

minutes

Governance and Audit Committee Meeting

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| **Date and Time** | 10 October 2024 at 2.00pm |
| **Venue** | Fifth Floor Meeting Room, 12/22 Linenhall Street, Belfast |

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| **Present** |  |  |
| Mr Joseph StewartMr John Patrick Clayton Mr Robert Irvine | --- | Chair (*via video link*)Non-Executive DirectorNon-Executive Director |
| **In Attendance** |  |  |
| Ms Leah ScottMr Stephen Murray Mr Stephen WilsonMr Stephen BailieMs Karen BraithwaiteMs Karen BrownMs Aisling SmythMrs Catherine McKeownMr Ryan FallsMr Roger McCanceMr Robert Graham | ----------- | Director of Finance and Corporate ServicesInterim Assistant Director of Planning and Business ServicesInterim Head of Chief Executive’s OfficeHead AccountantSenior Operations ManagerSenior AccountantOperations ManagerInternal Audit, BSO Cavanagh Kelly (*via video link*)NIAOSecretariat |
| **Apologies** |  |  |
| None |  |  |

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| **49/24** | **Item 1 – Welcome and Apologies** |
| 49/24.1 | Mr Stewart welcomed everyone to the meeting. There were no apologies. |
| **50/24** | **Item 2 - Declaration of Interests** |
| 50/24.150/24.2 | Mr Stewart asked if anyone had interests to declare relevant to any items on the agenda.Mr Clayton declared an interest in relation to Public Inquiries as Unison is engaging with the Inquiries. |
| **51/24** | **Item 3 – Minutes of previous meeting held on 8 August 2024** |
| 51/24.1 | The minutes of the previous meeting, held on 8 August 2024 were **approved** as an accurate record of that meeting. |
| **52/24** | **Item 4 – Matters Arising**  |
| 52/24.1 | Mr Stewart noted that there were no actions from the last meeting. |
| **53/24** | **Item 5 – Chair’s Business** |
| 53/24.1 | Mr Stewart advised that he had no business to update on. |
| **54/24** | **Item 6 – Corporate Governance** |
| 54/24.154/24.254/24.354/24.454/24.554/24.654/24.754/24.854/24.954/24.1054/24.1154/24.1254/24.1354/24.1454/24.1554/24.1654/24.1754/24.1854/24.19 | *Corporate Risk Register as at 30 September 2024 [GAC/37/10/24]*Mr Stewart said that no new risks have been to the Corporate Risk Register, but that he had an issue with the change of rating of the risk relating to Public Inquiries from “high” to “medium”. He added that he was not satisfied there is a justification for this given the potential for reputational damage. He acknowledged that while PHA may be coping with the responses to current Inquiries, the risk to reputational damage has not diminished in any way. Ms Scott agreed that some justification could be included, but stated that the rating was reduced to reflect the fact that the report of the first module of the COVID Inquiry has been published, and that the Urology Inquiry has completed. She agreed to provide a rationale **(Action 1 – Ms Scott)**. *At this point Mr Wilson joined the meeting.*Mr Clayton noted that within Risk 74, relating to the Integrated Care System (ICS), there is reference to PHA operating *ultra vires* and said that it would be helpful to understand what that means. He added that he was not convinced that there is joint working and asked for more clarity on the precise nature of the risk. For Risk 75 relating to pandemic preparedness, he noted reference to the new Pandemic Preparedness Group and said that as this is a significant development, it may be useful to have a briefing on that. He added that the risks around health protection consultants and screening have been covered previously. Mr Stewart said that for the risk on screening, there is a reputational risk for PHA because of the ongoing challenges in terms of how PHA conducts its quality assurance function and therefore it should be reviewed.Members **APPROVED** the Corporate Risk Register.*Finance and Corporate Services Directorate Risk Register as at 30 September 2024 [GAC/37/10/24]*Ms Scott explained that this directorate risk register has been reviewed so it now includes elements relating to Finance, while other areas have been removed as they are the responsibility of the new Chief Executive’s Office.Ms Scott outlined that staffing has been an issue for some time but PHA is doing all it can to ensure it has good staff who are adequately trained. She added that there is a new risk relating to IT equipment and this has been flagged with both BSO and the Department. She advised that some of PHA’s current infrastructure is coming to the end of its life so there needs to be investment. She said that the risk is around the interim period and transition to any new systems. Mr Stewart asked how immediate the risk is. Ms Scott replied that it has been rated as “high” saying that while PHA is being supported now, its requirements may not be prioritised while there is a transition to any new system.Mr Clayton commented that the risk around capacity within information governance is growing in its significance as PHA is now handling more data. He noted that consultants had been brought in previously to help with work in health protection.Mr Clayton said that staff not having access to a laptop is a big issue and asked if it would impact on their ability to get trained. Mr Murray replied that there is not a direct correlation. He explained that while there is a supply of laptops, they are nearing the end of their warranty period. He added that if a laptop is not used for three months it becomes inactive and needs to be rebuilt by IT. He advised that if Line Managers submit requests on time, new staff should have laptops for when they commence and be able to get their training started.Members noted the Finance and Corporate Services Directorate Risk Register.*Complaints Report [GAC/39/10/24]*Ms Scott advised that one complaint was received during the second quarter of this year. She said that this Report now includes information on compliments and it is encouraging to see positive feedback. She explained that there is currently one ongoing claim issue and one claim that has been closed.Members noted the Complaints Report. *Review of Standing Orders and Standing Financial Instructions [GAC/40/10/24]*Ms Scott said that a review has been completed of PHA Standing Orders and Standing Financial Instructions and has been brought for approval.Mr Clayton asked why a previous paragraph in the Standing Financial Instructions had been removed. Ms Scott explained that this is no longer relevant as PHA has its own Director of Finance.Mr Stewart noted that within Standing Orders, there is a reference to PHA providing “professional leadership”, and thought that this should read “professional advice”. Mr Wilson suggested that this wording may have come from the 2011 HSC Framework Document, but he would clarify this **(Action 2 – Mr Wilson)**. Mr Stewart said that he was considering this from the perspective of Public Inquiries. Mr Wilson outlined that in practice PHA would have a leadership role as the Chief Executive is a member of the Permanent Secretary’s HSC Performance and Transformation Executive Board.Mr Stewart said that within Standing Financial Instructions, he would have a concern around the continuing reference to joint commissioning, particularly in the current circumstances where PHA does not know what its actual role is. He added that PHA needs to be clear about this. Mr Wilson advised that it was his understanding that there has been an amendment to certain sections of the 2009 Reform Act and that the PHA still has a joint statutory responsibility in the commissioning process. He undertook to review this further outside of the meeting **(Action 3 – Mr Wilson)**. Ms Scott agreed that if PHA’s role has changed, there needs to be a review to better understand the impact on PHA. Mr Clayton said that it would be useful to review this before these papers are brought to the Board given that the Commissioning Plan has effectively been rolling on since 2019, ICS has been established and SPPG has been created, therefore PHA needs to query its role. Mr Irvine said that PHA should review the legislation as it is the framework which outlines what PHA’s role is. Mr Wilson advised that Ms Julie Mawhinney has been reviewing PHA’s statutory responsibilities as part of the work on the new Corporate Strategy, and although this work has not yet been signed off by DLS, he said that he could share it with members **(Action 4 – Mr Wilson)**.Subject to clarity around the points raised, members **APPROVED** the review of Standing Orders and Standing Financial Instructions.*Review of Assurance Framework [GAC/41/10/24]*Mr Stewart said that he welcomed the new layout of the Assurance Framework which he found helpful, adding that his only comment is on the wording around the development of a joint Commissioning Plan, following the earlier discussion. Mr Clayton noted that some of the areas indicate there should be biannual updates, but in practice this has not been the case. He added that the line around the Corporate Plan is showing this should be 3/4 yearly, but this should be reviewed. He queried whether the update on the use of external consultants should also come to this Committee. Ms Scott said that she no issue with bringing that update.Members **APPROVED** the review of the Assurance Framework which will be brought to the PHA Board on 18 October.*Raising A Concern in the Public Interest (Whistleblowing) Policy 2024 [GAC/42/10/24]*Mr Stewart noted that this Policy had been updated in the light of new guidance. Mr Clayton advised that he had had some involvement in the new guidance through his role in Unison. He noted that there is not yet a nominated Non-Executive Board member, but acknowledged that this is under consideration by the Chair. He commented that while the appendices were very helpful, some of them should be presented more upfront. He asked whether PHA has a Public Interest Advocate. Ms Braithwaite said that she was not sure if there was a nominated individual. Mr Clayton said that it would be helpful to include timescales for any investigation as individuals would wish to know how quickly any matters raised will be dealt with.Members **APPROVED** the Raising A Concern in the Public Interest (Whistleblowing) Policywhich will be brought to the PHA Board on 18 October. |
| **55/24** | **Item 7 – Internal Audit** |
| 55/24.155/24.255/24.355/24.455/24.555/24.655/24.755/24.855/24.955/24.1055/24.1155/24.1255/24.13 | *Internal Audit Progress Report [GAC/43/10/24]*Mrs McKeown advised that within the Progress Report, there is one audit report, which relates to the audit on Board Effectiveness, for which a satisfactory level of assurance was given. She noted that the outcome was different from the previous audit and that there were some recommendations, particularly around the need to develop a new Corporate Plan. She advised that management had accepted the recommendations.Mr Stewart said that on behalf of the Non-Executive Directors, he was delighted to see this report. He acknowledged that the Corporate Plan does need to be looked at. Mr Clayton commented that the report was fair and something that the whole Board should be cognisant of. Mr Irvine said that the report reflects the current thinking of the Board.Members noted the Internal Audit Progress Report.*Mid-Year Follow up on Outstanding IA Recommendations 2023/24 [GAC/44/10/24]*Mrs McKeown reported that 78% of PHA’s outstanding audit recommendations are fully implemented with 16 recommendations still partially implemented and four not yet implemented. She outlined that there are 20 recommendations which are past their due date for implementation and while many of these are in progress, 12 of the 20 are from reports where there was a limited level of assurance given. She noted that four of these recommendations fall within screening, three of which are from 2022/23 and one from 2017/18. She said that a proposal was due to be brought to the Committee by management around closing the recommendation from 2017/18, but it is not quite ready. Of the four outstanding recommendations relating to procurement, all of these are from 2023/24. She added that the other outstanding recommendations relate to business continuity, finance and management of contracts with the community and voluntary sector.Mr Stewart said that he and the Chief Executive would like to see the number of outstanding recommendations be reduced. He added that a 78% completion rate is common across the HSC and that the Chair of the Department’s Audit and Risk Committee had recently written to the Chairs and Chief Executives of all HSC bodies saying that this is an area that requires attention. He said that the Chief Executive is concerned about this and that some of these issues need to be closed down.Mr Irvine commented that in any organisation, focus may be lost on older audit recommendations, and it is important that this does not happen. He said that while 22 open recommendations is not a large number, it is a bigger problem when some of them are long standing. He noted that many are in the areas of contracts. Mr Stewart said that the Planning, Performance and Resources Committee is looking at matters relating to procurement and that Ms Scott is taking forward a mapping exercise. Ms Scott advised that PHA has a focus on all outstanding audit recommendations, but some of the older ones will require complex solutions. Mr Stewart said that he and the Chief Executive had felt that a completion rate of around 90% was where PHA needed to be and that it is important the Committee is satisfied that things are progressing.Mr Clayton said that it will be useful to see the proposal at the next meeting outlining why the long outstanding recommendation around the Newborn Screening Programme should be closed down.Mr Clayton noted that the issues around the Family Nurse Partnership appear to be worsening and that the IT system now presents a cyber security risk. He suggested that as validation is a key element of this programme, there should be an update on this at the Board meeting **(Action 5 – Ms Scott)**.Members noted the Mid-Year Follow up on Outstanding IA Recommendations.*Shared Services Audits [GAC/45/10/24]*Mrs McKeown advised that there was one Shared Services audit which she was content for members to note.Members noted the Shared Services Audits report.*Mid-Year Assurance Statement to the Public Health Agency from the Head of Internal Audit [GAC/46/10/24]*Mrs McKeown said that the Mid-Year Assurance Statement summarised the areas she had covered earlier.Members noted the Mid-Year Assurance Statement to the Public Health Agency from the Head of Internal Audit. |
| **56/24** | **Item 8 – Information Governance**  |
| 56/24.156/24.256/24.356/24.456/24.556/24.656/24.756/24.8 | *Information Governance Action Plan 2024/25 [GAC/47/10/24]*Ms Scott advised that the Information Governance Steering Group met last month and that this is its Action Plan. She highlighted that the targets rated “red” relate to new starts, induction and training. She explained that while a number of actions have been taken, it is taking time for them to be embedded. She said that PHA is looking again at its systems to ensure that the data it holds is secure.Mr Clayton asked about training for new starts and how compliance can be increased. He noted that the induction “day” did not result in all new starts completing their training so this requires further thought. However, he acknowledged that uptake of cyber security eLearning is increasing.Mr Clayton noted that Internal Audit had made a recommendation about keeping Information Asset Registers up to date and that there was an issue because some staff indicated they required training to be able to complete this. He said that therefore the target could not be rated “green” because not all returns were made for 2023/24. Mr Stewart asked what action was to be taken and Mr Clayton replied that a workshop was to be arranged for staff. Mr Clayton reiterated that the target for 2023/24 should be rated “red”.Members noted the Information Governance Action Plan update.*Data Protection Confidentiality Policy [GAC/48/10/24]*Ms Scott advised that the Data Protection Confidentiality Policy has been updated. She said that Data Protection is a complex area so PHA can avail of support from the Directorate of Legal Services when required.Members **APPROVED** the Data Protection Confidentiality Policy.*Access to Information Policy [GAC/49/10/24]*Ms Scott advised that the Access to Information Policy has been updated.Members **APPROVED** the Access to Information Policy. |
| **57/24** | **Item 9 – Finance**  |
| 57/24.157/24.257/24.357/24.457/24.557/24.6 | *Fraud Liaison Officer Update Report [GAC/50/10/24]* Ms Scott said that she was delighted to welcome Ms Karen Brown as PHA’s new Fraud Liaison Officer following the transfer of this role from SPPG. She reported that there are no new cases of fraud.Members noted the Fraud Liaison Officer Update Report.*Anti-Fraud and Anti-Bribery Policy Statement & Response Plan [GAC/51/10/24]*Ms Scott advised that a new Anti-Fraud and Anti-Bribery Policy has been developed and is based on good practice.Mr Stewart said that he had one issue with the Policy, and that related to the statement that the Director of Finance and Corporate Services had discretion regarding the reporting of fraud cases to the PSNI and he did not feel that that was appropriate. Ms Scott agreed and said that she was content to update that **(Action 6 – Ms Scott)**.Mr Clayton said that he was content with the Policy but asked about the frequency of training and uptake. Mr Bailie advised that Finance training for budget holders has been ongoing and there is an element of that which relates to fraud. He added that there has been a good uptake of the fraud eLearning module.Subject to amendment, members **APPROVED** the Anti-Fraud and Anti-Bribery Policy Statement and Response Plan. |
| **58/24** | **Item 10 - External Auditor’s Report to those Charged with Governance (Final) [GAC/52/10/24]** |
| 58/24.158/24.258/24.358/24.4 | Mr McCance said that members will have seen the draft Report and he thanked the PHA team and Cavanagh Kelly for their work. He reiterated that PHA accounts were certified with an unqualified audit opinion. He noted that there was one recommendation pertaining to holiday pay which is an issue right across the HSC. Mr Stewart said that PHA needs to ensure that there is accurate recording. Mr Clayton declared an interest at this point as Unison is supporting some of the individual affected in this matter.Mr Clayton asked about unused vaccine stocks as this was highlighted in a previous Internal Audit report. He noted that these can be significant and asked if there was a link to the write offs. He also asked if the new Vaccine Management System will ensure that this does not happen in future. Mr McCance explained that PHA is required to report these as a loss, and that last year the figure was more easily quantifiable. Mr Stewart noted that there is always going to be wastage because it is difficult to project uptake. Mr McCance said that it is important that there is disclosure in the accounts.Members noted the External Auditor’s Report to those Charged with Governance. |
| **59/24** | **Item 11 – PHA Mid-Year Assurance Statement [GAC/53/10/24]** |
| 59/24.159/24.259/24.359/24.459/24.559/24.659/24.7 | Ms Scott said that this Statement is commissioned by the Department and reflects many of the issues that have been discussed at today’s meeting. She said that it outlines findings from both Internal and External Audit. She noted in particular that the issue around payments from the Special EU Programmes Body (SEUPB) should be resolved by the end of the year.Ms Scott advised that there is an update on issues which were highlighted in the previous year, principally around the challenging financial environment, management of contracts with the community and voluntary sector, staffing and resilience, and matter pertaining to HSCQI. She added that PHA is also flagging up Public Inquiries and the current pause on campaigns. She commented that PHA would draw a link between reduced vaccine uptake and the absence of a campaign. She said that there is also reference to work in the area of cervical screening.Ms Scott said that she would recommend that the Chief Executive would sign this Statement.Mr Clayton asked about the wording in the section on RQIA reports and clarity on what this related to. Ms Scott undertook to get clarity on that **(Action 7 – Ms Scott)**.Mr Clayton noted the section on cervical screening and the reference to PHA obtaining an external review of its quality assurance function. He acknowledged that this has been a changing position, but asked if the narrative could be brought up to date **(Action 8 – Ms Scott)**.Mr Stewart asked whether the Chair had written to the Minister with regard to campaigns given the Board’s concerns around a pause in campaigns. Mr Wilson advised that a letter was drafted and sent to Mr Peter Toogood, and that it was accompanied by an evidence paper outing the effectiveness of campaigns. He added that the Department advised PHA that the pause in campaigns was continuing, with the only exception being for campaigns that relate to significant public health issues. He said that all of PHA’s campaigns relate to significant public health issues. Mr Stewart said that he would raise this again at the Board meeting as this refusal does not align with the new Minister’s focus on public health. He asked if the letter sent by PHA could be circulated to members **(Action 9 – Mr Wilson)**.Subject to minor amendments, members **APPROVED** the Mid-Year Assurance Statementwhich will be brought to the PHA Board on 18 October. |
| **60/24** | **Item 12 - Contract Assurance Process 2024/25 Report [GAC/54/10/24]** |
| 60/24.160/24.260/24.360/24.4 | Mr Murray explained that each year PHA asks organisations to submit a range of documentation and that this process has begun for 2024/25. He said that the documentation received to date has given PHA a reasonable assurance that organisations are financially stable. He noted that there are a few organisations which have yet to submit their paperwork and this is being followed up. He explained that this exercise is one part of a process, and that there is also ongoing monitoring.Mr Stewart said that the report was interesting and asked whether PHA selects a random sample to ensure the accuracy of the information provided. Mr Murray replied that PHA reviews all the documents it receives with the Finance team reviewing bank statements, but as part of a more in-depth process PHA would visit up to 10 organisations per year to carry out an in-depth review of their monitoring processes. He added that in the event of any issues there is an Escalation Policy.Mr Clayton said that it would be useful for the Committee to be made aware of those rare occasions when the Escalation Policy has had to be applied and why. Mr Murray explained that there is a policy whereby issues should be raised with the Contract Manager, but for issues of reputational damage, they would have to go directly to the Director or Chief Executive. He agreed to share the Policy with members **(Action 10 – Mr Murray)**. He added that the Policy is part of a package of procedures that PHA has in place.Members noted the Contract Assurance Process 2024/25 Report. |
| **61/24** | **Item 14 - Draft Governance and Audit Committee Self-Assessment [GAC/56/10/24]** |
| 61/24.161/24.2 | Mr Stewart advised that the Non-Executive members had met in advance of this meeting and had completed this questionnaire with their agreed responses.Members **APPROVED** the Governance and Audit Committee Self-Assessment. |
| **62/24** | **Item 15 – SBNI Declaration of Assurance [GAC/57/10/24]** |
| 62/24.162/24.2 | Ms Scott advised that she had met with the Director of Operations in SBNI and that the contents of this Declaration of Assurance reflected those discussions.Members noted the SBNI Declaration of Assurance. |
| **63/24** | **Item 13 - Joint Emergency Planning Annual Report 2023-2024 [GAC/55/10/24]** |
| 63/24.163/24.263/24.363/24.463/24.563/24.663/24.763/24.863/24.963/24.10 | *Ms Mary Carey joined the meeting for this item*Ms Carey presented the Report and explained that this is a joint report produced by PHA, SPPG and BSO.Mr Stewart commented that the last year had been an active one in terms of the number of test exercises undertaken. He said that he had two comments relating to the Report, first the lack of engagement from Trust Directors at key committee meetings, and second an understanding of why PHA would be involved in storm planning.Mr Clayton noted that the training budget continues to be frozen at the same level as it has been for 12 years and he felt that it was useful that the Report had highlighted how much had been spent over and above the budget on training. He said that this was an issue that the Board as a whole should look to take action on. While it is not on the Corporate Risk Register, he asked if it was on the directorate risk register.Ms Carey advised that while PHA manages the training budget, it is a Department budget and covers training for PHA, SPPG, BSO and the six Trusts and that it has not been raised for 10 years. She said that this matter has been raised at the Health Emergency Planning Forum and various letters have been written to the Department. She added that there should be a 3-year rolling programme for training and that Northern Ireland should have an Emergency Planning conference because it is lagging behind the other devolved administrations in that regard. She highlighted that part of the issue is the changeover of staff.Ms Carey said that a gap analysis is being carried out in terms of training. She added that there is an expectation that for Chemical, Biological, Radiological, Nuclear (CBRN) preparedness, each UK country will deal with its own training, but this carries a risk for Northern Ireland. She said that pandemic preparedness is a priority and requires a training programme, and that it is not appropriate that Trusts have to identify funding for this from their own budgets. Mr Stewart advised that the Committee is supportive of this view and that this lack of training and investment needs to be raised with the Minister directly. He added that the Committee will recommend that the Chair writes to the Minister. Mr Wilson advised that when AMT had considered this Report, the area of training was discussed and it was agreed that following an analysis of training needs across the system, a business case should be developed to fund this and be presented to the Department. He added that AMT is keen to see this taken forward.Mr Stewart asked Ms Carey about Trust engagement. Ms Carey said that the Trusts are heavily engaged in the multi-agency groups and they also consistently raise the issue of training. She advised that The Executive Office is leading on the Northern Ireland training programmes explaining that it is a multi-agency programme and health has a number of places on it.Mr Irvine asked if PHA’s role is as a co-ordinator or a director. Ms Carey replied PHA has a joint responsibility. Mr Irvine said that the Report needs an Executive Summary which highlights the perceived issues being faced by PHA and any possible solutions. Mr Stewart added that it might be useful to indicate the key risks that PHA has encountered over the last year so that PHA can focus on those areas which are its responsibility. He asked whether PHA is better prepared for events this year than it was last year and if not, what does PHA need to do.Ms Carey advised that this Report is for the period up to April 2024, and that there has been a lot of work carried out in relation to training, including mandatory training for all staff. She added that PHA has worked with SPPG and BSO as well as the Trusts and has submitted plans to the Pandemic Preparedness Board. She said that PHA has to look at how it can build resilience and engage with the national programme for training. Ms Scott advised that PHA is being asked to bid for additional resources, but it has to get this onto the radar of the Department. She said that there is good work going on, but there remains a lot to do. Mr Stewart said that the Board would support PHA in pushing this up the agenda.Mr Stewart thanked Ms Carey for the Report and for all the work that is carried out by her team in this area. He said that he will be raising the issue of training at the Board meeting. Ms Carey noted that at present, SPPG and BSO do not have emergency planners, therefore the weight of work in this area is predominantly falling on PHA. She said that PHA is required to undertake 10 exercises per year, but it is not resourced to do so. Mr Clayton said that it would be useful for the Board to be aware of this. Mr Wilson commented that PHA should not lose sight of the recommendations from Module 1 of the COVID Inquiry as there is an expectation from the Inquiry that there will be a response to these within 6 months and implementation within a further 6 months. Mr Stewart said that this is the time for PHA to bid for additional resources.Members **APPROVED** the Joint Emergency Planning Annual Report. |
| **64/24** | **Item 16 – Any Other Business**  |
| 64/24.1 | There was no other business. |
| **65/24** | **Item 17 – Details of Next Meeting** |
|  | *Thursday 13 February 2025 at 10am**Fifth Floor Meeting Room, 12/22 Linenhall Street* |
|  | Signed by Chair: ­­­­­­­­­­­­­­­­Joseph StewartDate: 13 February 2025 |