

Public Health Wales NHS Trust

Audit & Corporate Governance  
Committee  
Internal Audit Progress Report

September 2023

NWSSP Audit and Assurance Services

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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 Chartered Institute of Public Finance & Accountancy in April 2023.

### 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

This report has been prepared for internal use only. Audit & Assurance Services reports are prepared, in accordance with the Service Strategy and Terms of Reference, approved by the Audit & Corporate Governance Committee.

Audit reports are prepared by the staff of the NHS Wales Shared Services Partnership – Audit and Assurance Services, and addressed to Independent Members or officers including those designated as Accountable Officer. They are prepared for the sole use of Public Health Wales NHS Trust and no responsibility is taken by the Audit and Assurance Services Internal Auditors to any director or officer in their individual capacity, or to any third party.

Our work does not provide absolute assurance that material errors, loss or fraud do not exist. Responsibility for a sound system of internal controls and the prevention and detection of fraud and other irregularities rests with Public Health Wales NHS Trust. Work performed by internal audit should not be relied upon to identify all strengths and weaknesses in internal controls, or all circumstances of fraud or irregularity. Effective and timely implementation of recommendations is important for the development and maintenance of a reliable internal control system.

## 1 Introduction

- 1.1 This progress report provides the Audit & Corporate Governance Committee (the 'Committee') with the current position regarding the work undertaken by Internal Audit as at **7 September 2023**. This report provides information on the status of progress of our reviews.
- 1.2 We report the progress made to date against individual assignments along with details regarding the delivery of the plans and any required updates.

## 2 Delivering the Plan

- 2.1 Since the July meeting of the Committee we have had a number of planning meetings and started fieldwork for one review.

### Feedback

- 2.2 Our final reports are issued with a post audit questionnaire, which is our way of getting feedback on the audit process so that we can look to make improvements. This year, we will use Microsoft 'forms' to request feedback. This should be an easier way for the Trust to provide us with valuable feedback.

## 3 Other activity

### Meetings

- 3.1 We observe Board and committee meetings, meet regularly with the Board Secretary and continue to meet with Audit Wales colleagues.

## Appendix A: Internal Audit Plan 2023/2024

Planned output	Outline Scope	Executive Lead	Status	Outline Timing by Quarter	Notes
Work programmes	To consider management and approach of programmes that are funded by grants. (For example, healthy working Wales, and obesity pathway).	Acting Director of Health & Wellbeing	WIP	2	Fieldwork started 06.09.23
IT Infrastructure and network management	To ensure that the (IT) infrastructure is suitable for the organisation and is appropriately monitored and maintained, and that the network is actively monitored to ensure capacity and stability.	Deputy Chief Executive, Executive Director Operations and Finance/ Executive National Director Public Health Knowledge and Data	Planned	2	Audit brief has been agreed. Trust has requested that review be undertaken in Q4.
Returning business to as usual	With specific consideration of microbiology. How are staff resources redeployed as the Trust returns from Covid to a business-as-usual function.	National Director Health Protection and Screening Services and Executive Medical Director	Planning	2	Had initial planning meeting in June. No further progress.
Business continuity	To consider the Trust's approach to business continuity following the internal review of documentation. This review will include consideration of technical resilience,	Executive National Director Public	Planning	3	Developing draft brief.

Planned output	Outline Scope	Executive Lead	Status	Outline Timing by Quarter	Notes
	looking at how the technical potential for delivering resilience has been enacted, fault domains and disaster recovery.	Health Knowledge and Data			
Finance - use of procurement cards, travel and subsistence	To consider monitoring, governance and reporting arrangements.	Deputy Chief Executive, Executive Director Operations and Finance	Planning	3	Arranging meeting with Executive lead.
Personal development process for Medical and public health consultants	To consider the co-ordination, governance and reporting arrangements for the revalidation and appraisals process. Acknowledging that an e-job planning approach is being introduced.	National Director Health Protection and Screening Services and Executive Medical Director	Planning	3	Arranging meeting with Executive lead.
Contract management	To consider the monitoring, reporting and governance arrangements.	Deputy Chief Executive, Executive Director Operations and Finance	Planning	3	Arranging meeting with Executive lead.
Incident reporting	Governance and reporting arrangements. To include the arrangements for closing incidents.	Executive Director Quality, Nursing and Allied Health Professionals	-	4	-

Planned output	Outline Scope	Executive Lead	Status	Outline Timing by Quarter	Notes
Welsh Risk Pool (WRP) claim process	WRP guidance requires Internal Audit to review the process. This review is undertaken each year.	Executive Director Quality, Nursing and Allied Health Professionals	-	4	-
Board Assurance Framework	To consider the approach to board assurance taken by the Trust.	Board Secretary and Head of Board Business Unit /	-	4	-
NHS Wales Executive	Place holder at this stage. There may be a requirement to undertake Internal Audit work at the hosted body.	-	-	TBC	Had initial discussion with Board Secretary.
Population health – follow up	To follow up progress on the implementation of the agreed management actions from the prior year limited assurance report.	-	-		Timing will be based on the agreed implementation dates for actions.