

## **Hywel Dda University Health Board**

### **Welsh Language Standards Implementation**

#### **Final Internal Audit Report**

**October 2019**

**Private and Confidential**

**NHS Wales Shared Services Partnership**

**Audit and Assurance Services**



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### **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.

### **Disclaimer notice - Please note:**

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## **1. Introduction and Background**

The review of the Welsh Language Standards Implementation was completed in line with the 2019/20 Internal Audit Plan.

On the 20<sup>th</sup> of March 2018, Assembly Members voted in favour of the Welsh Language Standards [No.7] Regulations 2018. The two key principles that underpin the Standards are:

- in Wales, the Welsh Language should be treated no less favourably than the English Language; and
- persons in Wales should be able to live their lives through the medium of Welsh language if they choose to do so.

## **2. Scope and Objectives**

The overall objective of this audit was to evaluate and determine the adequacy of the systems and controls in place over the implementation of the Standards.

In order to provide this assurance, we considered the systems and controls in place over:

- how staff are being made aware of the requirements of the Standards;
- how the Health Board has assessed the impact of the Standards on the organisation;
- the process for creating implementation action plans to achieve compliance with the Standards; and
- the process for determining the resource requirements to deliver these action plans.

## **Limitations of scope**

This audit is a high-level review of the actions the Health Board has taken to assess the impact of, and achieve compliance with the Standards. We have not assessed compliance with the Standards.

## **3. Associated Risks**


The main risk considered in the review was the potential for financial penalties and reputational damage because the Health Board is unable to comply with the Standards within the timescales agreed with the Welsh Language Commissioner.

## **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 level of assurance given as to the effectiveness of the system of internal control in place to manage the risks associated with Welsh Language Standards Implementation is **Reasonable** assurance.

<b>RATING</b>	<b>INDICATOR</b>	<b>DEFINITION</b>
<b>Reasonable Assurance</b>		The Board can take <b>reasonable assurance</b> 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 <b>low to moderate impact on residual risk</b> exposure until resolved.

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.

We noted the positive action taken by the Health Board in the implementation of the Welsh Language Standards including:





- Communication to staff and the Board around the implementation of the standards was effective;
- Impact assessments being issued for completion that enables the Welsh Language Team to assess the Health Boards compliance with the Standards; and
- Adequate resource has been successfully identified and provided for to aid with the increased workload as a result of the implementation.

However, three medium priority risks were identified:

- The lack of a designated responsible officer(s) and deadline dates for non-compliant standards identified following a directorate Readiness Assessment;
- Regular updates in regard of the progress of outstanding Readiness Assessments that were due to be undertaken throughout 2019; and
- No established interim arrangements to provide the Health Board with their compliance position against the implemented standards whilst key performance indicators and monitoring process are being developed.

## 5. Assurance Summary

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

Audit Risk		Assurance Summary*			
					
1	Staff are made aware of the requirements of the Standards				✓
2	The Health Board has assessed the impact of the Standards on the organisation			✓	
3	Process in place for creating implementation action plans to achieve compliance with the Standards			✓	
4	Process in place for determining the resource requirements to deliver the action plans				✓

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

### **Design of Systems/Controls**

The findings from the review have highlighted **four** issues that are classified as weakness in the system control/design for the implementation of the Welsh Language Standards. These are identified in the Management Action Plan as (D).

### **Operation of System/Controls**

The findings from the review have highlighted no issues that are classified as weakness in the operation of the designed system/control for the implementation of the Welsh Language Standards.

## 6. Summary of Audit Findings

The key findings are reported in the Management Action Plan at Appendix A.

### **OBJECTIVE 1: Staff are made aware of the requirements of the Standards**

Communication of the Welsh Language Standards has been effectively carried out throughout the Health Board.

- Information has been submitted to the Board via papers prepared by and presented by the Welsh Language Services Manager.
- Health Board staff were readily informed of the implementation and requirements of the Standards using a variety of methods. A '90 Day Countdown' campaign was actioned which involved communicating to staff via for example, global emails; a short film; Hywel's Voice; and face to face, via a road shows held at each of the Health Board's hospitals.
- In addition, the Welsh Language Services have a dedicated web page on the intranet detailing all the relevant information for staff compliance.

Internal Audit recognise that communicating across the Health Board to such a vast number of employees over a large geographical area is challenging. In light of this, and taking into account that the Health Board is legally bound by the Standards, management should consider rolling out a mandatory training module in ESR, covering the basics of the Standards together with the responsibilities of the staff member as has been implemented in other NHS Wales organisations.

**See Finding 1 at Appendix A.**

### **OBJECTIVE 2: The Health Board has assessed the impact of the Standards on the organisation**

The Welsh Language Commissioner issued a bespoke compliance notice to the Health Board in November 2018. The notice required the Health Board to be compliant with the Standards by the set imposition date of 30<sup>th</sup> May 2019.

To establish the impact of the Standards on the organisation, an impact assessment (Readiness Assessment) was initially rolled out within the Workforce & Organisational Development (OD) Directorate to establish their current compliance status.



However, the assessments for all other directorates had not been completed by May 2019 and were due to be completed and returned to the Welsh Language Services Department by the end of September 2019. The delay in not attaining compliance by the imposition date of 30<sup>th</sup> May 2019 was reported to the Workforce & OD Sub-Committee in July 2019.

We also noted that a Welsh Language Standards risk had been entered on the corporate register (Risk ID: 43) that was submitted to the QSEAC meeting in April 2019. Whilst impact assessments are currently being undertaken across the Health Board, the development of key performance indicators or monitoring process have yet to be developed. Whilst this assurance gap was noted in the risk register entry, the target date for completion was set for May 2020.

The Health Board has a right to challenge any of the standards set by the Commissioner if it is believed that they cannot be complied with within the target date. At the time of the audit, the Health Board had challenged four standards. For each of these four standards, backing documents and communication were satisfactorily reviewed and each of the challenged standards had been acknowledged by the Welsh Language Commissioner.

**See Findings 2 & 3 in Appendix A.**

### **OBJECTIVE 3: Process in place for creating implementation action plans to achieve compliance with the Standards**

The Welsh Language Services have implemented action plans to ensure that the Health Board meets the required timescales set by the Commissioner.

Each of the 'Readiness Assessments', as noted above, have been issued in an action plan format. Work on analysing these assessments will be completed when they are received back into the department at the end of September 2019. It was highlighted by the Welsh Services Manager that rather than having one overarching action plan for the Health Board as a whole, by having individual plans, a more detailed picture of compliance across the Health Board can be achieved.

A review of the 'Readiness Assessment' action plan highlighted that there was no assigned responsible officer or deadline date against planned actions. A recommendation has been made regarding this in Appendix A.

In addition, an action plan was put into place and successfully completed as part of the '90 Countdown' campaign.

**See Finding 4 at Appendix A.**

#### **OBJECTIVE 4: Process in place for determining the resource requirements to deliver the action plans**

The increased resource requirement of the Welsh Language Services department resulting from the implementation of the Standards was identified and reported to the Board in March 2019. As a result of the increased workload identified, funding for an extra three positions within the department was confirmed with one Welsh Language Support Officer having been appointed and a further Welsh Language Support Officer and Welsh Translator role out to advert with a view to appoint during September 2019.

**No matters arising.**

## 7. Summary of Recommendations

The audit findings and recommendations are detailed in Appendix A together with the management action plan and implementation timetable.

A summary of these recommendations by priority is outlined below.

<b>Priority</b>	<b>H</b>	<b>M</b>	<b>L</b>	<b>Total</b>
<b>Number of recommendations</b>	<b>0</b>	<b>3</b>	<b>1</b>	<b>4</b>

<b>Finding 1 – Staff Training (D)</b>	<b>Risk</b>
<p>Due to the number of employees spread over a large geographical area, undertaking Standards training is challenging. In light of this, and taking into account that the Health Board is legally bound by the Standards, management should consider rolling out a mandatory training module in ESR, covering the basics of the Standards together with the responsibilities of the staff member as has been implemented in other NHS Wales organisations.</p>	<p>Non-compliance with the Standards could lead to financial penalties for the Health Board.</p>
<b>Recommendation 1</b>	<b>Priority level</b>
<p><b>Management should consider introducing a Welsh Language Standards e-learning module as part of the ESR training programme to ensure staff and managers understand their roles and responsibilities in line with the Standards.</b></p>	<p><b>LOW</b></p>
<b>Management Response</b>	<b>Responsible Officer/ Deadline</b>
<p>The Welsh Language Services Team has contributed to a national piece of work being co-ordinated by Betsi Cadwaladr UHB and Shared Services, in the Once for Wales spirit of partnership, and the outcome is an e-learning resource. Timescale for this is currently unknown, but we plan to roll out once launched. In the meantime, we are targeting focused training and awareness and cascading through key teams.</p>	<p>Welsh Language Service Manager 31<sup>st</sup> October 2020 (subject to national project group delivery)</p>

<b>Finding 2 – Progress Reporting (D)</b>	<b>Risk</b>
Many of the standards had an imposition date of 30 <sup>th</sup> May 2019. At the time of testing, only one Readiness Assessment had been undertaken for Workforce & OD Directorate. Further assessments within other directorates were planned to be undertaken by September 2019.	Non-compliance with the Standards could lead to financial penalties for the Health Board.
<b>Recommendation 2</b>	<b>Priority level</b>
<b>Management should ensure progress updates of the completion of the Readiness Assessments and any subsequent actions are reported to the Workforce &amp; OD Sub-Committee.</b>	<b>MEDIUM</b>
<b>Management Response</b>	<b>Responsible Officer/ Deadline</b>
This will be implemented with immediate effect.	Welsh Language Service Manager & Programme Lead for Medical Workforce Utilisation  31 <sup>st</sup> December 2019


<b>Finding 3 – Key Performance Indicators (D)</b>	<b>Risk</b>
Whilst we noted the identification of an assurance gap in regard of the development of key performance indicators and monitoring process, to be actioned by May 2020, listed in the corporate risk register, we were unable to establish any interim arrangements to report compliance against the standards.	Non-compliance with the Standards could lead to financial penalties for the Health Board.
<b>Recommendation 3</b>	<b>Priority level</b>


<p><b>Management should establish interim arrangements to enable the reporting of Health Board compliance against the Welsh Language Standards whilst key performance indicators and monitoring processes are being developed.</b></p>	<p><b>MEDIUM</b></p>
<p><b>Management Response</b></p>	<p><b>Responsible Officer/ Deadline</b></p>
<p>A Welsh Language update is reported to the Improving Experience Sub-committee, which includes reports demonstrating compliance against the Welsh Language Standards.</p>	<p>Welsh Language Service Manager 31<sup>st</sup> October 2019</p>


<p><b>Finding 4 – Action Plans (D)</b></p>	<p><b>Risk</b></p>
<p>A review of the Readiness Assessment completed by the Workforce &amp; OD Directorate highlighted that there was no responsible officer or deadline date noted against individual standards that require further actions to be undertaken to ensure compliance.</p>	<p>Non-compliance with the Standards could lead to financial penalties for the Health Board.</p>
<p><b>Recommendation 4</b></p>	<p><b>Priority level</b></p>
<p><b>Management should ensure all directorate Readiness Assessments include a responsible officer(s) and deadline date for non-compliant standards that require addressing.</b></p>	<p><b>MEDIUM</b></p>
<p><b>Management Response</b></p>	<p><b>Responsible Officer/ Deadline</b></p>
<p>This will be implemented during this quarter.</p>	<p>Welsh Language Service Manager 31<sup>st</sup> December 2019</p>


## Appendix B - Assurance Opinion and Action Plan Risk Rating

### 2019/20 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
<b>High</b>	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*
<b>Medium</b>	Minor weakness in control design OR limited non-compliance with established controls. PLUS Some risk to achievement of a system objective.	Within One Month*
<b>Low</b>	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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