

Audit & Risk Assurance Committee
TABLE OF ACTIONS
Arising from Meeting held on 22nd October 2019

Minute No.	Meeting Date	Subject	Action	Lead	Timescale	Progress/Date Achieved
AC(18)247	11/12/2018	Procurement and Disposal of IT Assets Follow-Up (Reasonable Assurance)	To take forward concerns around the lack of an adequate asset register and to consider the issue of consolidation of independent asset registers with the main system.	HT	Feb June October 2019	<p><i>Internal Audit brief agreed. Advisory project undertaken. Project reviewed the current system in place and how it operates, a review of good practice in operation at a number of other NHS Wales bodies and a proposal to take this forward.</i></p> <p><i>Internal Audit report presented to 25th June 2019 meeting.</i></p> <p><i>Finance have reviewed the recommendation and are developing a project plan to address this issue.</i></p> <p><i>SBAR provided to 22nd October 2019 meeting.</i></p>

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AC(19)46	23/04/2019	Wales Audit Office Update Report	To share, when available, the proposed scope for the Clinical Equipment review.	AB	June October December 2019	<p><i>The Clinical Equipment review is scheduled for quarter 3 of 2019-20. The draft scope will be shared at that time.</i></p> <p><i>Update to be provided at 19th December 2019 ARAC meeting.</i></p> <p>Verbal update to be provided at meeting.</p>
AC(19)57	23/04/2019	Welsh Risk Pool Claims (Substantial Assurance)	To share with Mr Huw Thomas any examples of good practice relating to WRP Claims from other Health Boards.	SC/JJ	June August October 2019 February 2020	<p><i>IA is currently looking to obtain the required information in order to provide an update for the June 2019 meeting.</i></p> <p><i>The information required has been determined as wider than that in the Internal Audit report across the Health Boards, so a request will need to be made to NWSSP for the wider information on good practice.</i></p>

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						<p><i>The Director of Audit & Assurance has highlighted that NWSSP is currently looking at the wider assurances they provide, linked to sharing good/ consistent practice where possible, and this information is being considered as part of that review. This is likely to be completed in the later quarter of the financial year.</i></p> <p><i>Update to be provided at 25th February 2020 ARAC meeting.</i></p> <p><i>Forward planned for 25th February 2020 meeting.</i></p>
AC(19)122	29/05/2019	Preparedness & Compliance with the Nurse Staffing Act (Substantial Assurance)	To clarify, with regard to Objective 4, figures and percentages in relation to the need for temporary staff, in order to gauge potential risk;	JJ	June October 2019 February 2020	<i>The assurance was given based on the adequacy of the systems in place to manage the ongoing risks around this, with each of the five wards requiring the</i>

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						<p><i>regular use of temporary staff. If further detail was required, additional work would be needed and further information requested from the wards visited. This could be done when the further testing is undertaken.</i></p> <p><i>Further testing not planned until Q3/4.</i></p> <p><i>There is no further update at this point, as the additional work will not commence until Q3/4. Therefore, feedback to ARAC will not be available until the February 2020 meeting at the earliest.</i></p> <p><i>Forward planned for 25th February 2020 meeting.</i></p>
AC(19)138	25/06/2019	Operating Theatres Update	To provide a further update, via the Table of Actions, on	JT/AC	August October December	<i>Implementation of the new system has been deferred</i>

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		(response to WAO & IA reviews)	discussions with HR and the BGH scrub team.		2019	<p><i>pending HR issues in September 2019. Alongside this, recruitment efforts are continuing, to facilitate implementation of the system as soon as possible thereafter.</i></p> <p><i>Current aim is to implement by the end of October 2019.</i></p> <p>The HR (Grievance) process of September 2019 has yet to be concluded. Recruitment processes continue with some success in numbers, however the staff will need significant skill investment and development in order to be suitable independent scrub practitioners. Scrub skilled agency staff have been brought in to support shifts. Roster profile with 24/7 staffing and</p>

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						<p>removal of the compensatory rest day has been designed and staff are working with e-roster team. Permanent change to staffing roster is subject to outcome of current HR process. All teams committed to supporting appropriate resolution.</p>
AC(19)145	25/06/2019	Internal Audit Plan Progress Report	Should there be a need to change the scheduling of reports, to highlight changes in red text and provide an explanatory note, and also to include the amount of days spent on each audit within the plan.	JJ	August October 2019	<p><i>The inclusion of audit days in the report is currently being reviewed, and will be discussed further with the ARAC Chair in the first instance.</i></p> <p><i>The Head of Internal Audit has met with the ARAC Chair to clarify requirements, and is now in discussion with the Director of Audit and Assurance regarding how to present this information.</i></p>

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						Additional data has been included within the Internal Audit Plan Progress Report.
AC(19)148	25/06/2019	Budgetary Planning (Reasonable Assurance)	To provide an update on the number of outstanding authorised accountability letters via the Table of Actions.	HT	August October December 2019	<i>A number have been signed due in July and August; one area outstanding which has now been escalated via the CEO/HTA process for conclusion.</i> <i>Verbal update provided at 22nd October 2019 ARAC meeting.</i> Verbal update to be provided at meeting.
AC(19)162	27/08/2019	Table of Actions: AC(19)06 – Feedback from the Targeted Intervention Meeting held on 8th February 2019	To forward plan an update on work undertaken through the Finance Committee to ensure the Health Board is in a position to understand the underlying deficit.	CM	December 2019	Forward planned for 19 th December 2019 meeting.
AC(19)167	27/08/2019	Wales Audit Office Update Report	To provide a further update on the proposed Quality Governance thematic review at the next meeting.	AB	October December 2019	<i>Verbal update provided at 22nd October 2019 ARAC meeting.</i>

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						Verbal update to be provided at meeting.
AC(19)168	27/08/2019	WAO Structured Assessment 2017 and 2018 - Progress to Date	To take forward the action regarding timetabling.	AC	October 2019 April 2020	<i>This will not be straightforward to achieve; however, preliminary discussions have been held with the new Deputy Medical Director.</i> Update to be provided at April 2020 ARAC meeting.
AC(19)173	27/08/2019	NHS Consultant Contract Follow-up Review update	To provide a further update in April 2020.	PK	April 2020	Forward planned for April 2020 meeting.
AC(19)196	22/10/2019	Table of Actions: AC(18)247 – Procurement and Disposal of IT Assets Follow-Up (Reasonable Assurance)	To obtain an update from Mrs Miles to clarify the scope of the work being undertaken on PII.	JW/KM	December 2019	As part of the Information Asset Register work, information flows that have been identified have been assessed for PII and their subsequent disposal. Each of the Information Asset Audits include specific assessment questions to provide the assurance that paper and electronic information is disposed as follows:

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						<p>Where the PII is contained within a system then the information is retained and disposed as per the current Health Board policy.</p> <p>Where the PII is paper based then it is recommended that the current process of using the confidential waste facility is utilised.</p> <p>Where PII is embedded or stored on a device the current disposal mechanism of utilising the Keep Wales Tidy is utilised.</p>
		Table of Actions: AC(19)122 – Preparedness & Compliance with the Nurse Staffing Act (Substantial Assurance)	To forward plan an update for the final quarter of the year.	CM	October 2019	Completed. Forward planned for 25 th February 2020 meeting.

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		Table of Actions: AC(19)138 – Operating Theatres Update (response to WAO & IA reviews)	To obtain an update on implementation of the new system.	JT/AC	December 2019	See AC(19)138, above.
		Table of Actions: AC(19)148 – Budgetary Planning (Reasonable Assurance)	To provide an update, via the Table of Actions, to the next meeting.	HT	December 2019	See AC(19)148, above.
		Table of Actions: AC(19)167 – Wales Audit Office Update Report	To amend the timescale for this action.	CM	October 2019	Completed.
		Table of Actions: AC(19)168 – WAO Structured Assessment 2017 and 2018 - Progress to Date	To amend the timescale for this action and to leave the action open for a further update.	CM	October 2019	Completed.
AC(19)200	22/10/2019	Financial Assurance Report	To seek clarification regarding the timescale for installation of the new switchboard system.	JW/AT	December 2019	The new Switchboard Infrastructure has been purchased and installed within a test environment. Extensive testing will be undertaken during January – March 2020, with an anticipated go live of the new Switchboard

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						infrastructure in April 2020.
AC(19)204	22/10/2019	Response to WAO Report: What's the hold up? Discharging Patients in Wales	<ul style="list-style-type: none"> To circulate the WG Delivery Unit report from their review of Discharge processes; To submit the revised Unscheduled Care plans to BPPAC; 	CM	December 2019	Completed. Circulated via email 13 th November 2019.
				JT/AC	December 2019	Content for the 3 year plan (2020/23) to be discussed at Board Seminar on 12 th December 2019 ahead of an expected submission of the final product to Welsh Government by the end of January 2020 following January Public Board. Key to this is the development of Unscheduled Care narrative and action plan which will include links with the County Plans.
				JW	November 2019	Completed. Included in update report for Public Board meeting on 28 th November 2019.
AC(19)206	22/10/2019	RCP Medical Records Keeping Standards	<ul style="list-style-type: none"> To reiterate to clinicians that medical records are legal documents; 	PK	December 2019	Completed.

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		(Reasonable Assurance) Update	<ul style="list-style-type: none"> To analyse further the WGH results from the snapshot audit; To discuss with Mrs Wilson the reporting process for the new audit process; To provide further updates on clinical coding and medical records in six months. Mrs Miles and Dr Kloer to determine whether a single or combined report would be most appropriate; To share with Dr Kloer issues raised by the Internal Audit on Consultant Job Planning. 	PK	December 2019	Completed.
				PK	December 2019	Completed.
				KM/PK	April 2020	Forward planned for April 2020 meeting.
				JJ	December 2019	Completed.
AC(19)207	22/10/2019	WAO Follow-up Information Backup, Disaster Recovery and Business	To establish whether other Health Boards have been able to undertake 'whole system' tests.	AB	December 2019	Verbal update to be provided at meeting.

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		Continuity, and Data Quality Update				
AC(19)219	22/10/2019	Water Safety Follow-up (Substantial Assurance)	To correct the incomplete sentence in Appendix A and to reissue the report.	HR	October 2019	Completed. Updated report issued via iBabs on 24 th October 2019.
AC(19)220	22/10/2019	Water Safety – Additional Sampling (Limited Assurance)	<ul style="list-style-type: none"> For Board to conduct a review of the list of the outstanding Estates/IT/ Medical Equipment backlog at a Board Seminar; To reword the management response to Recommendation 9, with this to be managed via the Audit Tracker and Table of Actions. 	JW/MB	December 2019	Included on the forward work programme for the Board Seminar.
				RE/CB	December 2019	Completed and returned to Internal Audit.
AC(19)221	22/10/2019	Estates Directorate Governance Review (Limited Assurance)	To share with Mr Elliott the report from the Internal Audit of PADRs conducted earlier in the year.	JW	October 2019	Completed.
AC(19)222	22/10/2019	Radiology Directorate (Reasonable Assurance) Update	To provide to the next meeting, via the Table of Actions, a clear plan (agreed by the Executive Team) of timescales for implementation of Recommendations 3 and 8.	JT/AC	December 2019	There are no clear timeframes due to vacancies; however, the Head of Radiology is working with a group from Workforce and OD and the PMO to take this work forward. A further meeting is

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AC(19)223	22/10/2019	WAO Review of Estates 2016 Update	<ul style="list-style-type: none"> To provide an update to the next meeting regarding the 'Invest to Save' bid; To provide a further update to the April 2020 meeting. 	HT	December 2019	'Invest to Save' bid was successful. Please see attached table for proposed implementation timeline.
				RE	April 2020	Forward planned for April 2020 meeting.
AC(19)224	22/10/2019	IA Health & Safety 2016 Update	To address the issues around lack of clarity regarding implementation and format of the H&S inspection programme, and whether the associated management response (Recommendation 4) was overly optimistic.	RE	December 2019	2 x H&S Officer posts have been advertised with interview date 14/01/20. Key role is to undertake departmental H&S and COSHH audits based upon a risk prioritised inspection programme commencing March 2020 as per original schedule. This will comply with the timescales as indicated with the management response to recommendation 4 and 5 of the IA report. See also attached H&S Audit

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						Programme for 2020/21.
AC(19)225	22/10/2019	Audit Tracker	To re-circulate the letters previously sent regarding late or non-delivery of recommendations from external/internal audit and regulatory reports.	JW	December 2019	Completed. Letter circulated via email on 8 th November 2019.
AC(19)226	22/10/2019	Counter Fraud Update	<ul style="list-style-type: none"> To take ownership of the recommendations in the Overpayment Case Review and work on them in conjunction with the Director of Workforce & OD; To check whether the labelling in Appendix 1 of the Counter Fraud Services in NHS Wales Operational Performance Report for Quarter 1 is an error. 	HT ME	December 2019 December 2019	<p>An update on the Overpayment review with Workforce is included within the Financial Assurance Report.</p> <p>It has been confirmed that Appendix 1 is correct and shows a table of LCFS resource across NHS Wales as at 2014/15. This was included for comparison purposes with data supplied on LCFS resource as of June 2019 at Section 1.2 of the main body of the report.</p>

CAFM Project Timeline 2020

Project Aspect	Dec	Jan	Feb	March	April	May
Procurement of system / IT authorisation / project group establishment and project plan agreed	x					
A -Review of location data references across the HB for all property locations – indicating Site/Block/Floor/Room (Department) B – Review of PPM requirements for these locations indicating asset heading / PPM frequency / PPM job / risk assessments.		x	x			
IT installation/ data migration & Mobile Setup (Display Screens)			x	x		
Implementation & Training of Staff				x	x	
Testing of current data and Mobile Device Testing					x	
Setting up of reporting for KPI's / outputs /					x	x
Live testing / address post issues and full implementation of system – final test (go live) and communications of new system.						x