

Follow-up: Records Digitisation Final Internal Audit Report

March 2024

Hywel Dda University Health Board



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Review reference:	HDUHB-2324-10
Report status:	Final
Fieldwork commencement:	1 st February 2024
Fieldwork completion:	29 th February 2024
Draft report issued:	4 th March 2024
Debrief meeting:	29 th February 2024
Management response received:	15 th March 2024
Final report issued:	20 th March 2024
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Acknowledgement

NHS Wales Audit and Assurance Services would like to acknowledge the time and co-operation given by management and staff during the course of this review.

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Executive Summary

Purpose

Establish progress in implementing agreed actions arising from the previous internal audit on the records digitisation programme [H DUHB-2223-25].

Overview

We have concluded **Reasonable** assurance based on the actions implemented.

Our follow up audit work has identified that actions have been undertaken to take forward the recommendations within the original report and improve the governance and management of the digitisation programme.

The programme governance structures have been improved, with a programme brief in place, along with a steering group.

Financial information relating to both costs and benefits is captured and monitored and the benefits associated with the programme are now included within the benefits realisation framework.





We note one area where improvements continue to be made:

- Ensuring that reporting of the programme to committee level meets the requirements of the programme brief, and includes financial and project status information.

Follow-up Report Classification

		Trend
Reasonable 	Follow up: All high priority recommendations implemented and progress on the medium and low priority recommendations.	

Progress Summary

Previous Matters Arising	Previous Priority Rating	Direction of Travel	Current Priority Rating
1 Programme Governance	High		Medium
2 Cost / Benefit Analysis	Medium		Closed
3 Benefit Tracker	High		Closed
4 User Acceptance Testing	Medium		Closed

1. Introduction

1.1 This audit sought to establish the progress made by management in implementing agreed actions to address the issues identified in the original review (report HDUHB-2223-25 refers).

1.2 The original review identified two high priority matters arising and two medium priority matters arising requiring attention relating to:

Previous Matter 1 There is no overarching programme for records digitalisation, with the two digitisation projects being managed by different directorates without a single plan listing all the projects interdependencies with deliverables timescales synchronised to ensure complete delivery of the final digitisation solution.

We also noted no project for development of e-forms.

The project reports and updates seen do not contain any up to date data on a project budgets, total expected costs, financial tracking of spend against that budget, nor key delivery schedules with updated project closure dates. This information is a necessary and important part of overall delivery, it should inform the projects overall RAG status and be included as part of all Steering group reports.

Previous Matter 2 There has been no full and detailed cost benefit analysis for the overall digitalisation programme.

Previous Matter 3 There is no complete benefits tracker for the current projects, with the digitisation benefit tracker being incomplete.

Previous Matter 4 CITO UAT document testing criteria are relevant and appropriate and the Methodology appears sound; however, testing only done by two testers on a very small sample (6) in the test environment.

1.3 The potential risks considered in the original review were:

- Poor project governance results in time delays and acceptance of inappropriate risk;
- The medical records digitisation project does not deliver the anticipated benefits;
- There are inadequate resources to meet the project objectives;
- Loss / unavailability of information; and
- Breach of legislation due to inappropriate access to information.

1.4 The scope of this follow-up review does not aim to provide assurance against the full review scope and objective of the original review. The 'follow-up review opinion'

provides an assurance level against the implementation of the agreed action plan only.

2. Findings

2.1 The table below provides an overview of progress in implementing the previous internal audit recommendations:

Original Priority Rating	Number of Recommendations	Implemented / Obsolete (Closed - No Further Action Required)	Action Ongoing (Further Action Required)	Not implemented (Further Action Required)
High	2	1	1	-
Medium	2	2	-	-
Low	-	-	-	-
Total	4	3	1	-

2.2 Full details of recommendations requiring further action are provided in the **Management Action Plan** in **Appendix A**. Where action is ongoing we have reassessed the priority rating for the recommendation and revised these where appropriate.

2.3 For the recommendations that have been closed or partially closed, management have taken action to address the matters arising in our original report. This includes:

- The governance arrangements for the records digitisation programme have improved, with a formal structure applied. There is a programme brief which sets out the aims of the programme, together with the projects under the programme umbrella. There is a programme steering group which meets regularly, and a programme RAID (Risk, Actions, Issues, Decisions) log is kept to capture key information. (Previous Matter 1)
- There is monitoring and reporting of the projects and programme progress, both within the programme and to relevant external groups. (Previous Matter 1)
- A process for tracking costs related to the programme has been established, which includes costs relating to both Digital and Operational Services. We also note that this includes financial aspects from the benefits tracker, and so provides a better understanding of the financial implications of the programme. (Previous Matter 2)

- The records digitisation programme has been included within the benefits realisation framework, and we note that benefits have been appropriately identified and baselined. This includes benefits related to the CITO system and development of the scanning bureau. We also note that owners of benefits are identified along with measurement criteria. (Previous Matter 3)
- Benefits are included within a tracker and subject to monitoring, with reporting on the current realisation of benefits included in reporting to the Sustainable Resources Committee. (Previous Matter 3)
- CITO is currently within user testing, with a full end to end test being undertaken. we also note that Health Records are using the system in order to find files, and for subject access requests, which acts as de-facto testing. Once the system is fully live we note the intent for further full testing. (Previous Matter 4)

2.4 The actions listed above have either resulted in the recommendation being categorised as implemented, or partially implemented. One of the two recommendations originally categorised as High priority, now has a residual priority rating of Medium.

Appendix A: Matters Arising with Actions Remaining

Previous Matter Arising 1: Programme Governance (Design)		
Original Recommendation	Original Priority	
<p>A single, overarching programme should be created for digitalisation. It should include all projects with an outline delivery schedule and key milestones to facilitate progress and measurement.</p> <p>Financial projections should be included for all projects, and combined as necessary to indicate total programme cost.</p> <p>Project and programme progress reports should accurately report:</p> <ul style="list-style-type: none"> • all costs to date, comparison against budget/plan. • Progress against milestones, interim objectives. • Immediate risks • Next steps • RAG status on achieving overall objective 	<p>High</p>	
Management Response	Target Date	Responsible Officer
<p>We will aim to establish an overarching programme to provide the necessary governance and assurance to the Board, and would enable the bringing together of the two current workstreams in a more formal approach.</p>	<p>July 2023</p>	<p>Digital Director Deputy Director of Operations</p>

Current Findings	Residual Risk
<p>We note improvements to the programme governance structures, which include a Programme Brief, Steering Group, RAID log and improved reporting on programme activity.</p> <p>We have noted some areas where weaknesses remain:</p> <ul style="list-style-type: none"> The Programme Brief remains in draft. The reporting process is not fully complying with the governance as set out in the brief, without regular, structured reporting to the committees defined. We also note that reporting does not fully show the status of individual projects, and limited financial information is included. <p>Conclusion: Action Partially Implemented / Ongoing</p>	<p>Potential risk of:</p> <ul style="list-style-type: none"> Poor project governance results in time delays and acceptance of inappropriate risk
New Recommendations	Priority
<p>Formally approve and finalise the programme brief.</p> <p>Fully define the structure for reporting on the records digitisation programme from the steering group to other Health Board groups and relevant committees. Together with defining a standard programme reporting template which includes project status and financial information.</p>	<p style="text-align: center;">Medium</p>
Management Response	Target Date
<p>The Programme Brief was being presented to DHRP Steering Group on March 11th for sign-off and has now been approved.</p> <p>The Brief itself includes the current reporting structure which may change in the coming months. Any changes made to that structure will be reflected in an amended Programme Brief at such a time. A reporting template has been identified and sent as an attachment.</p>	<p>Complete</p>

Appendix C: Assurance opinion and action plan risk rating

Audit Assurance Ratings

We define the following levels of assurance that governance, risk management and internal control within the area under review are suitable designed and applied effectively:

	<p>Substantial assurance</p>	<p>Few matters require attention and are compliance or advisory in nature. Low impact on residual risk exposure. Follow up: All recommendations implemented and operating as expected</p>
	<p>Reasonable assurance</p>	<p>Some matters require management attention in control design or compliance. Low to moderate impact on residual risk exposure until resolved. Follow up: All high priority recommendations implemented and progress on the medium and low priority recommendations.</p>
	<p>Limited assurance</p>	<p>More significant matters require management attention. Moderate impact on residual risk exposure until resolved. Follow up: No high priority recommendations implemented but progress on most of the medium and low priority recommendations.</p>
	<p>No assurance</p>	<p>Action is required to address the whole control framework in this area. High impact on residual risk exposure until resolved. Follow up: No action taken to implement recommendations</p>

Prioritisation of Recommendations

We categorise our recommendations according to their level of priority as follows:

Priority level	Explanation	Management action
High	Poor system design OR widespread non-compliance. Significant risk to achievement of a system objective OR evidence present of material loss, error or misstatement.	Immediate*
Medium	Minor weakness in system design OR limited non-compliance. Some risk to achievement of a system objective.	Within one month*
Low	Potential to enhance system design to improve efficiency or effectiveness of controls. Generally issues of good practice for management consideration.	Within three months*

* Unless a more appropriate timescale is identified/agreed at the assignment.



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