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WALES

Iechyd Cyhoeddus
Cymru
Public Health
Wales

Name of Meeting
Quality, Safety and
Improvement Committee
Date of Meeting
15 February 2022
Agenda item:
3.2.2

Internal Audit Reports

Executive lead:	Helen Bushell, Board Secretary and Head of Board Business Unit
Author:	Liz Blayney, Deputy Board Secretary and Board Governance Manager

Approval/Scrutiny route:	Audit and Corporate Governance Committee (circulated outside of Committee on 9 February 2022) Business Executive Team (received for information)
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Purpose

The purpose of this report is to present to the Quality, Safety and Improvement Committee with the Internal Audit Final Reports issued, 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"/>	ASSURANCE <input checked="" type="checkbox"/>
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The Quality, Safety and Improvement Committee is asked to:

- To **consider** the Internal Audit Final Reports and **note** the assurance rating:
 - Reactivation of Screening Services (Substantial);
 - IP5 Lab (Reasonable);
- To **consider** the recommendations made within the reports within the context of the Committees work plan;
- To **Take assurance** that the monitoring of the any actions from these reports will be undertaken through the Audit and Corporate Governance Committee.

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
Strategic Priority	Choose an item.
Strategic Priority	Choose an item.

Summary impact analysis	
Equality and Health Impact Assessment	An EHIA is not required as this is an update paper and no decisions are required.
Risk and Assurance	
Health and Care Standards	This report supports and/or takes into account the Health and Care Standards for NHS Wales Quality Themes Theme 7 - Staff and Resources Choose an item. Choose an item.
Financial implications	
People implications	

1. Purpose / situation

The purpose of this report is to present to the Quality, Safety and Improvement Committee with the Internal Audit Final Reports issued, that are within the remit of the Committee.

2. Background

The Audit and Corporate Governance Committee (ACGC) receives all final reports following internal audit reviews, and has overall oversight of the Internal Audit programme of work on behalf of the Board.

ACGC is responsible for:

- ensuring that there is an effective internal audit function that meets the standards set for the provision of internal audit
- Oversight of the results of audit and assurance work and the implications of the findings of wider audit and assurance activity relevant to the Trust's operations are
- Assurance that any actions following reviews are appropriately considered and acted upon to secure the ongoing development and improvement of the organisations governance arrangements.

ACGC receives regular updates via the Audit Action Log on the progress with implementation of the recommendations within the internal audit final reports.

Where the subject matter of a report falls within the remit of one of the Board Committees, the report is also submitted to that Committee. The role of the Quality, Safety and Improvement Committee is to receive the report and to consider the recommendations made in the context of its work plan and the areas of focus within its remit.

3. Description/Assessment

The following Internal Audit Reports have been considered by the Audit and Corporate Governance Committee, relevant to the Quality, Safety and Improvement Committees remit:

- Reactivation of Screening Services (ACGC 20 January 2022)
- IP5 Lab (Circulated to ACGC on 9 February 2022)

The actions for these reports will be added to the Audit Action Log and the implementation monitored by ACGC.

3.1 Well-being of Future Generations (Wales) Act 2015

This report contributes to the following Well Being Goals:

The report contributes to Goal 1: Build capacity and support system change, by reviewing current practices and ensuring that the way we work is inclusive and supports a diverse range of staff and service users.

In turn, this enables us to support Goal 3: Support the NHS to deliver high quality, equitable and sustainable services, by looking at the information and services we provide and ensuring that they can be accessed by all.

This work has been put together following the five ways of working, as defined within the sustainable development principle in the Act, in the following ways:



The actions that have been undertaken so far, together with those planned enable us to strive towards a long term aim of a fully inclusive and supportive culture where everyone can give of their best



The actions help to create an environment free of discrimination, thus preventing problems in the future



The work aligns with being a more equal Wales, and with the organisation's values of "Working together, with trust and respect, to make a difference".



Collaborating with staff across the organisation to deliver the actions, for example People and Organisational Development, Procurement, Service Delivery and Communications will enable us to achieve the aims set out in our Strategic Equality Plan and IMTP.



Setting up staff networks allows us to work in a collaborative way to build the inclusive culture and progress the Equality agenda.

4. Recommendation

The Quality, Safety and Improvement Committee is asked to:

- To **consider** the Internal Audit Final Reports and **note** the assurance rating:
 - Reactivation of Screening Services (Substantial);
 - IP5 Lab (Reasonable);
- To **consider** the recommendations made within the reports within the context of the Committees work plan;
- **Take assurance** that the monitoring of the any actions from these reports will be undertaken through the Audit and Corporate Governance Committee.