

Public Health Wales NHS Trust

Audit & Corporate Governance
Committee
Internal Audit Progress Report

March 2024

NWSSP Audit and Assurance Services

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Audit and Assurance Services conform with all Public Sector Internal Audit Standards as validated through the external quality assessment undertaken by the Chartered Institute of Public Finance & Accountancy in April 2023.

Acknowledgement

NHS Wales Audit & 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

This report has been prepared for internal use only. Audit & Assurance Services reports are prepared, in accordance with the Service Strategy and Terms of Reference, approved by the Audit & Corporate Governance Committee.

Audit reports are prepared by the staff of the NHS Wales Shared Services Partnership – Audit and Assurance Services, and addressed to Independent Members or officers including those designated as Accountable Officer. They are prepared for the sole use of Public Health Wales NHS Trust and no responsibility is taken by the Audit and Assurance Services Internal Auditors to any director or officer in their individual capacity, or to any third party.

Our work does not provide absolute assurance that material errors, loss or fraud do not exist. Responsibility for a sound system of internal controls and the prevention and detection of fraud and other irregularities rests with Public Health Wales NHS Trust. Work performed by internal audit should not be relied upon to identify all strengths and weaknesses in internal controls, or all circumstances of fraud or irregularity. Effective and timely implementation of recommendations is important for the development and maintenance of a reliable internal control system.

1 Introduction

1.1 This progress report provides the Audit & Corporate Governance Committee (the 'Committee') with the current position regarding the work undertaken by Internal Audit as at 6 March 2024. This report provides information on the status of progress of our reviews.

1.2 We report the progress made to date against individual assignments along with details regarding the delivery of the plans and any required updates.

2 Delivering the Plan

2.1 Since the January meeting of the Committee we have finalised two reports, have issued one draft report, and have ongoing fieldwork for five further reviews. A summary of the position of the finalised reports, including a summary of number of recommendations, is provided below in Table 1.

Table 1 – Summary of finalised reports

Assignments	High	Medium	Low	Total	Assurance rating
Work programmes	-	4	-	4	Reasonable
Welsh Risk Pool (WRP) claim process	-	1	-	1	Substantial

2.2 Our agreed performance indicators are set out in table 2 below:

Table 2 – Performance Indicators 2023/24

Indicator	Status	Actual	Target	Red	Amber	Green
Report turnaround: time from fieldwork completion to draft reporting [10 working days]	Green	80% (4/5)	80%	v>20%	10%<v<20%	v<10%
Report turnaround: time taken for management response to draft report [15 working days per Internal Audit Charter]	Green	75% (3/4)	80%	v>20%	10%<v<20%	v<10%
Report turnaround: time from management response to issue of final report [10 working days]	Green	100% (4/4)	80%	v>20%	10%<v<20%	v<10%

Feedback

2.3 Our final reports are issued with a post audit questionnaire, which is our way of getting feedback on the audit process so that we can look to make improvements. This year, we are using Microsoft 'forms' to request feedback. This should be an easier way for the Trust to provide us with valuable feedback.

3 Other activity

Meetings

- 3.1 We regularly observe Board and committee meetings, meet regularly with the Board Secretary and continue to meet with Audit Wales colleagues.
- 3.2 We have completed our planning discussions for the 2024/25 programme of work.

Appendix A: Internal Audit Plan 2023/2024

Planned output	Outline Scope	Executive Lead	Status	Outline Timing by Quarter	Planned Audit Committee	Notes
Business continuity	To consider the Trust's approach to business continuity following the internal review of documentation.	Executive National Director Public Health Knowledge and Data	Final	3	January	Reported in January 2024.
Finance - use of procurement cards, travel and subsistence	To consider monitoring, governance and reporting arrangements.	Deputy Chief Executive, Executive Director Operations and Finance	Final	3	January	Reported in January 2024.
Work programmes	To consider management and approach of programmes that are funded by grants.	Director of Health & Wellbeing	Final	2	January	Reported March 2024.
Welsh Risk Pool (WRP) claim process	WRP guidance requires Internal Audit to review the process. This review is undertaken each year.	Executive Director Quality, Nursing and Allied Health Professionals	Final	4	March	Reported March 2024.

Planned output	Outline Scope	Executive Lead	Status	Outline Timing by Quarter	Planned Audit Committee	Notes
NHS Wales Executive	Internal Audit have been asked by NHS Wales Executive to undertake an advisory review.	Deputy Executive Wales Chief NHS	Draft	-	-	Advisory review. Draft report issued 04.03.24. Information came through slowly.
Personal development process for Medical and public health consultants	To consider the co-ordination, governance and reporting arrangements for the revalidation and appraisals process.	National Director Health Protection and Screening Services and Executive Medical Director	WIP	3	March	Fieldwork started 08.01.24.
Contract management	To consider the monitoring, reporting and governance arrangements.	Deputy Executive, Executive Director Operations and Finance Chief	WIP	3	March	Fieldwork started 31.01.24. Fieldwork started later due to Auditor sickness/capacity.
IT Infrastructure and network management	To ensure that the (IT) infrastructure is suitable for the organisation.	Deputy Executive, Executive Director Operations and Finance/ Executive National Director Public Health Knowledge and Data Chief	WIP	2 4	May	Audit brief has been agreed. Trust has requested that review be undertaken in Q4.

Planned output	Outline Scope	Executive Lead	Status	Outline Timing by Quarter	Planned Audit Committee	Notes
Incident reporting	Governance and reporting arrangements.	Executive Director Quality, Nursing and Allied Health Professionals	WIP	4	May	Fieldwork started 04.03.24.
Population health – follow up	To follow up progress on the implementation of the agreed management actions from the prior year limited assurance report.	Director of Health & Wellbeing	WIP	4	May	Fieldwork started 04.03.24.
Board Assurance Framework	To consider the approach to board assurance taken by the Trust.	Board Secretary and Head of Board Business Unit /	Planned	4	-	Management request to undertake work in Q1 of 2024/25 to allow new process to bed in. So focus in 2023/24 will risk embedding into committee work plans.
Returning business to usual	With specific consideration of microbiology. How are staff resources redeployed as the Trust returns from Covid to a business-as-usual function.	National Director Health Protection and Screening Services and Executive Medical Director	Defer	2	-	Management request to defer to 2024/25. Division is going through UKAS accreditation and winter pressure.