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Shared Services  
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Audit and Assurance Services

# **Governance Arrangements during Covid-19 Pandemic Follow Up**

## **Advisory Review Report**

**2020/21**

**April 2021**

**Public Health Wales NHS Trust**

**Audit and Assurance Services**

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<b>Review reference:</b>	PHW2021.21
<b>Report status:</b>	FINAL
<b>Fieldwork commencement:</b>	11 February 2021
<b>Fieldwork completion:</b>	26 April 2021
<b>Final report issued:</b>	29 April 2021
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<b>Committee:</b>	Audit and Corporate Governance Committee



Audit and Assurance Services conform with all Public Sector Internal Audit Standards as validated through the external quality assessment undertaken by the Institute of Internal Auditors.

#### **ACKNOWLEDGEMENT**

NHS Wales Audit and 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:**

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## **1. INTRODUCTION**

The NHS in Wales continues to face unprecedented pressures in planning and providing services following another wave of the Coronavirus pandemic, the most severe to date, which peaked at the beginning of 2021.

At the time of this follow-up report nearly 2 million of people in Wales have received the first dose of an approved coronavirus vaccine, with 687k (21.8% of the Welsh population) receiving their second jab. Covid cases are reducing within Wales and lockdown restrictions are being eased.

Our rapid advisory review was undertaken during the summer of 2020, following the first peak of the pandemic. The work was carried out at the request of the All Wales Finance Directors' group and we assessed the adjusted financial and overall governance arrangements that were put in place to enable health organisations to maintain appropriate governance whilst enabling senior leadership teams to respond to the rapidly developing emergency.

We issued our original report to the Trust in August 2020. Our report suggested a number of priorities for the organisation to consider going forward. The Trust reviewed these suggestions and produced an action plan.

This follow-up review has sought to verify the actions taken by the Trust in response to our original review, and where appropriate documentary evidence has been obtained.

## **2. EXECUTIVE SUMMARY**

Our follow-up work has confirmed that the Trust has implemented or taken forward almost all the priorities suggested in our original review.

An Emergency Response Handbook has been established and business continuity templates have been revised and considered. In addition, a revised Business Continuity strategy has been produced and at the time of this report, stakeholder feedback is being sought.

In addition, the Trust's internet page has been updated to confirm that the People & Organisational Development committee and the Knowledge, Research & Information Committee were stood down. There has been timely release of papers and minutes relating to the committees. Non-Covid-19 risks continue to be reported to respective committees as set out in their forward work plans.

We note that similar to last year, the preparation and review of the final accounts will be undertaken remotely, with Microsoft Teams used as the main tool for the exchange of information.

Stock is stored within access-controlled areas and local security arrangements are in place where stock is stored.

The Trust are in the process of developing a decision-making log.

The table in Appendix 1 sets out our original suggestions, the Trust's response to them, and the current position.

## **Appendix 1: Detailed Findings and Evidence**

<b>IA suggested considerations</b>	<b>Update position</b>	<b>Follow up Action</b>
<b>Board and Committee Meetings</b>		
Standing down committees should be reported on the Trust's internet.	The Trust's internet has been updated confirming that the People & Organisational Development Committee and the Knowledge, Research & Information Committee were stood down.	N/A
Releasing papers and minutes as soon as possible before and after a committee.	Additional capacity for minute taking has been put in place. Papers and minutes have been issued within the 7 days before and after a committee.	N/A
<b>SORD and Decision-Making Arrangements</b>		
Developing a decision-making log should future spikes occur.	Action accepted and decision logs will be established for Board, Board Committees and Executive Level in the first instance.	<ol style="list-style-type: none"> <li>1. Design the remit of the log – May 2021.</li> <li>2. Design the supporting processes – June 2021.</li> <li>3. Determine implementation date – June 2021.</li> </ol>
Developing a 'protocol pack', for future events that require similar arrangements setting out steps to take immediately, through to ongoing requirements should be established in preparation for future events.	<ol style="list-style-type: none"> <li>1. Consideration has been given to this action. To date an Emergency Response Handbook and SharePoint established from previous learning to create a stronger source of information.</li> <li>2. Number of additional sources of support in place, for example the Gold and Silver group terms of reference.</li> </ol>	<ol style="list-style-type: none"> <li>1. It has been agreed to develop a series of prompt cards to identify initial actions upon declaring an incident and these will form part of the Emergency Response Plan review.</li> <li>2. SharePoint site is to be upgraded to the 2017 version so information available to</li> </ol>

IA suggested considerations	Update position	Follow up Action
		<p>O365 users and therefore more remotely accessible.</p> <p>Work will progress during 2021/22</p>
<p>Developing a comprehensive, centrally held, learning log to help capture matters to help in the event of future spikes.</p>	<p>A workstream within the operational plan has been created to progress this work.</p>	<p>Action to progress in line with the operational plan timelines.</p>
<b>Risk Management</b>		
<p>Refreshing continuity plans throughout the Trust to ensure lessons and experiences from the current pandemic are incorporated.</p>	<ol style="list-style-type: none"> <li>1. Business Continuity templates have been revised and these were considered by the Emergency Planning and Business Continuity Group during their February 2021 meeting.</li> <li>2. A revised Business Continuity Strategy has been produced with the Emergency Planning and Business Continuity Group for review.</li> <li>3. The quarter 2 work programme includes a review of Business Continuity incident management arrangements.</li> </ol>	<ol style="list-style-type: none"> <li>1. Further learning is to be incorporated into Business Continuity plans for each service. Future plans will be more risk informed – May 2021.</li> <li>2. Service areas are to complete refreshed templates and therefore have revised business continuity plans – September 2021.</li> </ol>
<p>Updating the response plan for any changes arising from this review and any other retrospective review being completed.</p>	<p>An ongoing cycle of review and learning is in place. The quarter 2 work programme includes reviewing the Business Continuity incident management arrangements.</p>	<p>The Trust's Emergency Response Plan is to be reviewed by end of the 2021/22 – the proposal on how this is to be undertaken is to be considered by the internal group in quarter 2.</p>
<p>Continuing to manage non-Covid-19 risks and reporting these to respective committees, to ensure that emerging risks are adequately managed.</p>	<p>Risks to be reported to the relevant governing forum and the Board as per the forward work programme and this will continue to be the case.</p>	<p>N/A</p>

IA suggested considerations	Update position	Follow up Action
<b>Annual Accounts and Reporting</b>		
The benefits of preparing the final accounts and completing the accompanying statutory audit remotely should be reviewed and any efficiencies implemented to assist in the delivery should be retained / expanded upon.	Year-end planning for the second year of remote working is underway. An agreement has been made with Audit Wales to work flexibly in respect of the audit plan, using Microsoft Teams as the main tool for exchanging information.	Continue to monitor the process and adapt to meet future requirements – 30 June 2021.
<b>Financial Systems and Processes</b>		
The security of stock should be reviewed to ensure that high value items are stored securely.	<p>Stock levels were increased for non-pay consumables in Microbiology as a result of Covid-19 response and implementation of the testing strategy. Due to the hot labs and IP5 now running, stock levels are reducing, and the Trust will adjust stock holding accordingly.</p> <p>All stock is stored within access-controlled areas and specific local security arrangements are in place for all areas where stock is stored.</p>	The Trust will assess future requirements for implementing a stock management system. However, it might not be required if they return to normal stock levels post Covid-19 – 30 June 2021.
<b>Covid-19 Expenditure (Revenue and Capital)</b>		
Ensuring that a clear evidence trail of decisions made is retained.	A register of all decisions relating to non-pay consumable contracts is retained and taken to the Board. Capital approval letters are produced prior to committing any expenditure.	The decision-making process is included within the Enabler Priority of the Annual Plan.
The delegated limits in respect of Single Tender waivers should be reviewed.	Scheme of delegation has been reviewed and updated. The Trust has now reverted back to limits pre-Covid-19.	The Trust will continue to monitor requirements and amend if required.

<b>IA suggested considerations</b>	<b>Update position</b>	<b>Follow up Action</b>
Arrangements should be made to identify suppliers for key products for any future wave, reducing the need for single tenders.	The numbers of single tenders are monitored routinely. The number of single tenders has reduced throughout the financial year and as the response has progressed.	The Trust will work with Procurement and service colleagues to review ongoing requirements.



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