

# **Audit Tracker – Leadership Team Deep Dive**

Workshop held 7 December 2023.

Decisions ratified at Leadership Team on 11 December.

**Section 1 Directorate Deep Dive - Board Business Unit**

**1**

**Board Business Unit :**

**1 Action to review : 434**

## Section 1 Directorate Deep Dive - Board Business Unit

<b>Action 434:</b>	<i>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. (Relating to Raising Concerns)</i>
<b>Report</b>	Concerns and Grievance (Internal Audit - Reasonable)
<b>Date of report:</b>	1 March 2022
<b>Original date:</b>	31 March 2023
<b>Summary of changes:</b>	September 2022, training roll out was due to progress by March 2023. In January 2023, this was paused pending the recruitment of the Board Secretary. Two changes of date have been requested for this recommendation – 30 June (recruitment of Board Sec), and then 30 October (whilst work on this progressed with POD colleagues).
<b>Deep Dive Comments</b>	This recommendation has since been superseded by the publication of the speaking up safely framework by Welsh Government, which requires us to review all our material and processes for Raising concerns as part of this overarching framework. We are required to produce an action plan for the implementation of the Speaking Up safely framework which was submitted to Welsh government following approval by BET and Board. As such this action is no longer required as stated in the recommendation. We are doing a larger piece of work to review all of the training and supporting material including updating the intranet. This implementation is being monitored by the Leadership Team and the People and OD Committee, this element will be completed by January Board meeting. Propose this action be closed, and taken forward through the other workstream, noting the reporting arrangements to ensure this is monitored separately.
<b>Summary of LT review</b>	LT reviewed the action, and agreed with the assessment that that matter had been superseded by the Speaking Up Safely Framework which is broader than the requirement within this recommendation and will encompass not only training for managers, but engagement with stakeholders, comms plan for promotion and a supporting protocol to provide a clear path and flow for all instances where staff are speaking up, including through the raising concerns process. LT were assured that there was appropriate governance and accountability around the SUS work, which would be monitored through LT and PODC.
<b>Action:</b>	<b>Approved the closure of this action.</b>

## **Section 2 Directorate Deep Dive - Board Business Unit and QNAPS**

### **Section 2**

#### **Joint BBU and QNAPS:**

**3 Actions to review : 465, 533 and 531**

## Section 2 Directorate Deep Dive - Board Business Unit and QNAPS

<b>Action 465:</b>	<i>Relating to the process for Local Directorate Procedures, and SOPS, guidance on the appropriate governance arrangements within Directorates will be developed to ensure a consistent approach to the development, dissemination, and testing compliance of Local Procedures. This will be developed in conjunction to the current work being undertaken in this area within the Integrated Governance Model.</i>
<b>Report</b>	<i>Audit Wales – Review of Quality Governance Arrangements</i>
<b>Date of report:</b>	<i>1 August 2022</i>
<b>Original date:</b>	<i>1 October 2022</i>
<b>Summary of changes:</b>	This recommendation was paused in January 2023 to June 2023 pending the recruitment of the Board Secretary role. In June a change of date was approved to October 2023.
<b>Deep Dive Comments</b>	Work commenced in the local procedure within the Integrated Governance Team in June 2023 It has been taken through Business and Planning Leads and Leadership team which has resulted in a draft SOP being put out to consultation in November 2023. This recommendation is still valid and is in the consultation stage of the policy review cycle. It is currently out to consultation and will be presented to LT for approval in December (out of meeting) date change to end of would allow for this approval to be completed. High level of confidence that this will be completed by this extended date
<b>Summary of LT review</b>	LT were assured that this action was in progress, and noted that the SOP had just been circulated to LT for approval out of meeting. On that basis they agreed the extension to end of December was sufficient to complete the action.
<b>Proposed action:</b>	<b>Approved the extended date of 31 December 2023.</b>

## Section 2 Directorate Deep Dive - Board Business Unit and QNAPS

<b>Action 533:</b>	<i>External stakeholders are regularly invited to attend and take part in Board and Committee meetings. Feedback following such meetings is invited and is incorporated into overall Board development. We will take an action to formalise our feedback process into our BAF and look into other opportunities to gather feedback (via our website for example) so we can ensure everyone has the opportunity to offer their feedback whether they are viewing Board via the live stream or otherwise. We will also look to operate a clearer feedback process for our partnership and stakeholder working relationships to ensure all learning is captured. This will be taken forward through the refresh and delivery of the Our Approach to Engagement Plan, with a focus on amplifying the voice of people we want to work with and for through the development of a User Experience Framework informed by data generated through the Civica platform and third sector collaboration</i>
<b>Report</b>	Structured Assessment (Audit Wales)
<b>Date of report:</b>	27 September 2023
<b>Original date:</b>	1 March 2024
<b>Summary of changes:</b>	No changes to dates previously requested.
<b>Deep Dive Comments</b>	Work in progress and external resource is currently being scoped and procured to assist with the delivery of this recommendation. On target for completion by the deadline.
<b>Summary of LT review</b>	LT were assured that this action was in progress, and that the target date was achievable .
<b>Action:</b>	<b>No further action required.</b> <b>Retain on register, and note update on progress and indication that it will be delivered within timescales.</b>

## Section 2 Directorate Deep Dive - Board Business Unit and QNAPS

<b>Action 531:</b>	<i>We have all of the components of a Board Assurance Framework (BAF) which is clear in our Board agendas and our Board workplan. Each Board meeting has an agenda item dedicated to the Board Assurance Framework, including a number of components: the Chief Executive's report; the Integrated Performance Report; Managing Risk; and Reports from the Chairs of Committees of the Board. The Board assurance is summarised in the Board Workplan, which is reviewed by the Board at each meeting, and used as the basis for the Board and Committee work. The Terms of reference for the each of the Committee clearly outline the assurance that each are providing, and this is the basis for the workplans. We agree that bringing all of this information and component that make up the BAF into a summary document would be helpful. The Board is content that there are no gaps in the assurance and it content with the information it considered as part of the Board Assurance Framework. Estates and other physical assets is considered at Board level as part of the Budget Strategy.- Population Health is considered at the QSIC Board Committee and at Board level through the Public Health Dashboard and IPR, Strategic Partners forms part of the BAF. We will ensure that these elements are mapped within the summary BAF</i>
<b>Report</b>	Structured Assessment (Audit Wales)
<b>Date of report:</b>	27 September 2023
<b>Original date:</b>	30 September 2023
<b>Summary of changes:</b>	No changes to dates previously requested.
<b>Deep Dive Comments</b>	This action has now been completed and the BAF was approved by Board on 30 November.
<b>Summary of LT review</b>	LT were assured that this action had been completed.
<b>Action:</b>	<b>Approved closure of action.</b>

### **3 Directorate Deep Dive - QNAPS**

**3**

**QNAPS:**

**10 Actions to review : 472, 474,485,476,457,455,506,  
522,488,477**



### 3 Directorate Deep Dive - QNAPS

<b>Action: 472</b>	<i>Develop organisational framework for engagement which outlines how engagement should be embedded in our key strategies and processes with impact and value</i>
<b>Report</b>	Review of Quality Governance Arrangements (Audit Wales)
<b>Date of report:</b>	1 August 2022
<b>Original date:</b>	1 October 2022
<b>Summary of changes:</b>	The date has been changed twice, change of date to 30 June 2023 in March of 2023, and previous request to change relate to awaiting progression of Quality as an organisational strategy as this was a deliverable for 2023-24 within that.
<b>Deep Dive Comments</b>	<p>Part 1 : 'Our approach to Engagement' is due for a refresh in April 2024 and a proposal on how the direction of travel for the next 3 years is being taken to BET in January 2024. This will include how we fulfil the various duties required as of a NHS organisation and how we ensure engagement forms a core in our work.</p> <p>Part 2: In addition a service specification is out to tender following work with Knowledge and research to develop a core set of PHW questions to be included in our Civica surveys that ensure a consistent approach to obtaining feedback to demonstrate impact and value. The Engagement Network has also been refreshed and identified a suggested approach for linking engagement activities through to the clinical governance framework.</p>
<b>Summary of LT review</b>	<p>LT discussed the paper to BET and the scope of this. LT sought further assurance that the extension to 31 March would allow for the development and implementation of the framework. It was acknowledged that this recommendation was in two parts, to develop the framework, and then to implement and embed.</p> <p>LT agreed to approve the extension to March 2024, noting the work that was ongoing to develop the questions for the framework and the report to BET due in January. LT then asked for more detail in the next update (due in February) on how this would be implemented and rolled out across the organisation. At this time, LT will review the timescales for the implementation again to ensure the March date was realistic and achievable.</p>
<b>Action:</b>	<p><b>Part 1: Approve 31 January 2024</b></p> <p><b>Part 2: Approve extension to 31 March 2024.</b></p>

### 3 Directorate Deep Dive - QNAPS

<b>Action: 474</b>	<i>Implement recommendation from literature review of evaluation measures to develop an evaluation framework for engagement activity, with clear performance and outcome metrics measured on a regular basis that monitor the impact of our engagement activity</i>
<b>Report</b>	Review of Quality Governance Arrangements (Audit Wales)
<b>Date of report:</b>	1 August 2022
<b>Original date:</b>	1 November 2022
<b>Summary of changes:</b>	Change of date requested in January 2023 to move to May 2023.
<b>Deep Dive Comments</b>	<p>Update November : A paper detailing the refreshed of Our Approach to Engagement is due to be presented at BET in January 2024 with an emphasis on service user feedback and use of the Civica platform. Within this there is an expectation that all directorates will utilise a 'Friends and Family Test' approach to gathering service user feedback to demonstrate a quality person centred service. A performance target will be set and agreed following discussion at BET.</p> <p>An evaluation framework for engagement activity will be included , to monitor the impact of our engagement activity</p> <p>June 2023 update: Action forms part of the refresh to the organisational Approach to Engagement, ensuring it is clearly aligned to the legal and policy landscape e.g. Quality and Engagement Act and Wellbeing of Future Generations Act (Five Ways of Working)- reflective of existing engagement structures and activity taking place across the organisation - aligned to other related sub-strategies e.g. Digital</p>
<b>Summary of LT review</b>	<p>LT discussed the paper to BET and the scope of this. LT sought further assurance that the extension to 31 March would allow for the development and implementation of the framework. The BET paper was confirming the planned approach, and the next steps. LT noted that the OA2E plan was also reported to QSIC for oversight. It was acknowledged that this recommendation was in two parts, to develop the framework which would be completed by January 2024, and then to implement and embed which was a longer timescale for delivery.</p> <p>LT agreed to approve the extension to March 2024 for the overall action, noting the work that was ongoing to develop the framework and that this part of the recommendation would be completed by January 2024. In terms of the second part of the recommendation, relating to the implementation, LT asked for more detail in the next update (In February) on how this would be implemented and rolled out across the organisation. At this time, LT will review the timescales for the implementation again to ensure the March date was realistic and achievable.</p>
<b>Action:</b>	<b>Approve change of date to 31 March 2024</b>

### 3 Directorate Deep Dive - QNAPS

<b>Action: 485</b>	<i>The review identifies deficiencies in the IG Toolkit plan which do not reflect the actual position as far as Information Governance per se is concerned. At the time of the review, the Information Governance Team was dealing with competing pressures resulting in a less than optimal standard for the submission. The resource issue is now being addressed. Plans are being developed to submit the 2022/2023 submission, but due to delays at DHCW this cannot be completed now until early 2023.</i>
<b>Report</b>	Information Governance Toolkit (Internal Audit – Reasonable)
<b>Date of report:</b>	1 September 2022
<b>Original date:</b>	1 March 2023
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	The first full submission for the Information Governance Toolkit is now to be submitted by 31/03/2024. Work is underway to complete the required information and the team are confident this will be completed by the extended deadline.
<b>Summary of LT review</b>	LT noted the progress with this action, and that there was a plan in place to deliver by the extended deadline.
<b>Action:</b>	<b>Approve extension to 31 March 2024</b>

<b>Action: 476</b>	<i>Collaboratively design and develop an organisational approach to capacity and capability building for skills in engagement and feedback analysis to inform planning and improvement</i>
<b>Report</b>	Review of Quality Governance Arrangements (Audit Wales)
<b>Date of report:</b>	1 August 2022
<b>Original date:</b>	1 March 2023
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	Paper to Jan 24 BET evaluating progress of the three year OA2E plan and recommending next steps. The Engagement and Experience network was relaunched in September. The main action was the re-establishment of the network. This could be closed by the end Jan 24. Assurance can be gained through the network agendas, minutes/actions and any forward looks/plans they have developed.
<b>Summary of LT review</b>	LT noted that this was on track and in progress, the action was to develop a plan, which was the basis of the BET report in January. It was confirmed that this was programmed on the BET forward look for January, and that it would then form part of the update to QSIC for assurance. LT were satisfied at the action could be closed following the review of this report in January and agreed to extend the deadline to 31 January.
<b>Action:</b>	<b>Approve extension to 31 January 2024</b>

### 3 Directorate Deep Dive - QNAPS

<b>Action: 457</b>	<i>Agree with the recommendation. • Updates on the progress of these actions are provided to the Quality, Nursing and Allied Healthcare Professionals Directorate on a quarterly basis. This progress will then be reported to the Business Executive Team and Quality, Safety and Improvement Committee in the interim (6-month) and year-end reports.</i>
<b>Report</b>	Review of Quality Governance Arrangements
<b>Date of report:</b>	1 August 2022
<b>Original date:</b>	1 March 2024
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	Audit findings are now collated centrally and reported to BET and QSIC on a regular basis. Further work is currently in progress to utilise iPassport to robustly track and report actions
<b>Summary of LT review</b>	LT were assured that this action had been completed.
<b>Action:</b>	<b>Approve closure of action.</b>

<b>Action: 455</b>	<i>A longer-term solution for a central repository will be scoped. The PHW Innovation and Improvement Hub is a one potential option for this. Once the options are scope then a feasibility analysis will take place to determine the optimum solution and move to the implementation phase.</i>
<b>Report</b>	Review of Quality Governance Arrangements (Audit Wales)
<b>Date of report:</b>	1 August 2022
<b>Original date:</b>	1 March 2023
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	Discussions recommenced in October with the appointment of new EDON with regards to the transfer of the I&I hub and associated quality work as a result of the transfer of IC to the NHS Executive Established a central repository but further work is in progress to explore the use of passport to automate some of the workflows.
<b>Summary of LT review</b>	LT were assured that this action had been completed.
<b>Action:</b>	<b>Approve closure of action.</b>

### 3 Directorate Deep Dive - QNAPS

<b>Action: 506</b>	As per the Management Action at 1.1, Public Health Wales will review its contract management process and procedures to include the provision of an appropriate contracts register which will be maintained either by Shared Services Procurement or Public Health Wales, dependant upon the outcome of the review. Again, the register will be shared with information governance colleagues along with the RFQ records.
<b>Report</b>	Information Governance – Contract Management
<b>Date of report:</b>	May 2023
<b>Original date:</b>	1 September 2023
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	<p>There is now no need for a procedure for contracts under £25k due to the fact that shared services procurement now manage the procurement process for everything over £5k not just over £25k. This means that the procurement procedures in existence are sufficient and need to be followed. This work will now be progressed by the QNAHPs Directorate to ensure that the Information Governance Service has timely access to the relevant contract register information.</p> <p>This action to work with procurement to gain oversight on the IG elements of contracts between £5-£25k. This is a simple process change and is on track to be completed by the end of January.</p>
<b>Summary of LT review</b>	LT discussed the action, and noted the new procurement process that had been put in place whereby shared services procurement managed the process for under £25k directly, which meant that this recommendation was no longer required. This process was in place with procurement, a number of training sessions had been held with staff and the process was fully operational. On that basis, LT agreed that this action was no longer needed, as the intent of the recommendation had been achieved through the new procurement process.
<b>Action:</b>	<b>Approve closure of action.</b>

### 3 Directorate Deep Dive - QNAPS

<b>Action: 522</b>	The risk in relation to resource capacity is part of a more broadly defined workforce risk within the QNAP's Directorate. If the recruitment in June is not successful we will seek to review the risk articulation. Recruitment is underway for the Head of Risk Management post with interviews scheduled for June 2023. In the absence of the Risk Manager, the Integrated Governance Manager and Assistant Director of Integrated Governance have been given responsibility for leading and managing risk management requirements including the updating of the Risk development plan and progress of subsequent implementation.
<b>Report</b>	Risk Management (reasonable)
<b>Date of report:</b>	May 2023
<b>Original date:</b>	1 August 2023
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	November Update: The contract for the risk consultancy has now been awarded and work will commence in January 2024. Interviews for the Head of Risk are scheduled for December 2023. The team are confident all of the work within the risk management development plan will be delivered by end March and short term mitigation is the allocation of areas of risk work within the Division.
<b>Summary of LT review</b>	LT noted that the action related to resource capacity within QNAPS. Recruitment to the Head of Risk management was progressing, with interviews planned this week. The risk development plan was being taken forward and being delivered by the team to mitigate the risk. On that basis, LT agreed to extend the date to the end of March, and would reassess as part of the progress update due in February, as to whether the recruitment was successful and the timescales for this to be resolved.
<b>Action:</b>	<b>Approved date requested to change to 31 March 2024</b>

### 3 Directorate Deep Dive - QNAPS

<b>Action: 488</b>	<i>The QNAHPs Directorate will lead on the further refinement of the risk Directorate and Divisional Dashboard and ensure monthly uploads of risk data from Datix.</i>
<b>Report</b>	Information Governance – Contract Management
<b>Date of report:</b>	May 2023
<b>Original date:</b>	30 September 2023
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	<p>November Update: Agreed to pilot this approach within Health and Wellbeing and incorporated into BAU. October 2023 update: The SRR has been refreshed and approved and the Leadership Team is currently refreshing the CRR which will be presented to and approved by the Business Executive Team. LT will also be considering how risks will subsequently escalated / deescalated to and from the CRR as part of operational risk management processes being implemented under the Risk Management Development Plan. The Risk Manager is continuing to work with the Performance Team to define and refine risk data to be included within the dashboards.</p> <p>Level of confidence is high and conversations between the risk team and H&amp;WB have been planned, January is a realistic timescale.</p>
<b>Summary of LT review</b>	LT were assured that the pilot was in progress with HWB, and was on track to be completed by the end of January. LT asked for clarification as to whether the roll out and implementation to all directorates from the pilot would be completed by the extended deadline, and asked for an update on this from the LT lead on the feasibility of this by the end of January, at which time, LT will review the timescales for the implementation again to ensure further extensions were realistic and achievable.
<b>Action:</b>	<b>Approve change of date to 31 January 2024</b>

### 3 Directorate Deep Dive - QNAPS

<b>Action: 477</b>	<i>Using gathered intelligence to develop corporate resource (e.g. central stakeholder database) to facilitate shared relationships with external stakeholders and to identify and fill gaps so that we reach all sectors of the Welsh population</i>
<b>Report</b>	Review of Quality Governance Arrangements (Audit Wales)
<b>Date of report:</b>	1 August 2022
<b>Original date:</b>	31 March 2023
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	<p>November Update: A workshop has been requested by the DDDA to establish further information to help determine the future approach for a stakeholder database.</p> <p>October 2023 Update: Knowledge Directorate and Engagement team working together on a user-research project between October and December 2023, requested by DDDA. This project is scoping user needs for a CRM and make recommendations.</p>
<b>Summary of LT review</b>	<p>LT noted that the progress update related to scope user needs for a CRM and make recommendations, implementing and embedding would take further time.</p> <p>LT agreed to approve the extension to March 2024, noting the work that was ongoing to develop the corporate resource, and asked for more detail in the next update (In February) on how this would be implemented and rolled out across the organisation. At this time, LT will review the timescales for the implementation again to ensure further extensions were realistic and achievable.</p>
<b>Action:</b>	<b>Approve change of date to 31 March 2024</b>



## **4 Directorate Deep Dive - QNAPS and Health and Well Being (Joint)**

**4**

**Joint QNAPS and Health and Wellbeing**

**1 Action to review : 395**

#### 4 Directorate Deep Dive - QNAPS and Health and Well Being (Joint)

<b>Action 395:</b>	<i>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.</i>
<b>Report</b>	<i>Risk Management – Internal Audit (Reasonable)</i>
<b>Date of report:</b>	1 June 2020
<b>Original date:</b>	31 March 2021
<b>Summary of changes:</b>	This was paused in August 2021 due to the pandemic and the mobilisation of staff. Recommended following the appointment of the Director of Health and Wellbeing in September 2023. Request to LT in November to extend the implementation date to 31 December 2023.
<b>Deep Dive Comments</b>	<p>Progress has continued within the Health and Wellbeing Directorate, with risk now included for discussion at management team meetings. Through the Risk Management Development Plan, the PHW Leadership Team has responsibility for monitoring progress in implementing more efficient and effective operational risk management across the organisation. This includes proactive input/feedback from the Health and Wellbeing Leadership Team representative. With the new Executive Director and Business and Governance Manager recently taking up post within the Directorate, we shall ensure that progress continues and that risk management is applied consistently across the Directorate (as will be the case across PHW).</p> <p>Full review of the Directorates risk management processes is underway</p>
<b>Summary of LT review</b>	LT noted that this recommendation related specifically to an action within Health and Wellbeing., and that a similar review for all directorates was being progressed through the Risk Development Action Plan. The update provided assurance that there had been substantial progress to improve and embed the risk processes within HWB, and the extension requested was to fully complete the wider review, which was detailed within the Risk Development Action Plan. LT asked for further assurance that this would be completed by the end of January, which would be requested from the Assistant

#### 4 Directorate Deep Dive - QNAPS and Health and Well Being (Joint)

	Director of Integrated Governance outside of the meeting. LT agreed to extend the deadline in the interim, on the basis that further assurance would be provided.
<b>Action:</b>	<b>Approve extension to deadline to 31 January 2024.</b>

**5**

**Health Protection and Screening**

**6 Actions to review : 546, 515, 547, 548, 549 and 550**

## 5 Directorate Deep Dive - Health Protection and Screening Services

<b>Action 546:</b>	<i>The Trust agrees that the data in the performance assurance dashboard need to be reviewed. This work has started and will be part of an overall directorate review. The review will consider the feedback from this audit to take on board feedback and develop the dashboard further.</i>
<b>Report</b>	Screening Recovery Organisational Response (Audit Wales)
<b>Date of report:</b>	27 September 2023
<b>Original date:</b>	31 March 2024
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	Appropriate action which is being progressed. it is on track with no risks to delivery identified. Other divisions and function in HPSS are also undertaking this work and the directorate have indicated their desire to work with the organisation wide programme reviewing performance metrics to land this action in line with their timelines.
<b>Summary of LT Review</b>	LT noted the update, and that the action was on track to be completed within the timescales.
<b>Action:</b>	<b>Retain on register, and note update on progress and indication that it will be delivered within timescales.</b>

<b>Action 515:</b>	<i>Perform an internal Audit review for incident reporting to ensure compliance against divisional and organisational standards for 2023/2024</i>
<b>Report</b>	Health Protection Division Management Arrangements (Internal Audit - Substantial)
<b>Date of report:</b>	1 May 2023
<b>Original date:</b>	May 2024
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	Appropriate action which is being progressed. it is on track with no risks to delivery identified.
<b>Summary of LT Review</b>	LT noted the update, and that the action was on track to be completed within the timescales.
<b>Proposed action:</b>	<b>Retain on register, and note update on progress and indication that it will be delivered within timescales.</b>

## 5 Directorate Deep Dive - Health Protection and Screening Services

<b>Action 549:</b>	<i>The Trust agrees that the data in the performance assurance dashboard need to be reviewed. This work has started and will be part of an overall directorate review. The review will consider the feedback from this audit to take on board feedback and develop the dashboard further.</i>
<b>Report</b>	Screening Recovery Organisational response (Audit Wales)
<b>Date of report:</b>	27 September 2023
<b>Original date:</b>	31 March 2024
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	Appropriate action which is being progressed. it is on track with no risks to delivery identified. Other divisions and function in HPSS are also undertaking this work and the directorate have indicated their desire to work with the organisation wide programme reviewing performance metrics to land this action in line with their timelines.
<b>Summary of LT Review</b>	LT noted the update, and that the action was on track to be completed within the timescales.
<b>Proposed action:</b>	<b>Retain on register, and note update on progress and indication that it will be delivered within timescales.</b>

<b>Action 550:</b>	<i>The Trust agrees that the QSIC reports should be clearer on the progress in completing recovery actions and reducing backlogs and managing risks around recovery. This feedback will be taken on board for reports going forward.</i>
<b>Report</b>	Screening Recovery Organisational Response (Audit Wales)
<b>Date of report:</b>	27 September 2023
<b>Original date:</b>	31 October 2023
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	Still relevant and note request to amend due date to 31.12.23. on track for completion in December. (on agenda for QSIC in December)
<b>Summary of LT Review</b>	LT noted that this extension was to align to the QSIC meeting reporting, and that the meeting was scheduled next week and this was on the agenda for that meeting.
<b>Action:</b>	<b>Approve extension to 31 December 2023.</b>

## 5 Directorate Deep Dive - Health Protection and Screening Services

<b>Action 547:</b>	<i>R3. The Trust agrees that evaluation of the dedicated screening hubs on user experience and DNA rates is key task and will inform future planning. This will be taken forward for each of the programmes that screen from the venues. This work will include using established methods such as service user feedback using Civica; PHW user engagement tools such as Time to Talk and aligned to work of screening engagement team to address inequity.</i>
<b>Report</b>	Screening Recovery Organisational Response (Audit Wales)
<b>Date of report:</b>	27 September 2023
<b>Original date:</b>	31 March 2024
<b>Summary of changes:</b>	No changes to dates previously requested. ..
<b>Deep Dive Comments</b>	Appropriate action which is being progressed. it is on track with no risks to delivery identified
<b>Summary of LT review</b>	LT noted the update, and that the action was on track to be completed within the timescales.
<b>Proposed action:</b>	<b>Retain on register, and note update on progress and indication that it will be delivered within timescales.</b>

## 5 Directorate Deep Dive - Health Protection and Screening Services

<b>Action 548:</b>	<i>R2. The Trust recognises that the public health consultant resource has been reduced over this period. The Trust has appointed a full time public health consultant to bring the capacity back to pre covid levels who started in June 2023. The Trust has invested in additional consultant post through the investment fund and also realigned resources to increase consultant resource further. This is also in anticipation of additional screening programme development and improved capacity around research and evaluation. Two consultant posts are current being recruited and interview is 11 September. The Trust has recently appointed to Head of Operations for Screening Division and start date is being progressed. The Trust is current recruiting a Deputy Head of Operations for Screening Division. This will improve capacity for oversight and leadership around demand and capacity management for the two programmes that have not fully recovered yet around the business support. Business and informatics leads within PHW will work together to explore how we can develop a sustainable demand and capacity model.</i>
<b>Report</b>	Screening Recovery Organisational Response (Audit Wales)
<b>Date of report:</b>	27 September 2023
<b>Original date:</b>	31 January 2024
<b>Summary of changes:</b>	No changes to dates previously requested.
<b>Deep Dive Comments</b>	Appropriate action which is being progressed. it is on track with no risks to delivery identified
<b>Proposed action:</b>	<b>Retain on register, and note update on progress and indication that it will be delivered within timescales.</b>



## **6 Directorate Deep Dive - People and OD**

**6**

**People and OD**

**1 Action to review : 507**

## 6 Directorate Deep Dive - People and OD

<b>Action 507:</b>	<i>A Procedure will be developed to cover the appointment and on-boarding of agency and other third party staff.</i>
<b>Report</b>	Information Governance – Contract Management (Internal Audit –Reasonable Assurance)
<b>Date of report:</b>	1 May 2023
<b>Original date:</b>	1 September 2023
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	When workers are engaged through honorary contracts guidance on the Honorary Contracts page states 'Any honorary contracts with a duration of four weeks or more will be set up with an ESR account, to complete statutory and mandatory training'. The pages will be updated to ensure an emphasis on IG training for both Honorary and Agency workers. This was be updated by 17 November 2023.
<b>Summary of LT review</b>	<p>The action related to the development of a corporate procedure. The update provided indicated that work had been completed via updated advice and guidance on the intranet pages. This part of the recommendation was completed.</p> <p>Stakeholder engagement work is currently underway to inform the development of a procedure which covers the appointment and onboarding of agency and other third party staff. The procedure will build on existing guidance provided in the Recruitment and Selection, Onboarding and Induction and Statutory and Mandatory SharePoint pages including specific information for the appointment and induction of Bank Workers and guidance to set up an ESR account for third party staff.</p> <p>LT asked for clarification that the procedure was required, or whether the action had been completed via the development of the process on the intranet pages. This clarification would be sought outside of the meeting. LT agreed to extend the deadline to March 2024, should the procedure be taken forward.</p>

## 6 Directorate Deep Dive - People and OD

<b>Action:</b>	<p>Note that work had been completed to develop guidance on the intranet, and subject to clarification as to whether the procedure was being taken forward, extend the deadline to 31 March for the approval of this procedure if required.</p> <p><i>Update 20 December: This action has been completed via guidance on the intranet. Action to be closed.</i></p>
----------------	---

## **Section 7**

### **Health and Wellbeing**

**6 Actions to review : 501,502, 503, 537, 538, 540**

## Section 7 Directorate Deep Dive - Health and Wellbeing

<b>Action 501</b>	<i>1.9 Develop options for budget and grant agreement intervals within agreed Public Health Wales budget setting process</i>
<b>Report</b>	<i>Population Health grants management</i>
<b>Date of report:</b>	1 May 2023
<b>Original date:</b>	31 October 2023
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	Work has been completed and is now being implemented  October 2023 Update: The First Task and Finish Group has explored options and further work will be done to take this forward during the Autumn.
<b>Summary of LT review</b>	LT were assured that this action had been completed.
<b>Action:</b>	<b>Approve closure of action</b>

## Section 7 Directorate Deep Dive - Health and Wellbeing

<b>Action 502:</b>	<i>1.5 Agree revised grant management process and procedures</i>
<b>Report</b>	<i>Population Health grants management</i>
<b>Date of report:</b>	1 May 2023
<b>Original date:</b>	31 July 2023
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	<p>October 2023 Update: Process has been tested during Q1 and revisions are being made to confirm by the end of the month. Due to the complexity of the process, following the workshop, a decision was made to test the proposed changes during quarter 1.</p> <p>This would provide an opportunity to test understanding and to refine and review the approach prior to formal agreement at the next T&amp;F meeting. Changes have been implemented and reviewed. This has highlighted further work that needs to be undertaken to ensure that all of the processes and documentation align to the revised process. This work will be undertaken and completed by the end of February in time for the next grant period.</p>
<b>Summary of LT review</b>	LT were assured that this action had been had been largely completed, and that the process had been tested and reviewed as per the recommendation. Further work had been identified as part of the review to refine the process, which as being completed to the end of February. On that basis, LT agreed to extend the deadline to end of February, but noted that this was to complete refinements to the process following the review.
<b>Action:</b>	<b>Approve extension to 28 February 2024.</b>

## Section 7 Directorate Deep Dive - Health and Wellbeing

<b>Action 503:</b>	<i>1.7 Agree measurement indicators to measure improvement in grant management processes</i>
<b>Report</b>	<i>Population Health grants management</i>
<b>Date of report:</b>	<b>1 May 2023</b>
<b>Original date:</b>	<b>30 June 2023</b>
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	<p>October 2023 Update: As reported in September, the revised Divisional process was being tested during the Q1 returns a process which has not yet completed. Following this trial a set of indicators will be agreed for implementation in November.</p> <p>September 2023 Update: It was felt appropriate to ensure the process was fully documented and agreed before indicators were proposed. However, the General Manager is identifying possible indicators through the Q1 process.</p> <p>An audit has been undertaken of the process to test the metrics developed. Further work has been identified for improvement prior to finalising the work. Will need to request a revised date of end of February 2024 to align all of the elements of the work.</p>
<b>Summary of LT review</b>	LT were assured that this action had been had been largely completed, and that the process had been tested and reviewed as per the recommendation. Further work had been identified as part of the review to refine the process, which as being completed to the end of February. On that basis, LT agreed to extend the deadline to end of February, but noted that this was to complete refinements to the process following the review.
<b>Proposed action:</b>	<b>Approve change of date to 28 February 2024</b>

## Section 7 Directorate Deep Dive - Health and Wellbeing

<b>Action 537:</b>	<i>1.3 Agree aim, objectives and principles for the grant management process</i>
<b>Report</b>	<i>Population Health grants management</i>
<b>Date of report:</b>	<b>1 May 2023</b>
<b>Original date:</b>	<b>31 May 2023</b>
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	October 2023 Update: Work is ongoing to confirm the revised process.  September update: A draft aim, objectives and principles has been developed. Action complete. Work is ongoing to confirm the revised process.
<b>Summary of LT review</b>	LT noted that the revised aims and objectives had been agreed, and the implementation was being taken forward and reflected in other actions on this tracker. LT approved the closure of this actions on that basis.
<b>Action:</b>	<b>Approve closure of action.</b>

<b>Action 538:</b>	<i>1.4 Produce a RACI matrix for the grant management and administration process</i>
<b>Report</b>	<i>Population Health grants management</i>
<b>Date of report:</b>	<b>1 May 2023</b>
<b>Original date:</b>	<b>30 June 2023</b>
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	October 2023 Update: Process has been tested which has highlighted some additional issues in relation to roles and responsibilities that are now being clarified for final confirmation at the end of November. Suggest revised implementation date of 30 November 2023. Changes have been implemented and reviewed and audited. This has highlighted further work that needs to be undertaken to ensure that all of the processes and documentation align to the revised process. This work will be undertaken and completed by the end of February in time for the next grant period.
<b>Summary of LT review</b>	LT were assured that this action had been had been largely completed, and that the process had been tested and reviewed as per the recommendation. Further work had been identified as part of the review to refine the process, which as being completed to the end of February. On that basis, LT agreed to extend the deadline to end of February, but noted that this was to complete refinements to the process following the review.
<b>Action:</b>	<b>Approve change of date to 28 February 2024</b>



## Section 7 Directorate Deep Dive - Health and Wellbeing

<b>Action: 540:</b>	<i>1.10 Develop and agree revised monitoring and reporting metrics for NERS and WNHSS through the relevant Improvement and Transformation Programme mechanisms.</i>
<b>Report</b>	<i>Population Health grants management</i>
<b>Date of report:</b>	1 May 2023
<b>Original date:</b>	31 March 2024
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	September Update: A Health Promoting Schools Programme Board has been established and is overseeing the Improvement Programme for the Welsh Network. The Programme Board has received a paper on monitoring and evaluation and a logic model workshop has taken place. A further paper is due to be considered by the Programme Board at its meeting in September. The National Exercise Referral Advisory Board has agreed the Improvement Plan for the Programme. This is currently being implemented. One element involves the introduction of a new database and reporting system which is due to initial implementation in October. This system will provide greater routine visibility and reporting of key programme activity and outcomes. Work is progressing to schedule.
<b>Summary of LT review</b>	Appropriate action which is being progressed. it is on track with no risks to delivery identified
<b>Action:</b>	<b>Retain on register, and note update on progress and indication that it will be delivered within timescales.</b>

## **8 Directorate Deep Dive - Knowledge**

**8**

**Knowledge**

**3 Actions to review : 541, 544 and 545**

## 8 Directorate Deep Dive - Knowledge

<b>Action 541:</b>	<i>1.1a and b Data, Knowledge and Research Directorate have initiated a series of groups on standards for the various Data, Knowledge and Research products PHW produce these are being developed. We expect full implementation across the range by March 2024 and will utilise mandation if necessary through an appropriate reporting arrangement (see other actions). On stakeholder engagement we will utilise the Agile methodology to establish user needs for individual products. We have established an annual survey of users to establish needs and areas for improvements. We will supplement these activities with a new strategic stakeholder forum to ensure a complete suite of stakeholder involvement at all levels in our planning.</i>
<b>Report</b>	Information Provision
<b>Date of report:</b>	27 September 2023
<b>Original date:</b>	31 March 2024
<b>Summary of changes:</b>	October 2023 Update: Process has been tested which has highlighted some additional issues in relation to roles and responsibilities that are now being clarified for final confirmation at the end of November.
<b>Deep Dive Comments</b>	overlap with 545. A organisational wide working group is underway to develop the standards; currently cross-organisational by in is good. It is anticipated that the standards will be available for adoption in March 2024. Management action is to support the adoption. Further work needed to establish the strategic stakeholder forum.
<b>Summary of LT review</b>	LT noted that the action was still relevant, was being progressed it was on track to be completed by the target date, with no risks to delivery identified at this stage.
<b>Proposed action:</b>	<b>Retain on register, and note update on progress and indication that it will be delivered within timescales.</b>

## 8 Directorate Deep Dive - Knowledge

<b>Action 544:</b>	<i>4.1 We launched a suite of monitoring and evaluation tools for our data, knowledge and research products in PHW in March 2023 as agreed by the Knowledge, Research and Information Committee. This includes an annual survey of all users and methods for collection of feedback on individual products. We will supplement these with routine web metrics of our analytical products to create a comprehensive suite of monitoring of our information products</i>
<b>Report</b>	<i>Information Provision</i>
<b>Date of report:</b>	27 September 2023
<b>Original date:</b>	31 October 2023
<b>Summary of changes:</b>	November Update: Discussions with Comms and web metrics are being prepared by end of November and will be reviewed during December Request extension to 31 December 2023.
<b>Deep Dive Comments</b>	The tools have been launched and are available for organisational use. Support is being provided by the Knowledge mobilisation team and case studies are being prepared. The management action is now to encourage the adoption of the tools across the organisation to allow a full picture of our impact can be realised. An annual report will be produced in April 2024
<b>Summary of LT review</b>	LT discussed the action, and that the tools have been launched and are available for organisational use. It was noted that there would be ongoing further work to refine and embed and to encourage the adoption across the organisation. LT were satisfied that this would be taken forward as part of the management oversight, and noted it was reported to KRIC for assurance.
<b>Action:</b>	<b>Approve the closure of the action.</b>

## 8 Directorate Deep Dive - Knowledge

<b>Action 545:</b>	<i>5.1 Data, Knowledge and Research Directorate have initiated a series of groups on standards for the various Data, Knowledge and Research products PHW produce these are being developed. We expect full implementation across the range by March 2024. Ideally these will be signed up to without mandation but if necessary, the Digital and Data Design Authority will be used to mandate these, (or other suitable body as per action 2)</i>
<b>Report</b>	<i>Information Provision</i>
<b>Date of report:</b>	27 September 2023
<b>Original date:</b>	31 March 2024
<b>Summary of changes:</b>	In Progress, not yet due.
<b>Deep Dive Comments</b>	A organisational wide working group is underway to develop the standards; currently cross-organisational by in is good. It is anticipated that the standards will be available for adoption in March 2024. Management action is to support the adoption.
<b>Summary of LT review</b>	LT noted that the action was still relevant, was being progressed it was on track to be completed by the target date, with no risks to delivery identified at this stage.
<b>Action:</b>	<b>Retain on register, and note update on progress and indication that it will be delivered within timescales.</b>

**9**

**Operations and Finance**

**6 Actions to review : 420, 516, 518, 519, 526, 530**

## 9 Directorate Deep Dive - Operations and Finance

<b>Action 420:</b>	<i>As business returns to normality the Trusts departments should review their continuity documentation, taking the opportunity to include learning lessons on continuity and recovery identified during the Covid response. Management note the finding and will update the documentation with lessons learned as part of the pandemic.</i>
<b>Report</b>	<i>IT Business Continuity</i>
<b>Date of report:</b>	1 June 2021
<b>Original date:</b>	31 August 2021
<b>Summary of changes:</b>	<p>Three date changes approved:</p> <ul style="list-style-type: none"> <li>• June 2023 (approved in Jan 2023)</li> <li>• Feb 2023 (approved in October 2022)</li> <li>• March 2022 (approved in Sept 2021)</li> </ul>
<b>Deep Dive Comments</b>	<p>October 2023 Update: Lead Cyber Security Manager role now live, who will take on the review of cyber and Digital Services EPRR policies as defined in the Cyber Improvement Plan. Current EPRR policies and guidance was provided to the Cyber Resilience Unit (CRU) for review.</p> <p>June 2023 update: Business continuity and emergency planning documentation collated by Digital Services and EPRR teams in preparation for audit with the CRU in July, including the Cyber Incident Management Plan. Further updates to our business continuity approaches to be implemented with the recruitment of a Lead Cyber Security Manager as per the Cyber Improvement Plan.</p> <p>January 2023 Update: Digital Services have provided input on the PHW Emergency Response Plan review regarding IT resilience. Operating procedures for back up recovery shared with internal audit for review. Cyber Security Improvement Plan presented to Audit Committee inclusive of actions for continuity and recovery. Scenario planning workshop is being drafted (based on existing desktop scenarios) and work is ongoing to review and revise existing Business Continuity and Disaster Recovery plans to include new resilience measures, such as the recently implemented air-gapped backups and associated operating procedures. <b>Revised implementation date of 30 June 2023.</b></p> <p><b>September 2022 Update:</b> Head of Digital Experience and Services appointed and attended EP BC meeting. Further work needed on the IM&amp;T/Digital Services plans to account for new</p>

## 9 Directorate Deep Dive - Operations and Finance

	<p>resilience measures (e.g. air gapped backups) and review of PHW Emergency Response Plan. Work to commence in quarter 3 and finalised by February 2023. <b>Request revised implementation date of 28 February 2023.</b> (BET 4/10/22).</p> <p><b>January 2022 Update:</b> Business continuity leads have been asked to incorporate learning by the Emergency planning teams and will be monitoring updates. IM&amp;T will update our plans accordingly by end of March-22. On track.</p> <p><b>August 2021 update:</b> Lesson learned from Covid-19 response continue to be captured and these will also be fed into organisational lessons learned exercise. Findings will be incorporated into business continuity plans as these are revised. Request revised implementation date <b>of 31 March 2022</b> (ACGC.15.09.21)</p>
<b>Summary of LT review</b>	<p>LT discussed this action, and the breadth of work that was ongoing in this area across the organisation. Since this review (in 2021) there had been developments in this area, which had been progressed and referenced within the Strategic Risk 7 (Cyber) this risk contained actions that supersede this action, as well as review at Board level of the with lessons learned as part of the pandemic.</p> <p>LT were satisfied that the action related to the review and embedding of that the SRR process provided the right mechanism for ongoing management of business continuity.</p>
<b>Action:</b>	<b>Approved closure on basis that ongoing management of this matter taken forward through SRR mechanisms.</b>



## 9 Directorate Deep Dive - Operations and Finance

<b>Action 516:</b>	<i>The Estates and Health and Safety Division have a programme of work to update all policies and procedures that need reviewing and updating and are included as part of the Health and Safety workplan. These policies and procedures will continue to be reviewed, updated and approved by the relevant group/ Committee by end of quarter 1 2023/24.</i>
<b>Report</b>	<i>Health and Safety</i>
<b>Date of report:</b>	February 2023
<b>Original date:</b>	30 June 2023
<b>Summary of changes:</b>	One change to 31 October 2023 (agreed in June 23)
<b>Deep Dive Comments</b>	<p>October 2023 Update: Work ongoing to update health and safety policies and procedures, along with the development of new policies that have been identified e.g. Safer Driving Procedure. The Health and Safety workplan 2023/24 is monitoring the progress of policy/ procedure updates and for outstanding policies, risk remains low and existing policies and procedures remain current. Suggest revised implementation date of 31 March 2024 requested.</p> <p>June 2023 update: Policies continue to be updated. Procedures are approved through the Health and Safety Group and policies will be approved by the Quality, Safety and Improvement Committee. The Health and Safety workplan 2023/24 details the timetable for reviewing and updating the policies and procedures which has been approved by the Quality, Safety and Improvement Committee in May 2023. Seven Health and Safety Policies and Procedures were updated and approved during 2022/23. For outstanding policies, risk remains low and existing policies and procedures remain current. Suggest revised implementation date of 31 October 2023.</p>
<b>Summary of LT review</b>	LT noted the progress being made to review and update policies and procedures, and noted that the schedule for this was detailed within the Health and Safety Group Work Plan. LT asked for a copy of the work plan to be provided, for assurance on the progress and to assess whether the revised implementation date was realistic and achievable. LT agreed to review this again as part of the next review in February, and re-evaluate the timescales at this point,.
<b>Action:</b>	<b>Approve revised implementation date of 31 March 2024</b>

## 9 Directorate Deep Dive - Operations and Finance

<b>Action 518:</b>	<i>Head of Estates and Health and Safety to work with Health and Safety Managers and Risk Manager to ensure all risks are up to date. Training session for Screening and Microbiology managers in the process of being set up.</i>
<b>Report</b>	<i>Health and Safety</i>
<b>Date of report:</b>	February 2023
<b>Original date:</b>	31 March 2023
<b>Summary of changes:</b>	One change of date – to October 2023 approved in June 23.
<b>Deep Dive Comments</b>	<p>October 2023 Update: Part complete. Health and Safety Risks have been updated and are monitored and reviewed through the Health and Safety Group. Awaiting date for training for managers in Microbiology and Screening.</p> <p>June 2023 update: Risks continue to be updated. Risks were also considered and discussed as part of the Directorate end of year reviews. Due to the absence of the Risk Manager in the organisation a training session is still to be arranged. Suggest revised implementation date of 31 October 2023.</p>

## 9 Directorate Deep Dive - Operations and Finance

<b>Summary of LT Review</b>	<p>LT noted that the action update indicated it had partially been completed, the outstanding element related to a training session for Screening and Microbiology managers. It was noted that since this update had been provided, training sessions on risk had been issued by the Risk team, which was open to all staff. It had been circulated to the risk assurance network, and Leadership team to cascade to directorates.</p> <p>There are two levels of training available, these were:</p> <ul style="list-style-type: none"><li>• <b>Level 1 – Fundamentals of Risk.</b> This training is for all staff to attend and last 1 hour, it provides an overview of the following:<ul style="list-style-type: none"><li>○ Enterprise Risk Management</li><li>○ Risk Identification</li><li>○ Definition of Risk</li><li>○ Risk Articulation</li><li>○ Inherent Scoring</li><li>○ Controls</li><li>○ Reporting a risk on Datix Web</li><li>○ Further Guidance</li></ul></li> <li>• <b>Level 2 – Managing Risk</b> This training is targeted at all staff who are identified as having responsibility for managing risks within their area (i.e. who have additional permissions within Datix Web). Invitations for this training will be sent to those colleagues individually. Colleagues must complete the Level 1 training prior as this provides the foundations for the more in-depth training of Level 2.</li></ul> <p>LT agreed to close this action on this basis, subject to confirmation that this training had been sent to HPSS teams. (Note, since the meeting LB has forwarded this to the Operations team in HPSS for them to ensure it is cascaded and taken up by the relevant teams.)</p>
<b>Action:</b>	<b>Approved closure of the action.</b>

## 9 Directorate Deep Dive - Operations and Finance

<b>Action 519:</b>	<i>The Budgetary Control Framework will be reviewed and updated as necessary and follow the appropriate governance and engagement process, via staff consultation and Audit Committee approval.</i>
<b>Report</b>	<i>Financial Management</i>
<b>Date of report:</b>	December 2022
<b>Original date:</b>	1 March 2023
<b>Summary of changes:</b>	One date change to Sept 23, approved in June 23.
<b>Deep Dive Comments</b>	<p>October 2023 Update: Continued staff absences and vacancies in the Finance Division over the summer period have further delayed the completion of this procedure. Request further change to date of completion and approval to coincide with Audit &amp; Corporate Governance Committee 29 January 2024.</p> <p>June 2023 update: due to a number of staff absences and prioritisation of year-end work the review of the budgetary control framework commenced but has not been completed, however the current framework is still in existence. Suggest revised date for completion and approval of 30 September 2023.</p>
<b>LT Review</b>	LT noted that this was in the final stages of the consultation, approval process and was on the agenda for the January ACGC meeting. They agreed to change the date to align with the ACGC meeting.
<b>action:</b>	<b>Approve revised implementation date of 29 January 2024</b>

## 9 Directorate Deep Dive - Operations and Finance

<b>Action 526:</b>	<i>Where a stock take is required in future years, we will ensure this is agreed well in advance with the audit team and the Microbiology Division and will request formal communication to be cascaded to all Microbiology colleagues, so all relevant staff are aware of the date and the requirements of the process. Following this issue identified during March, an Inventory/Stock Financial Control Procedure is now in development. This procedure will detail the role and responsibilities in relation to Inventory/Stock Control, the importance of maintaining accurate stock records and stock control processes including templates for recording details of stock counts. All staff will be required to adhere to this Procedure.</i>
<b>Report</b>	<i>Audit of Accounts 2022/23</i>
<b>Date of report:</b>	1 September 2023
<b>Original date:</b>	1 October 2023
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	October 2023 Update: The draft inventory/stock control procedure has received a number of comments and a final draft is being prepared. There will need to be a four week consultation so the proposed date for completion and approval is 29th January to coincide with the next Audit & Corporate Governance Committee. The procedure will detail what arrangements must be followed to set up a stock take, emphasising that the Finance Division and External Audit should be consulted in advance to confirm year end stocktake dates.
<b>Summary of LT review</b>	LT noted that this was in the final stages of the consultation, approval process and was on the agenda for the January ACGC meeting. They agreed to change the date to align with the ACGC meeting.
<b>Proposed action:</b>	<b>Approve revised implementation date of 29 January 2024</b>

## 9 Directorate Deep Dive - Operations and Finance

<b>Action 530:</b>	<i>We will bring together into a formal paper the process for development, scrutiny and approval of the IMTP from the current discussions in Board Development sessions.</i>
<b>Report</b>	<i>Structured Assessment</i>
<b>Date of report:</b>	September 2023
<b>Original date:</b>	1 December 2023
<b>Summary of changes:</b>	No changes to dates previously requested. .
<b>Deep Dive Comments</b>	October Update: Process for development of Public Health Wales' IMTP underway informed by latest Welsh Government updates, including current NHS Wales financial position, and internal improvements following completion of process for 2023/24. The development of our IMTP for 2024/25 will reflect current organisation position as we move into year 2 of our strategy and therefore will be a refresh of the 2023/24 plan. Briefing paper to be presented to Board on 14 December setting out proposed approach, including approval points, and key stages where Board will input.
<b>Summary of LT review</b>	LT noted this was on the agenda for 14 December meeting of the Board Development session and agreed to close on that basis.
<b>Action:</b>	<b>Approve closure of action.</b>

**10**  
**Joint QNAPS and WHO CC**  
**1 Action to review - 447**

## 9 Directorate Deep Dive - Operations and Finance

<p><b>Action 447:</b></p>	<p><i>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.</i></p> <p><i>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 &amp; 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.</i></p> <ul style="list-style-type: none"> <li>• <i>Scope and agree the solution</i></li> <li>• <i>Implement the agreed solution</i></li> </ul>
<p><b>Report</b></p>	<p><i>Review of Quality Governance Arrangements</i></p>
<p><b>Date of report:</b></p>	<p>1 August 2022</p>
<p><b>Original date:</b></p>	<p>1 June 2022</p>
<p><b>Summary of changes:</b></p>	<p>One change to June 2023 approved in January 2023.</p>
<p><b>Deep Dive Comments</b></p>	<p>November 2023 Update: Reviewing the process for EQHIAs and the Exec Lead to take this representation forward. Discussions planned between relevant Execs, particularly to take in to account other duties and wider impacts we might want to expand as part of an integrated approach to impact assessments. Request new date whilst this work is undertaken, 31 January 2024</p> <p>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.</p> <p>September 2022 Update: A review of EQHIA process is scheduled.</p>



## 9 Directorate Deep Dive - Operations and Finance

<b>Summary of LT review</b>	<p>LT reviewed the progress to date and noted the alignment to a number of pieces of work, involving a number of Execs. LT were not clear that the update provided would mean that the action itself would be completed by the end of January, but acknowledged that the scoping and review of the requirements was underway.</p> <p>LT approved the revised date, but asked for a detailed report to be submitted to the January Leadership Team meeting to outline how this work would progress, including timescales and an outline on the programme of work to achieve this action. At this time, LT will review the timescales for the implementation again to ensure further extensions were realistic and achievable.</p>
<b>Proposed action:</b>	<b>Approve revised implementation date of 31 January 2024</b>