

Hywel Dda University Health Board

Effectiveness of IT deployment in relation to COVID-19

Final Internal Audit Report January 2021

Private and Confidential
NHS Wales Shared Services Partnership
Audit and Assurance Services



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Assurance Opinion and Action Plan Risk Rating

Review reference:	HDUHB-2021-37
Report status:	Final Internal Audit Report
Fieldwork commencement:	15/10/2020
Fieldwork completion:	31/12/2020
Draft report issued:	11/01/2021
Management response received:	14/01/2021
Final report issued:	20/01/2021
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Audit and Assurance Services conform with all Public Sector Internal Audit Standards as validated through the external quality assessment undertaken by the Institute of Internal Auditors.

ACKNOWLEDGEMENT

NHS Wales Audit & 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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1. Introduction and Background

In line with the revised 2020/21 Internal Audit Plan for Hywel Dda University Health Board (the Health Board) a review of the local management of the deployment of IT in relation to the COVID-19 Pandemic was undertaken.

NHS Wales organisations such as Hywel Dda University Health Board have had to work quickly, and flexibly under extraordinary pressure to meet the needs of its workforce and the public.

Staff across the Health Board have done a great deal to reduce the risks associated with COVID-19, this has included examples such as repurposing areas for clinical work, and working from home wherever possible.

In order to support these changes the organisation has had to deploy a great deal of IM&T equipment and solutions in a relatively short amount of time, this review looked at the management of these deployments.

The relevant lead for the assignment is the Director of Finance.

2. Scope and Objectives

The objective of the audit was to ensure that appropriate control and governance was in place to manage the effective deployment of IM&T equipment and solutions to support the Health Board during the initial stages of the COVID-19 Pandemic.

The areas reviewed during the audit were:

- **Request** – requests for additional equipment and IM&T solutions to meet the demands of new ways of working during the COVID-19 pandemic were logged by the organisation.
- **Prioritisation** – the request rationale was assessed and prioritised based on benefits prior to rollout;
- **Timeliness of Rollout** – following the receipt and prioritisation of a request, technology was implemented without any unnecessary or unavoidable delay.
- **Budget and Spending** – spending on COVID-19 related IM&T deployment was properly recorded; and
- **Benefits Realisation** – appropriate reviews took place or are scheduled to ensure that the technology implemented under COVID-19 delivered the benefits outlined in the initial requests.

3. Associated Risks

The potential risks considered in the review are as follows:

- Unnecessary delays in responding to requests for equipment and IM&T solutions to meet the demands of new ways of working during the COVID-19 pandemic.
- Poor oversight and governance in relation to technology deployed under COVID-19.
- The technology deployed under COVID-19 does not deliver the anticipated benefits.


OPINION AND KEY FINDINGS

4. Overall Assurance Opinion

We are required to provide an opinion as to the adequacy and effectiveness of the system of internal control under review. The opinion is based on the work performed as set out in the scope and objectives within this report. An overall assurance rating is provided describing the effectiveness of the system of internal control in place to manage the identified risks associated with the objectives covered in this review.

The overall level of assurance that can be assigned to a review is dependent on the severity of the findings as applied against the specific review objectives and should therefore be considered in that context.

The level of assurance given as to the effectiveness of the system of internal control in place to manage the risks associated with Effectiveness of IT deployment in relation to COVID-19 is **Substantial** assurance.

RATING	INDICATOR	DEFINITION
Substantial Assurance		The Board can take substantial assurance that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Few matters require attention and are compliance or advisory in nature with low impact on residual risk exposure.

This substantial assurance rating for the effectiveness of IT deployment in relation to COVID-19 reflects the significant and positive work undertaken by the Health Board during extremely challenging times.

The speed with which compliant new ways of working were introduced in response to COVID-19 is commendable and we noted a robust framework of controls, consistently applied in all the areas reviewed.

Requests for additional equipment and IM&T solutions were monitored by the organisation via the Digital Bronze group. This included requests for equipment, software and systems.

To deal with the demand the organisation implemented an electronic request process, following the receipt and prioritisation of a request, equipment would be allocated to individuals based on a predefined set of criteria.





Our review noted that rollout of equipment was timely, however during the early stages of the pandemic there were some delays in equipment being provided, this was due to unprecedented demand nationally.

Spending on COVID-19 related IM&T deployment was properly recorded by the Health Board and the benefits they have been able to achieve during the pandemic have been identified and communicated.

No findings were noted as part of this review.

5. Assurance Summary

The summary of assurance given against the individual objectives is described in the table below:

Audit Objective		Assurance Summary*			
					
1	Request – requests for additional equipment and IM&T solutions to meet the demands of new ways of working during the COVID-19 pandemic were logged by the organisation.				✓
2	Prioritisation – the request rationale was assessed and prioritised based on benefits prior to rollout.				✓
3	Timeliness of Rollout – following the receipt and prioritisation of a request, technology was implemented without any unnecessary or unavoidable delay.				✓
4	Budget and Spending – spending on COVID-19 related IM&T deployment was properly recorded.				✓
5	Benefits Realisation – appropriate reviews took place or are scheduled to ensure that the technology implemented under COVID-19 delivered the benefits outlined in the initial requests.				✓

* The above ratings are not necessarily given equal weighting when generating the audit opinion.

Design of Systems/Controls

There were no issues that are classified as weaknesses in the system control/design for the effectiveness of IT deployment in relation to COVID-19.

Operation of System/Controls

There were no issues that are classified as weaknesses in the operation of the designed system/control for the effectiveness of IT deployment in relation to COVID-19.

6. Summary of Audit Findings

OBJECTIVE 1: Request – requests for additional equipment and IM&T solutions to meet the demands of new ways of working during the COVID-19 pandemic were logged by the organisation.

We note the following areas of good practice:

- Requests for additional equipment and IM&T solutions were monitored via the Digital Bronze group. This included requests for equipment, software and systems such as Microsoft Teams, Attend anywhere and PACS Mobility for example.
- To improve the deployment process the health board's traditional equipment request forms were replaced with a new COVID-19 Informatics Requests Form. This allowed the organisation to deploy equipment in an efficient and coordinated way.
- The process to follow for equipment requests and how to access the appropriate form was communicated to all staff in the organisation via the intranet and global email communication process.
- A master tracker was used to monitor equipment requests and to report the progress and number of requests actioned to the Digital Bronze Group.
- Our review of the tracker used by the health board to log equipment requests confirmed that scrutiny took place before equipment requests were actioned. We noted that some requests were cancelled because they did not have directorate approval or the equipment requested did not match the role type / duties and in some cases where duplicate requests had been made.

No findings were noted under this objective heading.

OBJECTIVE 2: Prioritisation – the request rationale was assessed and prioritised based on benefits prior to rollout.

We note the following areas of good practice:

- The rationale for equipment requests were assessed and prioritised on a cohort based approach as set out by the Health Board Gold Command and monitored by the Digital Bronze Command Group.
- Prioritising the requests in this way ensured maximum benefits would be achieved from the prompt deployment of the equipment to the appropriate staff group.

- The prioritisation criteria and request process was communicated to staff via global email and published to the Health Board's intranet site.

No findings were noted under this objective heading.

OBJECTIVE 3: Timeliness of Rollout – following the receipt and prioritisation of a request, technology was implemented without any unnecessary or unavoidable delay.

We note the following areas of good practice:

- Rollout of equipment by the organisation was timely, the organisation implemented an electronic request process whereby equipment would be allocated to individuals based on a predefined set of criteria.
- A master tracker was maintained logging all approved equipment requests. When equipment became available it was allocated to staff on the waiting list avoiding unnecessary delay.
- Key Performance information in relation to the number of requests received and completed was reported to the digital bronze group
- During the early stages of the pandemic there were some delays in equipment being provided, this was due to unprecedented demand nationally. Where delays were experienced, communications were sent out by the Informatics department to keep staff informed about the situation, asking for their patience and cooperation while the requests were dealt with.

No findings were noted under this objective heading.

OBJECTIVE 4: Budget and Spending – spending on COVID-19 related IM&T deployment was properly recorded.

We note the following areas of good practice:

- Expenditure on COVID-19 related IM&T deployment was recorded and was attributed to a specific cost code which would appear under the individual departmental cost centres.
- Expenditure during the pandemic was reported to Welsh Government and submitted to the Health Board Finance Committee, summary reports were also submitted to the Board meetings.

No findings were noted under this objective heading.

OBJECTIVE 5: Benefits Realisation – appropriate reviews took place or are scheduled to ensure that the technology implemented under COVID-19 delivered the benefits outlined in the initial requests.

We note the following areas of good practice:

- Benefits to staff, patients and the organisation resulting from the effective deployment of technology during the COVID-19 pandemic have been identified by the Health Board.
- The benefits have been broadly attributed to the following categories:
 - empowering staff to work digitally and remotely;
 - virtual meetings and digital consultations;
 - connecting patients and their families;
 - supporting patient flow; and
 - accelerated rollout of national products.
- The Health Board has communicated internally and externally the benefits they have been able to achieve during the pandemic, this Digital Covid journey shows how the deployments of IM&T have contributed to the benefits for patients, staff and the organisation.


No findings were noted under this objective heading.


7. Summary of Recommendations


No findings were identified during this review.


Appendix A - Assurance Opinion and Action Plan Risk Rating

2020/21 Audit Assurance Ratings

 **Substantial Assurance** - The Board can take **substantial assurance** that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Few matters require attention and are compliance or advisory in nature with **low impact on residual risk** exposure.

 **Reasonable Assurance** - The Board can take **reasonable assurance** that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. Some matters require management attention in control design or compliance with **low to moderate impact on residual risk** exposure until resolved.

 **Limited Assurance** - The Board can take **limited assurance** that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively. More significant matters require management attention with **moderate impact on residual risk** exposure until resolved.

 **No Assurance** - The Board has **no assurance** arrangements in place to secure governance, risk management and internal control, within those areas under review, which are suitably designed and applied effectively. Action is required to address the whole control framework in this area with **high impact on residual risk** exposure until resolved.

Prioritisation of Recommendations

In order to assist management in using our reports, we categorise our recommendations according to their level of priority as follows.

Priority Level	Explanation	Management action
High	Poor key control design OR widespread non-compliance with key controls. PLUS Significant risk to achievement of a system objective OR evidence present of material loss, error or misstatement.	Immediate*
Medium	Minor weakness in control design OR limited non-compliance with established controls. PLUS Some risk to achievement of a system objective.	Within One Month*
Low	Potential to enhance system design to improve efficiency or effectiveness of controls. These are 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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