



**PWYLLGOR ARCHWILIO A SICRWYDD RISG
AUDIT AND RISK ASSURANCE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	13 August 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Bronglais General Hospital Chemotherapy Day Unit – Management Response Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Andrew Carruthers Chief Operating Officer
SWYDDOG ADRODD: REPORTING OFFICER:	Peter Skitt, County Director Ceredigion - Project Director

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

The Health Board's Oncology Services Review undertaken in 2015 highlighted that the physical environment of the Bronglais General Hospital (BGH) Chemotherapy Day Unit (CDU) is unsatisfactory for both patients and staff. A Project Group was established in 2017 to identify and agree a suitable site for the development of a new CDU, with the then Deputy Chief Executive as Senior Responsible Officer and Ceredigion County Director as Project Director.

In September 2019 a business case was presented to Board to request approval of the re-location of the CDU to Y Banwy Ward, based on a total estimated cost of £1,822,306 to be funded by discretionary capital (20%), existing charitable funds (47%) and a dedicated fundraising appeal for the remaining 33%.

Following successful use of Y Banwy as a COVID-19 ward, the decision was taken to retain this facility in the event of future pandemics. An alternative was identified; refurbishment of the existing Leri Day Building which was approved by Executive Team, Charitable Funds Committee and Board in 2021. The provisional estimated costs for this were £2,197,717, with a funding shortfall of £504,482.

Subsequent iterations of the Development Approval Form (DAF) saw the forecast project outturn cost (incl VAT) increase to £2,532,925.58, reported to the Charitable Funds Committee in November 2023. The tender return (December 2023) was £4.05m, reduced to £3.63m following Bill of Reductions, representing a funding shortfall in excess of £1.1m.

Due to the significant increase in the tender review cost, a review of the process was required.

Cefndir / Background

The Committee received an internal Audit review of the management of the Bronglais Chemotherapy Unit following a significant cost increase at tender stage, the review's scope was to carry out a high-level advisory audit which was jointly commissioned by the Director of Finance and Director of Corporate Governance. It has focused specifically on the reason for

the variation between the estimated costs and subsequent tender return relating to the redevelopment of the BGH CDU, and the process for escalating the funding shortfall, to identify any lessons for learning.

Asesiad / Assessment

Future Learning from the Review has highlighted the following which required management actions as per the attached Audit Management and Tracking (AMAT) report, all actions have been completed with sign off pending.

In future, the Certificate of Readiness to Proceed to Tender should be completed following receipt of the pre-tender estimate.

The decision/approval to proceed to tender should be based on (and therefore obtained following receipt of) the Pre-Tender Estimate.

Ensure the most appropriate procurement route is followed based on the expected contract value, seeking advice from NWSSP Procurement Services and/or Specialist Estates Services if appropriate. Decisions to proceed to market where reliable evidence suggests the expected value will exceed the framework threshold should have prior approval from an appropriate Executive Director such as the Director of Operations (as Senior Responsible Officer in this instance) and/or Director of Finance.

In light of market volatility post-Covid, it would be prudent to consider earlier engagement of cost advisors to strengthen budget cost estimates, ensure early identification of funding gaps and ample time for any necessary project amendments before proceeding to tender.

Absence of a key project officer (such as the Project Director) requires timely identification and delegation of critical tasks and decision making, with ultimate responsibility resting with the Senior Responsible Officer.

Timely escalation of key information to the Senior Responsible Officer and Project Delivery Group. Linked to Finding 4 – delegation of Project Director duties.

Argymhelliad / Recommendation

The Audit Risk and Assurance Committee is asked to:

- **TAKE ASSURANCE** that all management actions from the Bronglais Hospital CDU Review are complete.
- **TAKE ASSURANCE** that the Bronglais Hospital CDU is on Schedule and within Budget at this point.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.22 The Committee shall request and review reports and positive assurances from directors and managers on the overall arrangements for governance, risk management and internal control.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:	N/A

Datix Risk Register Reference and Score:	
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	Choose an item. 3. Effective Domains of Quality 4. Efficient
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	Choose an item. Choose an item. 6. All Apply Choose an item.
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable Choose an item. Choose an item. Choose an item.
Amcanion Cynllunio Planning Objectives	Choose an item. 6 Clinical services plan Choose an item. Choose an item.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	Choose an item. Choose an item. 7. Plan and deliver services to enable people to participate in social and green solutions for health Choose an item.

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Review carried out and actions in place.
Rhestr Termiau: Glossary of Terms:	Contained within the body of the report.
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg Parties / Committees consulted prior to Audit and Risk Assurance Committee:	N/A

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	None
Ansawdd / Gofal Claf: Quality / Patient Care:	Improvements to quality of Care delivery environment
Gweithlu: Workforce:	No Change to workforce requirements
Risg: Risk:	No further risks identified in this review
Cyfreithiol: Legal:	No Further Legal impacts from this review or actions

Enw Da: Reputational:	No Impact
Gyfrinachedd: Privacy:	No Impact
Cydraddoldeb: Equality:	No Impact

Internal Audit BGH Chemotherapy Day Unit Final Briefing Paper - Action plan

Inspection origin: Internal Audit

Date of inspection: 05/06/2024

Inspection lead: Peter Skitt

Inspection team: Peter Skitt, Rachel Williams

Date action plan generated: 1st August 2024

Recommendations & actions

Ref		Recommendation	Priority	Lead	Site	Service	Regulation	Clinical priority	Theme	Actions	Status
Internal Audit/ 2024/23 5/MD1		R1. Future Learning: In future, the Certificate of Readiness to Proceed to Tender should be completed following receipt of the Pre-Tender Estimate.	Must do	Mr Peter Skitt	Bronglais General Hospital	Corporate		NO		1/1	In progress

Ref	Action	Site	Service	Responsibility	Date raised	Due date	Progress status
Internal Audit/ 2024/23 5/MD1/2	Agreed. Future delivery of schemes will be in line with the Quality Assurance manual, which are already in place and regularly audited. Work going forward will be in line with agreed flowcharts. The principles of the Quality Assurance manual were reinforced at workshop held by Capital Management on 20 June 2024.	Bronglais General Hospital	Corporate	Mr Julien Wheeler-Jones	11/07/2024	30/06/2024	Fully complete (Awaiting approval)
Comments/Updates			Risks	Barriers	Number of uploaded evidence		Reject reason (if applicable)
a) Project Approval Process Document and supporting checklists b) Future Learning Workshop Meeting invitation			None	None	9		

Ref		Recommendation	Priority	Lead	Site	Service	Regulation	Clinical priority	Theme	Actions	Status
Internal Audit/ 2024/23 5/MD2		R2. Future Learning: The decision/approval to proceed to tender should be based on (and therefore obtained following receipt of) the Pre-Tender Estimate.	Must do	Mr Peter Skitt	Bronglais General Hospital	Corporate		NO		1/1	In progress



Ref	Action	Site	Service	Responsibility	Date raised	Due date	Progress status
Internal Audit/ 2024/23 5/MD2/2	Agreed. Future delivery of schemes will be in line with the Quality Assurance manual, which are already in place and regularly audited. Work going forward will be in line with agreed flowcharts. The principles of the Quality Assurance manual were reinforced at workshop held by Capital Management on 20 June 2024.	Bronglais General Hospital	Corporate	Mr Julien Wheeler-Jones	11/07/2024	30/06/2024	Fully complete (Awaiting approval)
Comments/Updates				Risks	Barriers	Number of uploaded evidence	Reject reason (if applicable)
a) Project Approval Process Document and supporting checklists b) Future Leaning Workshop Meeting invitation				None	None	0	

Ref		Recommendation	Priority	Lead	Site	Service	Regulation	Clinical priority	Theme	Actions	Status
Internal Audit/ 2024/23 5/MD3		R3. Future Learning: Ensure the most appropriate procurement route is followed based on the expected contract value, seeking advice from NWSSP Procurement Services and/or Specialist Estates Services if appropriate. Decisions to proceed to market where reliable evidence suggests the expected value will exceed the framework threshold should have prior approval from an appropriate Executive Director such as the Director of Operations (as SRO in this instance) and/ or Director of Finance.	Must do	Mr Peter Skitt	Bronglais General Hospital	Corporate		NO		1/1	In progress

Ref	Action	Site	Service	Responsibility	Date raised	Due date	Progress status
Internal Audit/ 2024/23 5/MD3/2	Agreed. This will require additional time within a project programme to allow for sufficient escalation, if necessary. Project Directors need to be aware of timescales set in the programme will allow for this, with non-adherence potentially resulting in completion delays. Management of projects utilising Charitable Funds should in future follow the same processes as Business Justification Case (BJCs). Documented processes have been developed in line with the quality assurance manual, which is regularly audited.	Bronglais General Hospital	Corporate	Mr Peter Skitt	11/07/2024	30/06/2024	Fully complete (Awaiting approval)
Comments/Updates			Risks	Barriers	Number of uploaded evidence		Reject reason (if applicable)
a) Project Approval Process Document and supporting checklists b) Future Leaning Workshop Meeting invitation			None	None	0		




Ref		Recommendation	Priority	Lead	Site	Service	Regulation	Clinical priority	Theme	Actions	Status
Internal Audit/ 2024/23 5/MD4		R4. Future Learning: In light of market volatility post-covid, it would be prudent to consider earlier engagement of cost advisors to strengthen budget cost estimates, ensure early identification of funding gaps and ample time for any necessary project amendments before proceeding to tender.	Must do	Mr Peter Skitt	Bronglais General Hospital	Corporate		NO		1/1	In progress

Ref	Action	Site	Service	Responsibility	Date raised	Due date	Progress status
Internal Audit/ 2024/23 5/MD4/2	Agreed. Lessons have been learned, and processes reinforced via the Future Learning Workshop held on 20 June 2024.	Bronglais General Hospital	Corporate	Mr Julien Wheeler-Jones	11/07/2024	30/06/2024	Fully complete (Awaiting approval)

Comments/Updates	Risks	Barriers	Number of uploaded evidence	Reject reason (if applicable)
a) Project Approval Process Document and supporting checklists b) Future Learning Workshop Meeting invitation	None	None	0	




Ref		Recommendation	Priority	Lead	Site	Service	Regulation	Clinical priority	Theme	Actions	Status
Internal Audit/ 2024/23 5/MD5		R5. Future Learning: Absence of a key project officer (such as the Project Director) requires timely identification and delegation of critical tasks and decision making, with ultimate responsibility resting with the Senior Responsible Officer.	Must do	Mr Peter Skitt	Bronglais General Hospital	Corporate		NO		1/1	In progress

Ref	Action	Site	Service	Responsibility	Date raised	Due date	Progress status
Internal Audit/ 2024/23 5/MD5/2	Agreed. Project Director certificates will be reformatted so at project commencement, it is clear that any significant absence requires the SRO in the first instance to delegate as appropriate.	Bronglais General Hospital	Corporate	Mr Peter Skitt	11/07/2024	31/07/2024	Fully complete (Awaiting approval)

Comments/Updates	Risks	Barriers	Number of uploaded evidence	Reject reason (if applicable)
09/07/2024: Discussion with the Head of Capital Planning has confirmed that from the next issuing of the certificate, this recommendation will be implemented. Awaiting template certificate to upload	None	None	2	



Ref		Recommendation	Priority	Lead	Site	Service	Regulation	Clinical priority	Theme	Actions	Status
Internal Audit/ 2024/23 5/MD6		R6. Future Learning: Timely escalation of key information to the Senior Responsible Officer and Project Delivery Group. Linked to Finding 4 – delegation of Project Director duties	Must do	Mr Peter Skitt	Bronglais General Hospital	Corporate		NO		1/1	In progress

Ref	Action	Site	Service	Responsibility	Date raised	Due date	Progress status
Internal Audit/ 2024/23 5/MD6/2	Agreed. Process to be developed to ensure that risks and issues register for projects are discussed with the SRO on a regular basis and documented appropriately within Project Director certificates. Project Director to liaise with the Health Board's Head of Capital	Bronglais General Hospital	Corporate	Mr Peter Skitt	11/07/2024	31/07/2024	Fully complete (Awaiting approval)

Comments/Updates	Risks	Barriers	Number of uploaded evidence	Reject reason (if applicable)
09/07/2024: Discussion with the Head of Capital Planning has confirmed that from the next issuing of the certificate, this recommendation will be implemented. Awaiting template certificate to upload	None	None	0	

