4.1 Internal Audit Plan Progress Report
Presenter: James Johns
SBAR IA Plan Progress Report ARAC May 2019
IA Plan Progress Report ARAC May 2019



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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	29 May 2019
TEITL YR ADRODDIAD: TITLE OF REPORT:	Audit & Assurance Progress Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Head of Internal Audit
SWYDDOG ADRODD: REPORTING OFFICER:	Head of Internal Audit

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 Internal Audit Progress Report provides specific information for the Audit & Risk Assurance Committee covering the following key areas:

- Detail relating to outcomes, key findings and conclusions from the finalised internal Audit assignments
- Specific detail relating to progress against the audit plan and any updates that have occurred within the plan.

#### <u>Cefndir / Background</u>

The work undertaken by Internal Audit is in accordance with its plan of work, which is prepared following a detailed planning process and subject to Committee approval.

The progress report provides the Committee with information regarding the progress of Internal Audit work in accordance with the agreed plan; including details and outcomes of reports finalised since the previous meeting of the committee. The Committee also receives the finalised audit reports for review and scrutiny.

#### Asesiad / Assessment

The findings and assurance ratings from the Internal Audit Reports provide the Committee with a level of assurance as the adequacy of the risk, governance and control environment in the areas audited.

#### Argymhelliad / Recommendation

The Audit & Risk Assurance Committee is asked to:

• Consider the Internal Audit Progress Report and the assurance available from the finalised Internal Audit reports.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference Cyfeirnod Cylch Gorchwyl y Pwyllgor	<ul> <li>5.17 This will be achieved by:</li> <li>5.17.1 review and approval of the Internal Audit</li> <li>Strategy, Charter, operational plan and more detailed programme of work, ensuring that this is consistent with the audit needs of the organisation;</li> <li>5.17.2 consideration of the major findings of internal audit work (and management's response), and ensure co-ordination between the Internal and External Auditors to optimise audit resources;</li> </ul>
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Safon(au) Gofal ac lechyd: Health and Care Standard(s):	All Health & Care Standards Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: <u>Hyperlink to HDdUHB Well-being</u> <u>Statement</u>	Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Internal Audit plan. Evidence gathered as part of the delivery of audit assignments.
Rhestr Termau:	Contained within the body of the report.
Glossary of Terms:	
Partïon / Pwyllgorau â ymgynhorwyd	Executive Directors and Senior managers relevant to
ymlaen llaw y Pwyllgor Archwilio a	the individual audits.
Sicrwydd Risg:	Board Secretary.
Parties / Committees consulted prior	
to Audit and Risk Assurance	
Committee:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Not applicable
Ansawdd / Gofal Claf: Quality / Patient Care:	Not applicable
Gweithlu: Workforce:	Not applicable

Risg:	Not applicable
Risk:	
Cyfreithiol:	Not applicable
Legal:	
Enw Da:	Not applicable
Reputational:	
Gyfrinachedd:	Not applicable
Privacy:	
Cydraddoldeb:	Not applicable
Equality:	





Bwrdd Iechyd Prifysgol Hywel Dda University Health Board

# Hywel Dda University Health Board

## Audit & Risk Assurance Committee Update

## 29<sup>th</sup> May 2019

# **Internal Audit Progress Report**

### **1. INTRODUCTION**

- **1.1** This report provides the Audit & Risk Assurance Committee (ARAC) with a progress statement of the NWSSP: Audit and Assurance Services Internal Audit plan. The report has been developed to monitor: -
  - The delivery of agreed Internal Audit plan for 2018/19;
  - The status and progress of individual assignments;
  - Outcomes from finalised Internal Audit reports.

### 2. OUTCOMES FROM COMPLETED AUDIT REVIEWS

- **2.1** A number of assignments have been finalised since the previous meeting of the committee and are highlighted in the table below along with the allocated assurance ratings.
- **2.2** The full versions of these reports are included on the agenda as separate items.

ASSIGNMENT	ASSURANCE RATING	
Nurse Staffing Act	Substantial	
Discharge Preocess (Follow up)	Reasonable	<b>~</b> ?
Integrated Care Fund Follow up	Reasonable	<b>~</b> ?
PADR's	Limited	

### 3. DELIVERY OF THE INTERNAL AUDIT PLAN

- **3.1** The detail of progress with the plan of audit work is set out in the schedule which is included at Appendix A.
- **3.2** The Annual Governance Statement and Governance, Leadership and Accountability module have been reviewed and comments noted in the Head of Internal Audit Annual Report.
- **3.3** A small number of audits to be finalised with the reports being presented to the next meeting of the committee. It is noted that the work has been completed for each of these audits and they will conclude with a positive outcome.

## 4. INTERNAL AUDIT PLAN 2019/20

**4.1** Work has commenced with the delivery of some initial audits and planning work for audits scheduled in the early part of the year ahead.

## Appendix A – Audit Plan Progress Schedule

HDUHB				Summary	y of Recomm	endations	
Assignments	Audit Domain	Status	Rating	High	Medium	Low	Notes
2017/18 Audit Plan							
Governance in IT	Information Governance & Security	Final	N/A	N/A	N/A	N/A	Requested by Executive Directors. Brought forward and to be included in 2018/19 HoIA. Agreed with Board Secretary that report would be in the form of an SBAR and no assurance rating would be given. Final report to the in-committee session of the ARAC meeting 21.08.18.
2018/19 Audit Plan				·	·		
PC / Laptop Security Arrangements (Follow-up)	Information Governance & Security	FINAL					To be included in 2018/19 HoIA.
IM&T Security Policies and Procedures (Follow-up)	Information Governance & Security	Final		0	0	1	To be included in 2018/19 HoIA. Final report issued 09.11.18s
Procurement and Disposal of IT Assets (Follow-up)	Information Governance & Security	Final	<b>-</b> Z	1	0	0	To be included in 2018/19 HoIA. Final report issued 09.11.18
Complaints / Concerns	Clinical governance, quality and safety	Final	<i>_</i> ?	1	1	0	To be included in 2018/19 HoIA. Final report issued 08.10.18.
IM&T Directorate Audit	Information Governance & Security	Final	<b>_</b> ?	3	4	1	To be included in 2018/19 HoIA. Final issued 13.11.18

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HDUHB				Summary	of Recomm	endations	
Assignments	Audit Domain	Status	Rating	High	Medium	Low	Notes
Homecare Services (Follow-up)	Strategic planning, performance management and reporting	Final		0	0	0	To be included in 2018/19 HoIA. Final report issued 28.06.18 and on taken to ARAC on 21.08.18.
Radiology Directorate Audit	Operational service and functional management	Final	<b>-</b> Z	6	1	1	To be included in 2018/19 HoIA. Final report.
FOI (Follow-up)	Information Governance & Security	Final	<u>_</u> ?	0	0	0	To be included in 2018/19 HoIA. Final report issued 13.08.18
Governance surrounding Single Tender Actions	Corporate governance, risk and regulatory compliance	Final	- <u>-</u>	1	3	0	To be included in 2018/19 HoIA. Final report issued 18.03.19
Safeguarding Children & Vulnerable Adults	Clinical governance, quality and safety	Final	<u>_</u> ?	1	2	0	To be included in 2018/19 HoIA.
Records Management	Operational service and functional management	Final		4	6	0	To be included in 2018/19 HoIA.
Royal College of Physicians Medical Records Standard	Operational service and functional management	FINAL	<b>_</b> ?	1	0	0	To be included in 2018/19 HoIA.

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HDUHB				Summary	of Recomm	endations	
Assignments	Audit Domain	Status	Rating	High	Medium	Low	Notes
Ombudsman Report	Clinical governance, quality and safety	FINAL	<u> </u>	1	0	0	To be included in 2018/19 HoIA. Final.
Annual Plan	Strategic planning, performance management and reporting	Final		-	-	-	To be included in 2018/19 HoIA.
National Standards for Cleaning in Wales	Operational service and functional management	Final		4	1	0	To be included in 2018/19 HoIA.
Accounts Receivable	Financial governance and management	FINAL	<u>_</u> z	1	2	2	To be included in 2018/19 HoIA.
Financial Ledger	Financial governance and management	FINAL	- <u>}</u>	-	2	1	To be included in 2018/19 HoIA.
Treasury Management	Financial governance and management	FINAL		0	1	0	To be included in 2018/19 HoIA.

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HDUHB				Summary	of Recomm	endations	Notes
Assignments	Audit Domain	Status	Rating	High	Medium	Low	
Consultancy Services (follow-up)	Corporate governance, risk and regulatory compliance	FINAL		-	-	-	To be included in 2018/19 HoIA. FINAL
Charitable Funds	Financial governance and management	FINAL		0	2	1	To be included in 2018/19 HoIA.
GDPR	Information Governance & Security	Final		0	0	0	To be included in 2018/19 HoIA. Field work in progress.
Welsh Risk Pool Claims	Clinical governance, quality and safety	FINAL	<b>€</b> ₀~	0	0	0	To be included in 2018/19 HoIA
Payroll ( HDUHB findings)	Workforce	FINAL	<u>_</u> ?	-		-	To be included in 2018/19 HoIA
Management of Controlled Drugs	Clinical governance, quality and safety	Final	<b>_</b> ?	0	5	1	To be included in 2018/19 HoIA.

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HDUHB			Rating	Summary	of Recomm	endations	
Assignments	Audit Domain	Status		High	Medium	Low	Notes
Cost Improvement Plans	Financial governance and management	Draft	<u>_</u> ?				To be included in 2018/19 HoIA.
Review of Discharge procedures Follow up	Clinical governance, quality and safety	FINAL	<b>_</b> ?	-	2	-	To be included in 2018/19 HoIA
Preparedness and compliance with Nurse Staffing Act	Clinical governance, quality and safety	FINAL	<b>~~</b>	-	1	-	To be included in 2018/19 HoIA
ICF Follow up	Strategic Planning	FINAL		1	1	-	To be included in 2018/19 HoIA.
Budgetary Planning	Financial governance and management	Draft	<b>_</b> ?	1	1	-	To be included in 2018/19 HoIA.
Review of PADR Processes	Workforce	FINAL	<u>_</u> }	1	2	-	To be included in 2018/19 HoIA.
Annual Governance Statement	Governance	completed	n/a	-	-	-	Reported in the 2018/19 HoIA

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HDUHE	3				Summary	of Recomm	endations	
Assign	ments	Audit Domain	Status	Rating	High	Medium	Low	Notes
Fixed A	ssets (Advisory)	Financial governance	Fieldwork complete	n/a				To be included in 2018/19 HoIA.
Heath &	& Care Standards	Governance	Initial draft	reasonable				To be included in 2018/19 HoIA
Assign	ment	Audit Type	Status	Rating	High	Medium	Low	Notes
Capita	l & Estates							
HDU_ 1718 _06	Fire Precautions	Estates Assurance	Complete	<b>_</b> ?	-	4	3	A final report was issued on 31 <sup>st</sup> May 2018.
SSU_ HDU_ 1819 _08	Environmental sustainability (Mandated)	Mandated review	Complete	N/A	-	5	-	Briefing Paper issued 23 <sup>rd</sup> August 2018. The Sustainability briefing paper was presented to ARAC on the 11 <sup>th</sup> December 2018.
SSU_ HDU_ 1819 _09	Carbon Reduction Commitment (Mandated)	Mandated review	Complete	N/A	-	-	-	Briefing Paper issued 22 <sup>nd</sup> August 2018. Presented to the audit committee on the 11 <sup>th</sup> December 2018.
HDU_ 1819 _11	Cardigan Integrated Care Project.	Project Audit	Complete	<b>_</b> ?	-	11	-	A final report was issued on 8 <sup>th</sup> April 2019. The report will be presented to ARAC on the 23 <sup>rd</sup> April 2019.
SSU_ HDU_ 1819 _02	Withybush General Hospital, Refurbishment of Wards 9 and 10 to Form a Palliative Care, Haematology and Oncology Ward.	Project Audit	Complete	<b>-</b> 2	-	8	2	A final report was issued on 4 <sup>th</sup> April 2019. The report will be presented to ARAC on the 23 <sup>rd</sup> April 2019.

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HDUHB Assignments		Audit Domain	Status	Rating	Summary of Recommendations			
					High	Medium	Low	Notes
SSU_ HDU_ 1819 _03	Primary and Community Care Pipeline Projects	Primary Care Project Audit	Complete	<b>o</b> ∞	-	3	1	A final report was issued on 4 <sup>th</sup> April 2019. The report will be presented to ARAC on the 23 <sup>rd</sup> April 2019.
SSU_ HDU_ 1819 _04	Informatics Projects	Informatics Project Audit	Complete		1	7	-	A final report was issued on 4 <sup>th</sup> April 2019. The report will be presented to ARAC on the 23 <sup>rd</sup> April 2019.
SSU_ HDU_ 1819 _07	Water Safety	Estates assurance	Complete		2	9	1	A final report was issued on 8 <sup>th</sup> April 2019. The report will be presented to ARAC on the 23 <sup>rd</sup> April 2019.
SSU_ HDU_ 1819 _01	Capital Follow-up	Follow-up	Complete		-	2	_	A final report was issued on 4 <sup>th</sup> April 2019. The report will be presented to ARAC on the 23 <sup>rd</sup> April 2019.
	Estates Follow-up	Follow-up	Complete		-	4	4	A final report was issued on 4 <sup>th</sup> April 2019. The report will be presented to ARAC on the 23 <sup>rd</sup> April 2019.
SSU_ HDU_ 1819 _06	Bronglais Hospital Front of House Development and Fire Lift - Final Account.	Final Account Risk Analysis	Pre- planning	N/A				Work on site is due to complete late March 2019. Whilst we are advised the final account is well progressed, not all of the sub-contractor applications have been received. The Cost Adviser aims to be able to finalise during Q2-Q3 2019/20 for audit review.

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HDUHB Assignments		Audit Domain	Status	Rating	Summary of Recommendations			
					High	Medium	Low	Notes
SSU_ HDU_ 1819 _05(a /b)	Major Strategic Investment Programmes: a) Estates Infrastructure and Ward Refurbishment b) Transforming Clinical Services Programme.	Collaborative Development Support	Paper prepared	n/a				The Director of Finance requests advice on the expected controls manage the risk of contracts insolvency. A draft paper has bee prepared and issued for consideration. The Director of Finance als requested that we provide a briefin paper for the Executive Team on th current and expected governance arrangements for the Transformin Clinical Services (TCS) Programm
SSU_ HDU_ 1819 _10	Project Director/ Independent Members	Training/ Proactive support	Presentatio n prepared	N/A				Board Member Training: A presentation/workshop has bee prepared and agreed wit management, to review th Business Case process as Development Session for Boar members. We currently awa confirmation from management of an appropriate date. Project Director Training: The scope of the training has bee agreed with management, wit particular focus at the function of the Women & Children's Proje Group. A slot has been agreed June 2019 to conduct the same.



Partneriaeth Cydwasanaethau Gwasanaethau Archwilio a Sicrwydd

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