

Internal Audit Progress Report

Audit Committee

May 2024

Swansea Bay University Health Board

NWSSP Audit and Assurance Services



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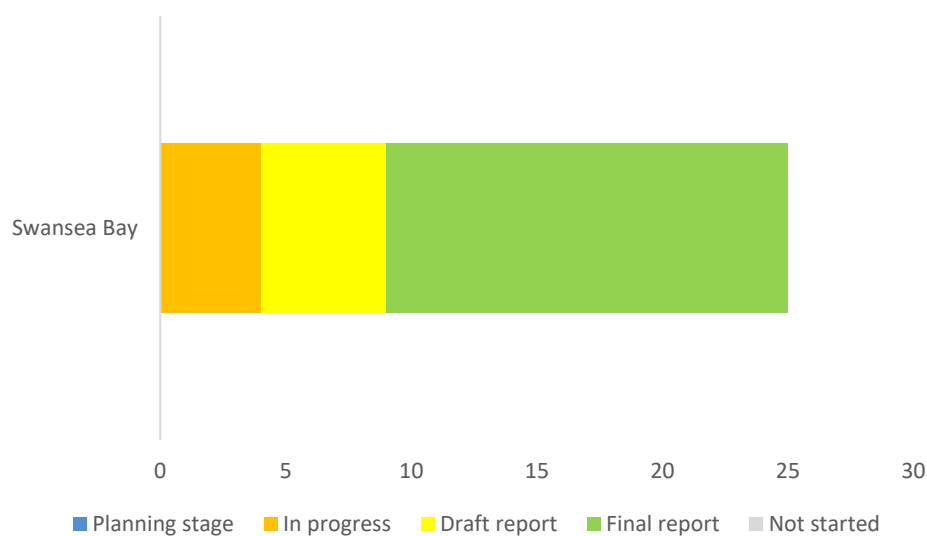
1. Introduction

The purpose of this report is to:

- highlight progress of the 2023/24 Internal Audit Plan to the Audit Committee; and
- provide an overview of other activity undertaken since the previous meeting.

2. Progress against the 2023/24 Internal Audit Plan

There are 25 reviews in the 2023/24 Internal Audit Plan, and overall progress is shown below.



Detailed progress in respect of each of the reviews in the 2023/24 Internal Audit Plan is summarised in Appendix A.

3. Proposed changes to approved plan

No further changes are proposed in respect of the 2023/24 Internal Audit Plan.






4. Engagement

The following meetings have been held/attended during the reporting period:




- observation of Board and Committee meetings;
- audit scoping and debrief meetings;
- liaison with senior management; and
- liaison with external regulators.

5. Key Performance Indicators

- Correct on 30 April 2024

Indicator	Status	Actual	Target
Operational Audit Plan agreed for 2023/24		March	By 30 June
Audits reported over planned		21	21
Work in progress		4	
Report turnaround: time from fieldwork completion to draft reporting [10 days]		18 out of 21	80%
Report turnaround: time taken for management response to draft report [15 days]		<i>10 out of 14</i>	80%
Report turnaround: time from management response to issue of final report [10 days]		<i>14 out of 14</i>	80%

Key:

-  v > 20%
-  10% < v < 20%
-  v < 10%

6. Recommendation

- The Audit Committee is invited to note the above.

Appendix A: Progress against 2023/24 Internal Audit Plan

Review	Status	Rating	Key matters arising	Outline timing	Anticipated Audit Committee ¹
Risk Management and Assurance	In progress			Q4	July 2024
Service Group Governance Arrangements (Deferred from 2021/22)	In progress			Q3/4	July 2024
Quality Management System	Draft report	Reasonable		Q3/4	July 2024
Decarbonisation	Final report	Limited	<p>We recognise the significant work the health board has been undertaking to address the requirements of the Decarbonisation Strategic Delivery Plan. However, the overall rating is in line with that determined across NHS Wales and reflects the complexity and range of risks associated with this area which, along with the financial shortfalls, impacts on the health board's ability to deliver on the wider decarbonisation agenda.</p> <p>Other matters include attendance at Decarbonisation Action Plan Implementation Group meetings; and the development of a decarbonisation risk at the health board risk register.</p>	Q3	May 2024
Performance Management Framework			Request to defer – see section 3		
Commissioning - LTA contracts	Final report	Reasonable	Formal approval and communication of the commissioning framework;		

¹ May be subject to change

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Review	Status	Rating	Key matters arising	Outline timing	Anticipated Audit Committee ¹
			Standardisation of contract agreement templates; Opportunities to enhance current performance reporting and the need to provide assurance on the quality of commissioned services; inconsistency in frequency of LTA meetings and lack of discussion on quality and performance; and reporting of the final outturn position.	Q1/2	September 2023
Health and Social Care Regional Integration Fund (RIF)	Final report	Reasonable	The memorandum of understanding between Regional Partnership Board partners requires updating; The Collaborative Working Framework is yet to be drafted, to capture the refreshed approach to partnership working; Opportunities to enhance monitoring and reporting of RIF schemes through the new Strategic Partnership Group that has been established; Enhancements to the current scheme evaluation process; and action to develop a Health Board partnership risk.	Q2/3	March 2024
Agency Staff Management	Draft report	Reasonable	Absence of a formally approved policy for the management of both medical and non-medical agency staff; Breach of Standing Orders and the Public Contract Regulations 2015 through the use of non-framework agencies; Lack of appropriate evidence to support the formal authorisation for approval of agency staff; Consideration of the recommendations raised	Q1	July 2024

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Review	Status	Rating	Key matters arising	Outline timing	Anticipated Audit Committee ¹
			through the work undertaken by the Counter Fraud team on agency workers; Enhancements to reporting of agency cost/usage.		
Savings Programme	Final report	Reasonable	Reviewing and finalised documented guidance; Delegation letters not returned by budget holders; Provision of financial training; Developing templates to ensure savings information is robustly recorded, evaluated and reported.	Q2	November 2023
Prescribing	Final report	Reasonable	There remain actions with outlier practices, included within the PCT 2022/23 Improvement Plan, to be completed; Enhancements could be made to the PCT 2023/24 Improvement plan to ensure actions have outlined targets; Only around half GP Practice Prescribing Leads provided action plans following the 2022 antimicrobial stewardship session; Issues with the operation of the health board's Antimicrobial Stewardship Group has delayed updating the Antimicrobial Stewardship Framework and future monitoring arrangements for the framework could be clarified.	Q2	November 2023
Additional Learning Needs	Final report	Limited	Assess collaborative resources to ensure the service is appropriately designed to meet the duties of the Act; Review, clarify and document	Q1/2	January 2024

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Review	Status	Rating	Key matters arising	Outline timing	Anticipated Audit Committee ¹
			arrangements with partners; Develop and monitor key priorities for the current academic year; Finalise documented guidance to provide clarity on process; Establish infrastructure to ensure data quality; Enhance reporting mechanisms to enable effective oversight.		
Access to Primary Care	Final report	Reasonable	Review Access and Sustainability Forum terms of reference (ToR); NPT Practice Management representative at the Forum; Enhancements to the review and reporting of the Access achievement assessment process; GP Practices response to address CHC/Llais mystery shopper feedback.	Q1	November 2023
Waiting List Management	Draft report	Limited	Committee reporting details the improvements made within the health board to assist with delivery of the ministerial targets for planned care. While some of the specialities highlighted limited capacity to carry out validation checks, significant central resource has been put in place to assist. There is less reliance on paper documentation and manual processes, however the lack of data integration due to the complexities and differences across operational areas has impacted our ability to carry out testing of waiting lists to confirm that they are being maintained and patients are appropriately	Q3	May / July 2024

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Review	Status	Rating	Key matters arising	Outline timing	Anticipated Audit Committee ¹
			prioritised and are offered support.		
Stroke Action Plan	Final report	Reasonable	Update and produce a more robust action plan; Review Stroke Delivery Group Board ToR and improve attendance; Performance reporting to include the national targets.	Q2	November 2023
Mental Health - 111 Service	In progress			Q3	July 2024
Mortuary Service			Deferred		
Signal System	Draft report	Reasonable		Q3/4	July 2024
Software Development	Final report	Reasonable	Providing guidance on when and how to use the various development and control methodologies; Complete security review before release; A lack of a formal framework for managing deployments, including a backout plan.	Q3/4	May 2024
Technical Resilience	Final report	Reasonable	Ensuring fire suppression is in place at key sites; Testing the resilience position to ensure it works as anticipated; Improving the documentation for disaster recovery.	Q1	November 2023
Digital Support Effectiveness / Efficiency	Final report	Reasonable	Digital Services are aware of the increased demand for support and appropriate processes are in place to govern its increasingly stretched capacity through risk and service management, there is an overall risk that support will fail with current resource levels. Out-of-hours support models operate on a mostly goodwill basis, and there is a risk that the	Q2	March 2024

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Review	Status	Rating	Key matters arising	Outline timing	Anticipated Audit Committee ¹
			health board is breaching the Working Time Regulations 1998.		
Sickness Absence Management	Final report	Reasonable	Evaluating the quality, impact and effectiveness of the early interventions introduced to improve attendance; Capture and monitoring of training compliance rates; Strengthen the approach undertaken to complete sickness audits; Limited reporting of the sickness improvement plans within the Service Groups.	Q1	November 2023
Recruitment and Retention (deferred from 2022/23)			Request to defer – see section 3		
Follow Up Action Tracker	In progress			Q4	July 2024
Consultant Job Planning	Final report	Limited	<p>Procedures and guidance require updating;</p> <p>Instances identified where job plans:</p> <ul style="list-style-type: none"> are not approved and are not subject to periodic review; are not signed off ahead of the job plan start date; do not include Board, Service, or personal outcomes; <p>A review of the split between Direct Clinical Care and Support Professional Activities should be undertaken; Instances where job plan change requests are submitted retrospectively; Instances were identified where the number of sessions on job plans did</p>	Q3/4	May 2024

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Review	Status	Rating	Key matters arising	Outline timing	Anticipated Audit Committee ¹
			not agree to payslips, and inconsistent application of intensity bandings and payments; and a lack of monitoring, reporting and escalation.		
Capital & Estates					
Capital Assurance: Singleton Hospital Replacement Cladding (Project final account)	Final report	Substantial	Appropriate methodologies were generally confirmed as having been applied to determine the final sums due. Based on the sample selected, the Cost Adviser had generally obtained sufficient supporting evidence and provided challenge to support the current assessment of the anticipated final account sum. However, there were some instances where claims had yet to be supported by substantiation of actual costs (being presently supported by estimates of various types).	Q4	March 2024
Estates Assurance: Estate Condition	Final report	Limited	We recognise the work the health board has been undertaking to manage the current estate condition against other competing priorities. However, the overall rating is in line with that determined across NHS Wales, given the common challenges faced by each organisation, and reflects that identified estate risks cannot be managed within existing funding. Other matters include: Regular updates on the delivery of the Estates Strategy to Board and Committee; A workforce review should be undertaken, to identify any	Q2	November 2023

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Review	Status	Rating	Key matters arising	Outline timing	Anticipated Audit Committee ¹
			gaps in ability to maintain the current and future estate; Clearly defined process for monitoring and reporting performance of the Estates Strategy in delivering improvements to the backlog position. Controls within the BAF to reduce the risk associated with the estates condition should be reviewed.		
Follow up (Estates assurance)	Final report	Reasonable	Of the 12 outstanding recommendations on the audit tracker, as reported in July 2023, three recommendations remain outstanding.	Q1-4	March 2024
Morrison Hospital Infrastructure Modernisation – Phase 2 Stage 2 (Sub Station 6) Project	Draft report	Reasonable	The operation of the risk register and the need to ensure an appropriate post project evaluation is undertaken.	Q3/4	May 2024

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