NHS Forth Valley Operational Internal Audit Plan 2017-2018   **Appendix A**

Reference		Description	Scope	2017/18 *Days*
		AUDIT PROCESS		**48**
A	1	18 Audit Risk Assessment & Planning	Audit Risk Assessment & Operational Planning	8
A	2	18 Audit Management & Liaison with Directors	Audit Management, Liaison with Directors of Finance and other Officers	15
A	3	18 Liaison with External Auditors	Liaison and co-ordination with External Audit	5
A	4	18 Audit Committee	Briefings, preparation, attendance and action points	10
A	5	18 Clearance of Prior Year	Provision for clearance and reporting of 2015-2016 Audit Reports	10
		CORPORATE GOVERNANCE		**68**
		Accountability and Assurance		
A	6	18 Annual Internal Audit Report	CIA's annual assurance to Audit Committee	10
A	7	18 Governance Statement	Preparation of portfolio of evidence to support governance statement	20
A	8	18 Audit Follow-up	Review of the audit follow-up mechanism & selective examination	8
		Control Environment		
A	9	18 Governance overview	Assurance mapping and review of Committee effectiveness; assessment of assurances available to Board following reduction in audit days	20
		Risk Management		
A	10	18 Risk Management	Review of system of risk management including shared risks	10
		HEALTH PLANNING		**105**
		Health Plan		
A	11	18 Improvement, innovation and operational planning	Application to specific Corporate risks, including maintenance of patient flow and achievement of waiting times targets	25
		Service Monitoring		
A	12	18 Organisational Performance Management	Review of specific performance related corporate risk	25
		Effective Partnerships and Integrated Care		
A	13	18 Health and Social Care Integration	Working with local authority partners to deliver IJB Internal Audit Plan ongoing review of Health Board HSCI risk and associated controls	55
		CLINICAL GOVERNANCE		**40**
		Clinical Governance Committee		
		Quality of Care		
A	14	18 Patient Safety Programme	Accurately reporting and using SPSP and SPSI Data to improve patient safety	20
		Patient Safety		
A	15	18 Infection Control	Review of arrangements to manage the Corporate risk on control of HAI and adherence to policy	20
		STAFF GOVERNANCE		**30**

			Staff Governance Arrangements		
A	16	18	Workforce planning including capable and effective workforce	Review of workforce planning and monitoring to deliver the right workforce in the short, medium and long-term	30
			FINANCIAL ASSURANCE		**23**
			Accountability		
A	17	18	Fraud & Probity arrangements	Fraud Liaison Officer duties including reporting to Audit Committee, annual fraud checklist, responding to risk assessmen	23
			CAPITAL INVESTMENT		**15**
A	18	18	Property Transaction Monitoring and Property disposals	Post Transaction Monitoring, Efficient effective planning for property disposal	15
			TRANSACTION SYSTEMS		**20**
A	19	18	Financial Process Compliance	Compliance testing of central payroll, travel, accounts payable, account receivable, bank arrangements	20
			INFORMATION GOVERNANCE		**50**
			Information Security		
A	20	18	Information Security Framework	Implementation of NHSScotland information security policy framework including ICT Asset Security, e-health Business Continuity and Disaster Recovery	20
			e-health		
A	21	18	eHealth Project Management, Development, Procurement, Implementation and Training	Review of arrangements for implementation of the Trakcare Patient Management System	15
A	22	18	Data quality	Processes to ensure data is collated appropriately and reported accurately and timeously to the right people	15
			CONTINGENCY		**40**
			Contingency		
A	23	18	Departmental Reviews	Holistic Reviews of individual departments/wards selected following detailed discussion with management	40
			TOTAL		**439**