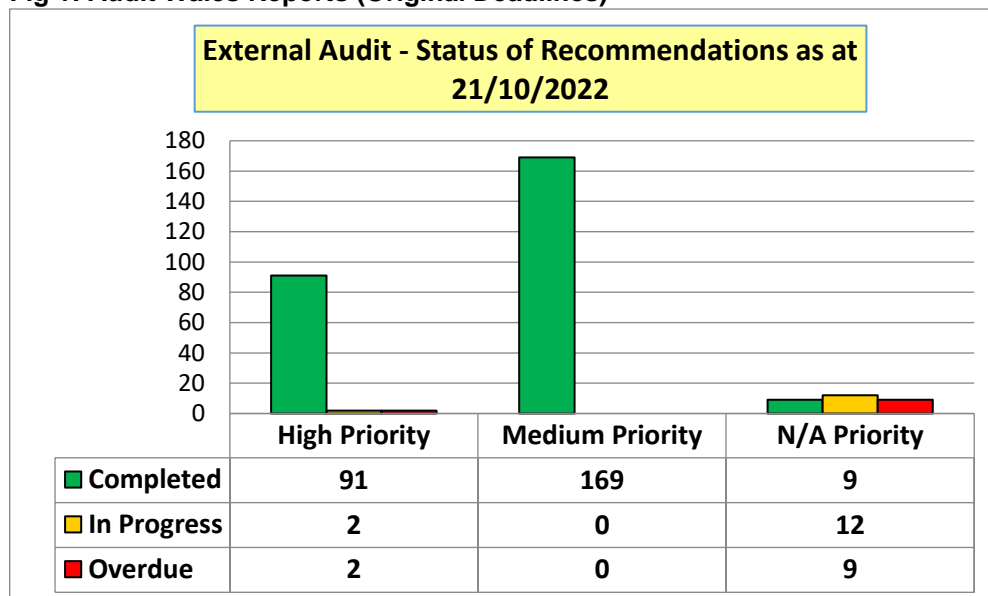
	Recommendation Priority Rating			
	High	Medium	Low	Total
Overdue Actions January 2021 Report	37	132	25	194
Overdue Actions Nov. 2022 Report	29	47	8	84
<b>Reduction (%)</b>	<b>21.6%</b>	<b>64.4%</b>	<b>68.0%</b>	<b>56.7%</b>

3.2 As can be seen from the tables above, there has been a significant improvement/reduction in terms of the number of overdue actions for both Audit Wales and NWSSP Audit & Assurance reviews.

#### 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.

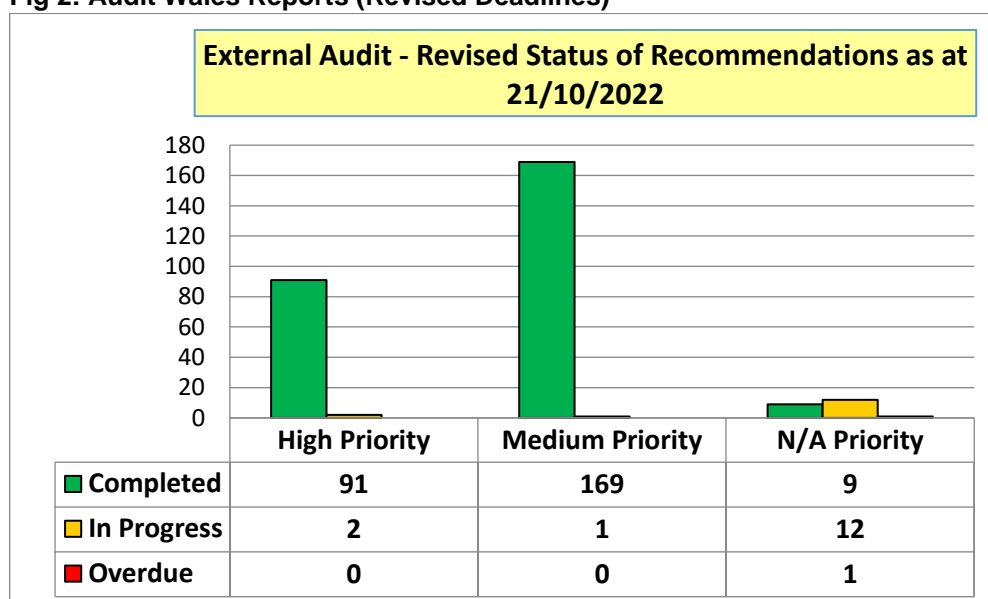
**Fig 1: Audit Wales Reports (Original Deadlines)**



4.2 This represents a small increase in the number of overdue actions when compared with the last report to Audit Committee (September 2022), which recorded seven agreed actions as being overdue. The reason for this movement is that four further actions relating to the Review of Quality Governance Arrangements have become overdue since the last report.

4.3 Where agreed actions have become overdue, implementing officer(s) are asked to provide revised milestone/target completion dates as part of their progress update. Taking these into account, the number of overdue actions would drop from 11 to one, as set out in the graph below:

**Fig 2: Audit Wales Reports (Revised Deadlines)**



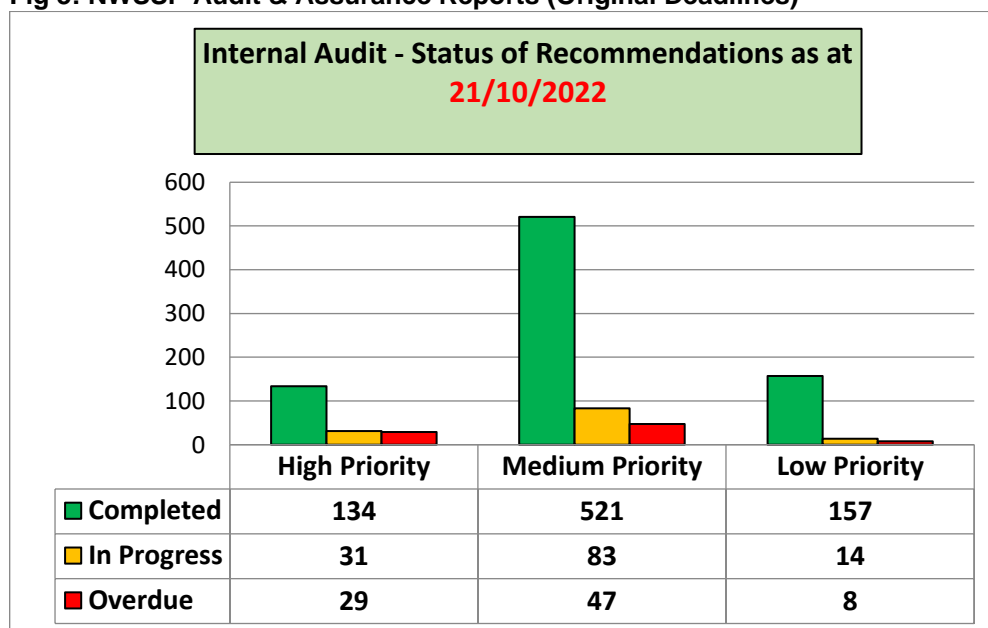
4.4 A summary of all overdue actions is set out in the table below, with a more detailed breakdown included at **Appendix A** for information.

Report Title	Overdue Actions Original Deadlines		Overdue Actions Revised Deadlines	
	Other Priority	High Priority	Other Priority	High Priority
<b>Exec Lead: Chief Operating Officer</b>				
Local Orthopaedic Services A Comparative Picture	1	-	-	-
Discharge Planning	1	2	1	-
<b>Exec Lead: Director of Corporate Governance</b>				
Structured Assessment 2019	1	-	-	-
Quality Governance Arrangements	4	-	-	-
<b>Exec Lead: Director of Strategy</b>				
Wellbeing of Future Generations Act	2	-	-	-
<b>Total</b>	<b>9</b>	<b>2</b>	<b>1</b>	<b>0</b>

## 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)**

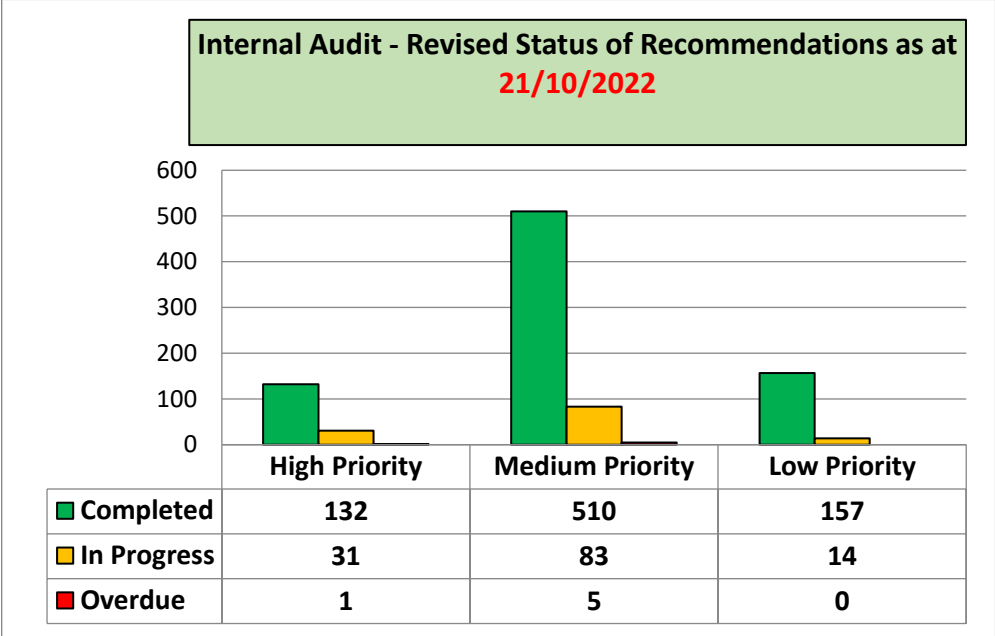


5.2 This represents a significant decrease in the number of overdue actions when compared to the last report to the Audit Committee (September 2022), which recorded 103 agreed actions as being overdue. This is the result of the

completion/closure of a number of actions across a range of reports, notably relating to estates, health & safety and capital systems.

5.3 Where agreed actions have become overdue, implementing officer(s) are asked to provide revised milestone/target completion dates as part of their progress update. Taking these into account, the number of overdue actions would drop from 84 to six, as set out in the graph below:

**Fig 4: NWSSP Audit & Assurance Reports (Original Deadlines)**



5.4 A summary table of all overdue actions has set out at **Appendix B**, with a more detailed breakdown included at **Appendix C** for information.

5.5 A table detailing actions closed since the last report, including any comments made by the lead executive or their teams in doing so, can be found at **Appendix D**.

**6. FINANCIAL IMPLICATIONS**

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

**7. RECOMMENDATIONS**

7.1 Members are asked to:

- **NOTE** the current position of the Audit Registers and the status of the action plans, and the improved performance trajectory since January 2021.
- **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).

<b>Governance and Assurance</b>		
<b>Link to Enabling Objectives</b> <i>(please choose)</i>	<b>Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities</b>	
	Partnerships for Improving Health and Wellbeing	<input type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	<b>Deliver better care through excellent health and care services achieving the outcomes that matter most to people</b>	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
<b>Health and Care Standards</b>		
<i>(please choose)</i>	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
<b>Quality, Safety and Patient Experience</b>		
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.		
<b>Financial Implications</b>		
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.		
<b>Legal Implications (including equality and diversity assessment)</b>		
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.		
<b>Staffing Implications</b>		
There are no staffing implications associated with this paper.		
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>		
A robust Governance Work Programme will assist the Board in assessing risk and gathering assurance across all corporate objectives, which span the five ways of working, and the wellbeing goals identified in the Act.		
<b>Report History</b>	N/A	
<b>Appendices</b>	Appendix A Overdue Agreed Actions – Audit Wales Appendix B Overdue Agreed Actions – NWSSP A&A (Summary) Appendix C Overdue Agreed Actions – NWSSP A&A (Detail) Appendix D Completed Agreed Actions – NWSSP A&A	

