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Iechyd Cyhoeddus
Cymru
Public Health
Wales

Name of Meeting
People and Organisational
Development Committee
Date of Meeting
18 April 2023
Agenda item:
6.1

Audit Recommendations Tracker

Executive lead:	Liz Blayney, Acting Board Secretary and Head of Board Business Unit
Authors:	Liz Blayney, Acting Board Secretary and Head of Board Business Unit
Approval/Scrutiny route:	Liz Blayney, Acting Board Secretary and Head of Board Business Unit

Purpose

The Business Executive Team receives the Audit Action Log to track progress against agreed management actions in response to the recommendations of audit reviews.

The Audit and Corporate Governance Committee oversees the Audit Tracker and takes assurance that the recommendations are being appropriately implemented in a timely and effective manner. This report is was provided to the Audit and Corporate Governance Committee for assurance in March 2023, to highlight and bring to the Committees attention the amendments made to the Audit Action Log, which were approved by the Business Executive Team on 07 March 2023.

As agreed in the Audit Protocol, the Tracker is also shared with the other Committee's for information, to show progress on actions that are within the remit of the Committees.

This report is provided to the People and Organisational Development Committee for information, for context of actions that are within the remit of the Committee.

Recommendation:

APPROVE <input type="checkbox"/>	CONSIDER <input type="checkbox"/>	RECOMMEND <input type="checkbox"/>	ADOPT <input type="checkbox"/>	NOTE <input checked="" type="checkbox"/>
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The Committee is asked to

- Note** the amendments to the Audit Action Log, approved by the Business Executive Team on 07 March 2023. (**Appendix 1a**) (summarised in Section 3.1 of this report)

- **Note** the completion of the actions detailed in Appendix 1b (summarised in Section 3.2), approved by the Business Executive Team on 07 March 2023.

Link to Public Health Wales [Strategic Plan](#)

Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities.

This report contributes to the following:

Strategic Priority	7 - Building and mobilising knowledge and skills to improve health and well-being across Wales
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Summary impact analysis

Equality and Health Impact Assessment	An EHIA is not required for this report. It should be noted that many of the areas of work reported on are likely to have had EHIAs undertaken.
Risk and Assurance	A number of individual audit reviews and actions are referenced in the Board Assurance Framework and Risk Registers.
Health and Care Standards	This report supports and/or takes into account the Health and Care Standards for NHS Wales Quality Themes Governance, Leadership and Accountability
Financial implications	The report has no direct financial implications, although individual updates may include details of impacts.
People implications	The report has no direct people implications, although individual updates may include details of impacts.

1. Purpose / situation

This report is provided to the People and Organisational Development Committee for information, for context of actions on the Audit Action Tracker that are within the remit of the Committee.

2. Background

The Audit Action Log enables the tracking of progress against agreed management actions. The Audit and Corporate Governance Committee has oversight of the log, to receive assurance on progress and timeliness of the implementation of actions identified through audit activity.

The Business Executive Team are responsible for monitoring the Audit Action Log and approve any changes to deadline dates, and the closure of any completed actions. The Audit Action Log is reported to the Business Executive Team a minimum of quarterly for monitoring and to approve any changes to deadline dates, and the closure of any completed actions. The Executive Lead for each report will liaise with their team and update the log quarterly, to in accordance with the timescales set.

The Audit action Log is then to be reported in full to the Audit and Corporate Governance Committee at least twice yearly, along with a covering report highlighting any risks / issues, and a summary of changes since the last review.

As agreed in the Audit Protocol, the Tracker is also shared with the other Committee's for information, to show progress on actions that are within the remit of the Committees.

3. Updates to the Audit Action Log

Arrangements are in place to ensure that the Executive Lead provides progress updates on a quarterly basis. The Executive Lead liaises with their team to ensure updating of their actions in accordance with the timescales set.

The Audit Tracker attached to this report (**Appendix 1**) incorporates all updates provided up to 28 February 2023.

3.1 Revised Implementation Date

At the meeting on 07 March 2023, the Business Executive Team approved the following requests for a revised implementation dates for the actions (**Appendix 1a**):

Audit Review and Ref.	Report Rating	Management Action (abridged)	Original date	Revised implementation date
Concerns and Grievance Final Report	Reasonable	Guidance will be produced and made available to staff via the Intranet page and for managers via training opportunities.	31 May 22	30 June 23
Concerns and Grievance Final Report	Reasonable	Training and guidance information will be cascaded to line managers throughout 2022/23 using a variety of mechanisms, where possible in partnership with People and OD colleagues.	31 May 22	30 June 23
Taking Care of the Carers? How NHS bodies supported staff wellbeing during the COVID-19 pandemic	N/A	We run annual engagement surveys, and work with our staff networks and TU colleagues to plan how these will look. We also participate in the Medical Engagement Scale (MES), which assesses the level of engagement of medical staff with organisational goals. We are continuing to use this data as a broad, initial measure, which we are exploring further, using team wellbeing check ins and focus groups, where further context and detail is gained. We will be considering our approach to engagement at an organisational level, ensuring that partners throughout the organisation are committed to resulting actions.	31 March 23	Spring 23, after the staff survey
Review of Quality Governance Arrangements	N/A	Agree with the recommendation. The importance and value of Equality Impact Assessments in supporting quality services that meet the needs of the Welsh population is understood.	01 Mar 23	June 23
	N/A	Relating to the process for Local Directorate Procedures, and SOPS, guidance on the appropriate governance arrangements within Directorates will be developed to ensure a consistent approach to the	1 Oct 22	31 Dec 22

		development, dissemination, and testing compliance of Local Procedures. This will be developed in conjunction to the current work being undertaken in this area within the Integrated Governance Model.		
		The Trust has successfully implemented the majority of the Once for Wales Concerns Management (Datix Cloud) System but, as with the rest of NHS Wales, is awaiting test release of the Risks Module. This is scheduled for September 2022 with implementation due in January 2023. The roll out of the Risks module will include user training for a system which is expected to be more intuitive and easier to use. In the interim, a training needs analysis to improve the consistency of the use of the current Datix Risks Module will be carried out.	Nov 22	31 Mar 23
		An implementation plan has been developed for several improvement deliverables to the Quality and Clinical Audit programme. Key objectives include: Facilitating the sharing of learning from completed audits across the organisation: • In the interim, the staff intranet (SharePoint) will be used	Aug 22	30 Nov 22
		Review current assurance mechanisms for Service User Experience, to ensure our systems provide for the amplification of citizen voice and capturing learning and improvements in line with the requirements of the Quality & Engagement Act	1 Oct 22	31 Mar 23

3.2 Actions Completed and Approved for Closure

At the meeting on 7 March 2023, the Business Executive Team approved the following actions be closed. Please note that summary details are provided below and for further information reference should be made to the Audit Action Log provided as **Appendix 1b**.

Audit Review	Action(s)
Taking Care of the Carers	444

Review of Quality Governance Arrangements	463
Local Public Health Teams	478, 479, 480
Workforce Sickness Absence Monitoring	490, 491, 492, 493, 494, 495, 496, 497



The action plans put in place to address the various audits recommendations have long-term implications for the organisation, its governance and the provision of its services.



The action plans put in place to address the various audits recommendations strengthen the governance and provision of its services.



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The management responses to audit reviews were developed in collaboration with staff across the organisation.s



Responses have been provided by staff in the relevant areas across the organisation.

4. Recommendation

The Committee is asked to

- **Note** the amendments to the Audit Action Log, approved by the Business Executive Team on 07 March 2023 that are within the remit of the Committee. (**Appendix 1a**) (summarised in Section 3.1 of this report)
- **Note** the completion of the actions detailed in Appendix 1b (summarised in Section 3.2) that are within the remit of the Committee, approved by the Business Executive Team on 07 March 2023.