

**PUBLIC HEALTH WALES**  
Internal Audit Recommendations / Actions Log  
April 2021

Red - Implementation date passed management action not complete  
Orange - Action not on target for completion by agreed/revised date  
Yellow - Action on target to be completed by agreed/revised date  
Green - Action complete  
Blue - Action to be removed and replaced by subsequent action

Ref	Date added	Report	Report Assurance Rating	Recommendation	Action Priority	Management Action Agreed	Exec Lead	Original Agreed Implementation Date	Revised Implementation Date	Status	Actions completed	Issues Arising This Period	Next Steps & Expected Milestones	STATUS
388	Jun-20	IT Systems	Reasonable assurance	The Disaster Recovery Plan should be updated with the correct schedule for the DataStore system.	LOW	Accepted. Public Health Wales backups are being completely overhauled but this work has been hampered by Covid-19 work. As soon as the new backup regime is in place, we plan to upgrade DR processes for all systems in a priority manner.	Deputy Chief Executive and Executive Director of Finance	31-May-21			September 2020 Update: A new backup system is being rolled out and does now include Datastore.	September 2020 Update: No issues reported during this period	December/January update- No further update provided.  September 2020 update: On track. When the rollout of the new backup system is completed, the disaster recovery process will be updated	In date
391	Jun-20	Long-Term Strategy -	Reasonable assurance	The Trust should ensure that the measures identified in the Outcomes framework are mapped to the strategic priorities. Performance indicators / measures should be identified for all strategic priorities with baselines and targets identified for each performance indicator / measure in order to assess whether the actions result in the necessary improvements.	MEDIUM	Public Health Wales developed a draft Outcomes Framework in quarter 3 of 2019/20, which was developed collaboratively with the Board, Executive Team, the leads for strategic priorities and the Senior Leadership Team. While the draft Outcomes Framework is presented through a life course approach, it can also be mapped to the strategic priorities. Key outcomes for each priority were included within our Integrated Medium Term Plan for 2020/21. As part of this work, we also started to develop a small number of key performance indicators for each of our priorities, which will be underpinned by more detailed service focused performance indicators. This work was well advanced by the time that Public Health Wales initiated its emergency planning procedures to address the Covid-19 pandemic. Ensuring that the Trust has an outcome-driven approach to implementing its strategies is a key principle and work will be rescheduled as part of the organisation's recovery programme which was agreed on 28 May 2020.	Deputy Chief Executive and Executive Director of Finance	Timescale 2021			September 2020 Update: Draft Outcomes framework developed with strategic priority groups and shared and discussed with Executive Team and Board in early 2021.	September 2020 Update: No issues reported during this period	December/January update To ensure that we are delivering against agreed public health outcomes, we started work in late 2019 on developing a proposed set of outcome measures for Public Health Wales. This work was put on hold due to our response to COVID-19. However, our Operational Plan sets out the intention to resume this work as part of our organisational recovery priority area. It includes key milestones over the development of a revised draft (March 21) and approval of the final Outcomes Framework (June 21). This work will align with the review of our long-term strategy that we will undertake in the first part of 2021. September 2020 update: The Operating Plan currently under development has a 'recovery' component. This includes the need to reconnect with the outcomes framework from 2019 and completed it within 2020-21.	In date
405	Oct-20	Management of Alerts Follow up Audit	Reasonable assurance	Refer to recommendation 361 on closed actions. Updated recommendation. The Policy and Procedure should be updated to reflect the changes that have been made to the process. The revised policy and procedure should be combined to include all other types of alerts and Welsh Health Circulars.	MEDIUM	The Alerts and WHCs will be combined into a single policy and procedure. This has been delayed due to the current Covid-19 response. The action will be addressed when practically possible.	Executive Director of Quality, Nursing and Allied Health Professionals	01-Apr-20	Aug-21				December/January update: This action is currently on hold and will be progressed for completion by deadline Aug 21.	In date
412	Mar-21	Data quality and integrity within performance reports	Substantial assurance	The risk ratings on the risk assessment documents should accurately reflect the up to date risk ratings on the Performance and Assurance Dashboard.	LOW	As part of the audit, discussions were held over the reason for this issue, which are reflected within this report. However, it is proposed that a twice yearly review of risk ratings is undertaken to ensure there are no changes etc. It is proposed the first of these is completed by end September 2021 and then six month thereafter.	Deputy Chief Executive and Executive Director of Finance	30-Sep-21					April 2021 update - first six monthly review to be held during August 2021.	In date
395	Jun-20	Risk Management	Reasonable assurance	There should be an appropriate reporting structure put in place within the Health and Wellbeing Directorate in order to have a standardised approach to managing risks throughout the Divisions through to the Directorate level which would enable staff to discuss relevant risks across the Directorate, increase their risk appetite and escalate and cascade risk management information to various staff levels across the organisation. Management need to ensure that risk registers are being developed at a divisional level. Management need to ensure that within the Health and Wellbeing Divisions that risk owners / handlers are identified to manage the identified risks Following the initial meeting with the Chief Risk Officer, the Health and Wellbeing Directorate need to work together to produce risk registers at a Directorate, Divisional and Programme level. The risk registers need to be monitored on a regular basis to ensure all risks have been identified and the risks are being managed.	HIGH	All members of the SMT recognise the requirement for consistency and so as part of the review of the Directorate risks the need for clear reporting structures was addressed. At present, due to the current emergency, whilst risks are not always documented as they should be through the use of Datix, risks are escalated through management lines and are discussed at management meetings. As an inevitable consequence of the organisations role in the Covid19 emergency the majority of the staff and management from the Health and Wellbeing Directorate have been mobilised to support the response. This means that the development work that was ongoing to improve the identification and management of risk across the Directorate has been temporarily halted. Management are firmly committed to resuming these activities when time and resource permit and the intention is to complete the root and branch review that was started late in 2019. Realistically the intention is that this will be completed by the end of March 2021.	Interim Executive Director of Health and Well Being / Executive Director of Quality, Nursing and Allied Health Professionals	March 2021 (on hold)					This work has not been started as there is currently no capacity to progress this work. Within the Health and Wellbeing Directorate the majority of staff have been mobilised onto the COVID 19 response, they will therefore need to identify at which point this work can progressed.	On hold