

<b>ABM University Health Board</b>	
<b>17<sup>th</sup> January 2018</b> <b>Workforce and Organisational Development Committee</b> <b>Agenda item: 21</b>	
<b>Subject</b>	<b>Audit Reports</b>
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## **SITUATION**

To update the Workforce and OD Committee around the range of audit report for which the HR Directorate is currently responsible.

## **BACKGROUND**

The HR Directorate is frequently audited by the Internal Audit Department. This report provides an update on which areas have been subject to audit together with a summary of progress achieved and outstanding areas yet to be delivered. The Committee will note that the Audit Committee receive regular updates on all audit reports and the Finance function have developed a tracker to track all progress and issues that are overdue. The HR Directorate feed into this process regularly.

## **ASSESSMENT**

### ***Medical Workforce Audits***

**Junior Doctor Bandings:** This audit is approximately a year old. We have undertaken all the work that Audit recommended but we have been unable to reach agreement with the BMA over New Deal issues. A junior doctor engagement group has been established and is due to meet in January. We will attempt to use their ideas to attempt to resolve these issues with the BMA.

**Follow up Consultant Contract:** This is a report produced by the Wales Audit Office and is based upon a number of follow up audits they have completed since the amended Consultant Contract was introduced in December 2003. There are multiple participants. The HR function's role is largely around writing and agreeing the job planning guidance and undertaking the development and delivery of a major training programme. These elements are on track.

**ADH Locums:** This audit was commissioned by the Director of Finance just before the Agency caps were introduced in November 2017. The audit has shown there has been a serious lack of control and processes in place around the authorisation of internal ad hoc locum shifts. This has little to do with the Medacs Managed service. We are in the process of agreeing the action plan with Internal Audit. The HR function will be the lead for a number of the actions working in conjunction with

Finance colleagues and other stakeholders. It should be noted that the processes adopted around the agency caps will resolve the majority of the concerns.

**Follow up Sickness Absence Management:** This audit is a follow up to an internal audit conducted in July 2016. The original audit highlighted ten recommendations of which three were low priority. The follow up audit has focused on the remaining recommendations, the findings being that two have been addressed and the remaining five partially addressed. From these findings the audit has made three recommendations which have been accepted and an action plan has been agreed to address these.

### ***Learning and OD Audits***

#### **Mandatory Training**

This internal audit was carried out in Summer 2017. The audit findings showed that there had been a 14% improvement in overall Mandatory Training compliance between October 2015 and July 2017, although with overall compliance at around 38% this was still lower than other comparable size Health Boards in Wales. Key recommendations from the audit focus on the Mandatory Training Governance Committee (renamed to Mandatory Training Governance Group due to ABM Committee structures), the recording of Mandatory Training activity through administrators and highlighting the risk of low compliance of Mandatory Training across the Health Board.

Since the audit the Mandatory Training Governance Group have not met due to the changes within the Executive Team and diary availability. Work has been completed to train administrators, close the external links to Learn@NHSWales and correct reporting errors. The risk low compliance in Mandatory Training poses to the Health Board will be added to the corporate risk register in 2018.

#### **PADR**

This internal audit was carried out in Summer 2017. The audit findings showed that there had been an improvement in reported PADR compliance to 53.93%. This is shown to be in the average for NHS Wales Organisations. The audit focus on a number of key areas including Learning Administrators, quality PADR completion and local unit monitoring / performance management.

Since the audit the PADR training package and slides have been updated to reflect all recommendations, learning administrators have been invited to a range of training dates (with a mop up date booked for January 2018) and units are taking local actions which are reported through performance boards to manage the performance of PADR.

#### **RECOMMENDATIONS**

That the Workforce and OD Committee notes the progress and issues associated with the HR Directorate's audit reports