

PUBLIC HEALTH WALES
Audit Recommendations / Actions Log

Ref	Date added	Report	Committee	Report Assurance Rating	Recommendation	Management Action Agreed	Exec Lead	Original Agreed Implementation Date	Next Steps & Expected Milestones	Column1
433	Mar-22	Concerns and Grievance Final Report	PODC	Reasonable assurance	The Trust should ensure that those responsible for investigating and reporting concerns are provided with supplementary procedure notes to ensure that when a concern is raised that these are consistently and appropriately dealt with in line with the requirements of the policy. The Public Concerns at Work (PCaW) Best Practice guidance recommends: Gauging the seriousness: Provide clear guidelines to managers around how to understand the nature of the concern and when and how to keep a written record of it. Introduce	Guidance will be produced and made available to staff via the Intranet page and for managers via training opportunities.	Board Secretary and Head of Board Business Unit	31-May-22	January 2023 Update: Progress for this action is currently paused, pending the recruitment of the Board Secretary role. Request change of date to 30 June 2023. Previous Updates: September 2022 Update: The guidance is in a draft form and is scheduled for completion by the end of October 2022. Extension to 31/10/22 requested.	Request change of date (BET 7 March 2023)
434	Mar-22	Concerns and Grievance Final Report	PODC	Reasonable assurance	The Trust need to ensure that appropriate training is provided to those staff involved with investigating concerns in line with a clear timescale, so that the procedure is consistently applied and concerns are correctly classified.	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.	Board Secretary and Head of Board Business Unit	31-Mar-23	January 2023 Update: Progress for this action is currently paused, pending the recruitment of the Board Secretary role. Request change of date to 30 June 2023. Previous update: September 2022 Update: Training content has been mapped out and discussions with People and OD directorate in place to determine roll out of training to start in quarter 4 of 2022/23.	Request change of date (BET 7 March 2023)
444	Mar-22	Taking Care of the Carers? How NHS bodies supported staff wellbeing during the COVID-19	PODC		R4 Enhancing collaborative approaches to supporting staff wellbeing NHS bodies should, through the National Health and Wellbeing Network and/or other relevant national groups and fora, continue to collaborate to ensure there is adequate capacity and expertise to support specific staff wellbeing requirements in specialist areas, such as psychotherapy, as well as to maximise opportunities to share learning and resources in respect of more general approaches to staff wellbeing.	Active involvement in the National Health and Wellbeing Network and consideration being to how to launch the All-Wales Workforce Wellbeing guide within the organisation, to ensure that staff and managers are aware of how it can be used with existing resources and how we can gain feedback on its effectiveness.	Director of People & Organisational Development		January 2023 Update: We continue to work closely with the National Health and Wellbeing Network so that we can pilot the All-Wales Workforce Wellbeing Guide. We are in the process of creating an infographic detailing the various sources of support available for staff. This will be made available by the end of January. Previous update: September 2022 Update: Consideration is being given as to how the All-Wales Workforce Wellbeing guide can be piloted within the organisation, as an additional resource, alongside pre-existing support and guidance for staff and line managers. We continue to work closely with the National Health and Wellbeing Network, who are involved in the ongoing national evaluation of the guide.	Request closure (BET 7 March 2023)
446	Mar-22	Taking Care of the Carers? How NHS bodies supported	PODC		R6 Building on local and national staff engagement arrangements NHS bodies should seek to build on existing local and national workforce engagement arrangements to ensure staff have continued opportunities to be heard.	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 to gain further context and detail in joined. We will be considering our	Director of People & Organisational Development		January 2023 Update: we are preparing for the NHS Wales Staff Survey which is expected to take place in Spring 2023, although have not yet had any further details on this. September 2022 Update: In Spring 2023, we'll be participating in the NHS Wales staff survey, which is planned to run on annual basis from this time. The survey last ran in 2020, and had a focus on enabling conversations to happen locally. Next year, there will be a return to a more wide ranging, broader question set, to help us to gain a clearer picture of the experience of working in NHS Wales. Our participation	Request change of date (BET 7 March 2023)
447	Aug-22	Review of Quality Governance Arrangements	PODC		R1 Equality Impact Assessments. Weaknesses in the Trust's approach to conducting, sharing, and responding to equality impact assessments limit its ability to deliver quality services that meet the needs of the population. The Trust should strengthen its approach to equality impact assessments by: a. Ensuring EIAs are completed where necessary b. Agreeing quality standards and a process to assess EIAs, ensuring they are meaningful assessments with appropriate actions to mitigate adverse impacts. c. Developing a central repository to store and share EIAs across the organisation. d. Developing a process to monitor implementation of mitigating actions.	The importance and value of Equality Impact Assessments in supporting quality services that meet the needs of the Welsh population is understood. This is currently a high priority issue as we realise the importance of enhancing the current arrangements to help the organisation meet the needs of the Socio-Economic Duty. There is a cross-organisational working group currently reviewing the tool for completing impact assessments, with the view to integrating various impact assessments and readying the organisation to develop a digital tool. This tool will support staff to engage with and complete the Equality Impact Assessment process. Currently there is limited dedicated resource to support staff in the organisation to complete these. We are scoping improved support for staff to ensure they are completed in a meaningful way and actions are monitored and completed. This will take into consideration the recommendation that a central repository is held to store EIAs, which was already planned as part of the ongoing implementation of the Socio-Economic Duty. In addition, we are launching an Engagement & Experience Network for colleagues across the organisation who have responsibility for designing and delivering our services, programmes and functions. There will be opportunity in the workplan of this network to further develop the capability of staff to complete Equality Impact Assessments to a high standard, including ensuring that the public's voice is at their centre. • Scope and agree the solution • Implement the agreed solution	TBC	01-Mar-23	January 2023 Update: Progress for this action is currently paused, pending the recruitment of the Board Secretary role. Request change of date to June 2023. September 2022 Update: A review of EQHIA process is scheduled.	Request change of date (BET 7 March 2023)
463	Aug-22	Review of Quality Governance Arrangements	PODC		R4 Staff Appraisals and Training. Compliance with staff appraisals has been consistently below the Welsh Government and Trust's internal target and has recently deteriorated further. Similarly, training compliance falls below the Trust's target, largely because of difficulties providing face to face training in safe environments. The Trust should ensure compliance with staff appraisals and statutory and mandatory training meets the national target within the next 12 months.	Agree with the recommendation. People and Organisational Development will: • Continue to report on compliance monthly • Provide detailed individual appraisal data quarterly to the Executive Team and People Business Partners, extending this receiving group to include Business Leads and Leadership Teams, to drive compliance rates up • Communicate about the current My Contribution Process and My Contribution e-learning at key stages in the year • The inclusion of Appraisal Dashboards in the Directorate and Divisional Dashboards will give local management and leadership teams alternative and more intuitive data. It is anticipated the implementation of the latest all-Wales Pay Progression Policy will positively impact compliance rates and there will be quality assurance to ensure conversations and appraisals remain meaningful. The development of a revised Behavioural Framework and updated Management and Leadership Framework will support the emphasis on both transactional and transformational management responsibilities regarding appraisals. We are planning engagement activity to ensure this year's review and redesign of the My Contribution process achieves clarity of purpose and drive meaningful discussion and positive behaviour and align with	Director of People & Organisational Development		January 2023 Update: Statutory and Mandatory training still remains slightly above the Welsh Government target of 85% (end of Q3 86.46%). People and OD are continuing to carry out two ESR drop in sessions per month for anyone experiencing issues accessing e-learning. The 12 month rolling period for My Contribution appraisals as at Q3 is 69.07% against the government target of 85%. Entering pay progression and appraisal dates is covered in the ESR drop in sessions and People and OD are also running monthly pay progression drop in sessions, both ESR drop in sessions and pay progression drop in sessions continue to be well attended. Request this action is now closed. September 2022 Update: Compliance with the core suite of statutory and mandatory training remains just above the Welsh Government target of 85% and continues to be at risk of falling below, as well as not showing any significant improvement. People and OD are carrying out two ESR drop in sessions per month, for anyone experiencing issues accessing e-learning and these have been well received by those attending. The 12-month rolling compliance for My Contribution appraisals is currently at 65.03% against the Welsh Government target of 85%. To date, only 66 staff members have completed My Contribution e-learning. With pay progression coming into force in October 2022, part of the criteria to be put forward for an increment is staff needing to have an appraisal date entered into ESR within the last 12 months, this should therefore have a positive impact on appraisal compliance figures. Entering pay progression and appraisal dates into ESR will also be covered in the twice monthly ESR drop in sessions. Pay progression sessions have also been arranged by People and OD to take place	Request closure (BET 7 March 2023)
478	Sep-22	Local Public Health Teams	PODC	Substantial assurance	Administration of the Risk Register: 1.1 Management should ensure the project risk register is adequately completed and updated to reflect the date of last review and action undertaken.	1.1 The Programme Manager and Project Support Coordinator have already taken steps to review and further amend the risk register to provide additional information including: ensuring risk owners are noted for each risk, completing the escalation field, closure dates entered where known, creating and completing a reason for closure field. In going forward, the Programme Manager will ensure that at each fortnightly risk review meeting, the project team will provide dated updates on the progress of risks. The Programme Manager has also shared this learning with colleagues in the central PMO team.	TBC	26-Sep-22	January 2023 Update: Risk register updated as required. Project closure report to be completed and to contain final version. Action to be closed.	Request closure (BET 07 March 2023)

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479	Sep-22	Local Public Health Teams	PODC	Substantial assurance	Administration of the Risk Register: 1.2 High level risks should be reviewed periodically by the project Board.	1.2 The SRO will ensure that risks to the project are raised at the remaining Project Board meetings within a specific section of the agenda, to be reviewed and confirmed by the Project Board members. The Programme Manager has also shared this learning with colleagues in the central PMO team.	TBC	13 September 2022	January 2023 Update: Risk register was included as standing agenda item for project Board and reviewed from 13th September 2022. Action to be closed.	Request closure (BET 07 March 2023)
480	Sep-22	Local Public Health Teams	PODC	Substantial assurance	For current and future projects where approval of a process or document is required, there should be available documentation to evidence the approval process.	Within this project and future project, the Programme Manager will ensure to receive written confirmation of all decisions made in relation to the milestone of the project. The Programme Manager has also shared this learning with colleagues in the central PMO team.	TBC	N/A	January 2023 Update: Action complete and learning shared. Learning to be summarised in closure report. Action to be closed.	Request closure (BET 7 March 2023)
490	Sep-22	Workforce - Sickness Absence Monitoring	PODC	Reasonable assurance	Management should ensure that the Managing Attendance at Work Policy training should be attended by all managers who have not attended it previously.	An action plan has been developed to address the recommendations of this report as detailed here. This will be overseen by the Head of People and ODOperations, with regular updates provided to the Assistant Director of People, Strategy, Insights and Service. We will identify all managers requiring initial and repeat training (242+) and arrange a schedule of training to address this immediate requirement, as well as planning for repeat training in the longer term.	Director of People & Organisational Development	30-Nov-22	January 2023 Update: An E-Learning module has been in the process of development and is now expected to be signed off in January. Work will need to be undertaken to assign this module to all staff with Line Management responsibilities. In the interim period we have identified all those Line Managers requiring initial training. The POD Advisory team will schedule regular delivery of training sessions and the identified group will be directly emailed to encourage their participation in the training. Request this action is now closed.	Request closure (BET 7 March 2023)
491	Sep-22	Workforce - Sickness Absence Monitoring	PODC	Reasonable assurance	Management should consider adding wording to the MAAW policy that explicitly clarifies the Trust's position with regards to refresher training.	The Managing Attendance at Work Policy is an all-Wales Policy. We will update supporting information on our intranet to confirm our organisational position that managers should repeat this training every three years, and plan and schedule training to meet demand.	Director of People & Organisational Development	31-Oct-22	January 2023 Update: Once the e-module is in place this training will be assigned to all those with Line Management responsibilities. There will be a 3 year expiration date on the training and this will show as a non-compliance in the individual's ESR record until completed. Request this action is now closed.	Request closure (BET 7 March 2023)
492	Sep-22	Workforce - Sickness Absence Monitoring	PODC	Reasonable assurance	Supporting documentation for all sickness absences should be available, completed and maintained so that it is readily available for scrutiny and to ensure that staff are treated consistently across the Trust.	We will remind all managers of the requirements for sickness documentation to be completed and stored such that it is readily available for scrutiny and to ensure staff are treated consistently and in line with the Managing Attendance at Work Policy.	Director of People & Organisational Development	31-Oct-22	January 2023 Update: Additional resources have been developed to strengthen the messaging around the need for robust paperwork. The MAAW training that is currently delivered in-house is also being revised to include this. Request this action is now closed.	Request closure (BET 7 March 2023)
493	Sep-22	Workforce - Sickness Absence Monitoring	PODC	Reasonable assurance	Sickness absence information should be promptly entered onto ESR and Return to Work forms should be completed when the employee returns to work and the date entered onto ESR.	We will remind all managers of the requirements for sickness absence information to be promptly entered onto ESR; Return to Work forms should be completed when the employee returns to work and the date entered onto ESR in line with existing ESR guidance.	Director of People & Organisational Development	31-Oct-22	January 2023 Update: The POD Advisory team are routinely running reports to highlight any entries for sickness absence or return to works that are outside of the timelines suggested in the guidance. Emails are then sent to the respective managers reminding them of the requirement to enter information promptly. Request this action is now closed.	Request closure (BET 7 March 2023)

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494	Sep-22	Workforce - Sickness Absence Monitoring	PODC	Reasonable assurance	Management should update the policy to clearly state the Trust's expectations with regards to the timely recording of sickness information on ESR, and associated documentation.	The Managing Attendance at Work Policy is an all-Wales Policy. We will update supporting information on our intranet to confirm our expectations with regards to the timely recording of sickness information on ESR and completion of associated documentation.	Director of People & Organisational Development	31-Oct-22	January 2023 Update: Additional resources are being developed to strengthen this messaging. They will be added to the Intranet pages and signposted during training. Request this action is now closed.	Request closure (BET 7 March 2023)
495	Sep-22	Workforce - Sickness Absence Monitoring	PODC	Reasonable assurance	Consideration should be given to the most appropriate method to disseminate implementation issues identified from the audit to all employees who have responsibility for managing and monitoring sickness absence so that the issues are resolved and do not re-occur in the future.	We will determine an appropriate method to disseminate learning from the implementation issues identified to all employees with responsibility for managing and monitoring sickness absence so that the issues are resolved and do not re-occur in the future. Key learning from the implementation issues identified will be shared with members of the People and Organisational Development Directorate and all managers by 31/10/2022.	Director of People & Organisational Development	31-Oct-22	January 2023 Update: Audit findings shared with POD team to inform case management and advice, and POD team members have been instrumental in taking forward action to update the intranet and produce communication to managers. Request this action is now closed.	Request closure (BET 7 March 2023)
496	Sep-22	Workforce - Sickness Absence Monitoring	PODC	Reasonable assurance	Management should meet with all employees on long term sick as per the Management Attendance at Work Policy. However, if they are unable to, they should record in file notes that they have attempted to meet the employees or it was felt inappropriate to. In addition, long term sickness absence meeting notes should be signed and dated by both parties at the time of the meeting or the date of the meeting recorded where it cannot be signed.	We will update supporting information on our intranet to further advise managers to record any occasions when they have attempted to meet an employee but this has not been possible. We will work with managers to ensure that long term sickness absence meeting notes are signed and dated by both parties at the time of the meeting or the date of the meeting recorded where it cannot be signed. This will be subject to quarterly reviews of a sample of absences.	Director of People & Organisational Development	31-Oct-22	January 2023 Update: Additional resources are being developed to strengthen this messaging. They will be added to the Intranet pages and signposted during training. Managers will also be reminded of this by their POD Advisor when supporting the management of Long Term Sickness cases. Request this action is now closed.	Request closure (BET 7 March 2023)
497	Sep-22	Workforce - Sickness Absence Monitoring	PODC	Reasonable assurance	Doctors Fit Note certificates should be obtained for all sickness absences from the 8th calendar day of sickness absence onwards as required by the Managing Attendance at Work Policy.	We will update supporting information on our intranet to reinforce the requirements around self-certification and GP Fit Notes. This will be subject to quarterly reviews of a sample of absences.	Director of People & Organisational Development	30-Nov-22	January 2023 Update: Additional resources are being developed to strengthen this messaging. They will be added to the Intranet pages and signposted during training. Request this action is now closed.	Request closure (BET 7 March 2023)