



Public Health - Health Protection Standards

City of York Council

Internal Audit Report 2018/19

Business Unit: Public Health, Housing and Adult Social Care Directorate
Responsible Officer: Director of Public Health
Service Manager: Assistant Director (Consultant) in Public Health
Date Issued: 05/06/2019
Status: Final
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	P1	P2	P3
Actions	0	0	0
Overall Audit Opinion	Reasonable Assurance		

Summary and Overall Conclusions

Introduction

As of April 2013, City of York Council became responsible for assuring that local health protection arrangements are robust. As well as major programs such as national immunisation and the provision of health services, health protection includes planning, surveillance and response to incidents and outbreaks.

The Council's responsibilities include an oversight function to ensure that all relevant organisations discharge their roles effectively for the protection of the local population. Clear accountabilities and collaboration are key components of effective response arrangements. This duty is discharged through the Director of Public Health.

The Director of Public Health is a member of the North Yorkshire Health Protection Board, whose responsibility is to seek assurance on outcomes and arrangements relating to health protection for York and North Yorkshire. They are also a member of the Health Protection Assurance Group, whose members include Public Health directors from Yorkshire, Public Health England and NHS England.

In collaboration with other local authority Public Health functions, a 'Developing Excellence in Local Public Health' (DELPH) assurance framework has been developed. A self-review against this framework was recently completed and a peer review was conducted in March 2019. A written report on the results of this peer review is expected to be received in April or May 2019.

The council received £8.013m of ring-fenced funding from the Department of Health in 2018-19. CYC and the Director of Public Health are required to confirm that the grant has been spent in accordance with the conditions via a yearly assurance statement.

Objectives and Scope of the Audit

The purpose of this audit was to provide assurance to management that procedures and controls within the system ensure:

- Health protection assurance and governance arrangements are robust.
- Plans for responding to major incidents are comprehensive, regularly updated and tested.
- Information is available on the allocation and use of the Public Health Grant across the authority.

Key Findings

A City of York Health Protection Committee has recently been established. The first meeting was held in February 2019 and is due to meet quarterly. Membership includes representatives from Public Health, Emergency Planning, Public Protection, Public Health England and the York CCG. Papers and minutes will be shared with other local bodies when appropriate.

A draft Terms of Reference for the committee was circulated at the February 2019 meeting. The committee's aims, accountability, duties and functions, membership, attendance requirements and secretariat arrangements are clearly stipulated. The committee will oversee health protection arrangements through a health protection assurance framework which is currently under development.

As only one meeting has been held so far, and no health protection assurance framework has yet been agreed, it is not possible to give a strong level of assurance regarding the robustness of arrangements. However, satisfactory governance arrangements are being put in place for providing health protection assurance, so no action has been raised in this report as the necessary action is already being taken.

Major incident plans are in place for Pandemic Flu, Outbreaks and Mass Treatment & Vaccination. All plans were found to have been updated recently and are stored appropriately. Governance of these plans will be through the Health Protection Committee. Testing of the mass treatment & vaccination plan is due to be carried out in May 2019. Establishing lessons learnt from incidents is part of the response process that is included in the plans. All major incident plans should be tested on a rolling schedule and reviewed and updated with lessons learnt from the testing.

For responding to cold weather and heatwave incidents, plans provided by Public Health England are used. These plans are intended to be good-practice guidance and advise that each local authority should review and adopt actions suitable for their local area. These plans should be reviewed for appropriateness and local action plans produced for how they will be implemented in York.

Financial information is available on the use of the Public Health Grant that is allocated to four other departments of the council: Adults Mental Health, Older People's Contracted Services, Air Quality and the Healthy Child Service. Performance data such as key performance indicators and contract management arrangements are also available for these services. Further discussions with key officers and analysis of available information would be required in order to make assessments of the precise impact of the funding providing by public health. Further information will be provided to Public Health officers separately from this audit report.

The 'Developing Excellence in Local Public Health' (DELPH) peer review was carried out in March 2019. Informal feedback on current arrangements and areas for improvement has been provided. Areas of positivity were identified and it was recognised that improvements have been made with a comparatively small capacity.

Areas for consideration for improvement were also communicated. These comprised of recognising the different needs of local areas, growing relationships and developing public health's voice and influence across the authority. A formal report is due to be received in April 2019. The contents of the peer review report will be used to formulate an action plan to improve public health arrangements, including health protection assurance and governance. Therefore, actions have not been raised in this audit report but issues and action plans arising from the peer review will be reviewed as part of the 2019-20 internal audit plans.

Overall Conclusions

The arrangements for managing risk were satisfactory. Weaknesses related mainly to the fact that health protection arrangements are still in their early stages. An acceptable control environment is in operation, appropriate processes are being put in place and further actions will be taken in response to the peer review. Our overall opinion of the controls within the system at the time of the audit was that they provided Reasonable Assurance.

Audit Opinions and Priorities for Actions

Audit Opinions

Audit work is based on sampling transactions to test the operation of systems. It cannot guarantee the elimination of fraud or error. Our opinion is based on the risks we identify at the time of the audit.

Our overall audit opinion is based on 5 grades of opinion, as set out below.

Opinion	Assessment of internal control
High Assurance	Overall, very good management of risk. An effective control environment appears to be in operation.
Substantial Assurance	Overall, good management of risk with few weaknesses identified. An effective control environment is in operation but there is scope for further improvement in the areas identified.
Reasonable Assurance	Overall, satisfactory management of risk with a number of weaknesses identified. An acceptable control environment is in operation but there are a number of improvements that could be made.
Limited Assurance	Overall, poor management of risk with significant control weaknesses in key areas and major improvements required before an effective control environment will be in operation.
No Assurance	Overall, there is a fundamental failure in control and risks are not being effectively managed. A number of key areas require substantial improvement to protect the system from error and abuse.

Priorities for Actions

Priority 1	A fundamental system weakness, which presents unacceptable risk to the system objectives and requires urgent attention by management.
Priority 2	A significant system weakness, whose impact or frequency presents risks to the system objectives, which needs to be addressed by management.
Priority 3	The system objectives are not exposed to significant risk, but the issue merits attention by management.

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