Northern Health and Social Care Trust

Audit Committee
Minutes
25th May 2022 at 9am, Via Zoom

Present: Mr Paul Corrigan, Non-Executive Director Chair
Mr Billy Graham, Non-Executive, Director
Mr Glenn Houston, Non-Executive Director

In Attendance: Mr Owen Harkin, Director of Finance
Mrs Nuala McAuley, Assistant Director of Finance
Mrs Catherine McKeown, Internal Audit BSO
Mr David Charles, Internal Audit BSO
Mrs Sinead OKane, Assistant Director of Governance
Mr Stephen Knox, Northern Ireland Audit Office
Mr David McCann, RQIA
Miss Eimear McGarry, BSO Regional Accounting Trainee

	ACTION
1. Apologies Apologies were noted from Carol Blee, DoH Sponsorship Branch	
2. Conflicts of Interest There were no conflicts of interest declared at the beginning of the meeting. Mr Corrigan asked should any arise please make it known through the course of the meeting.	
3. Minutes of previous meeting: **3.1. 21st February 2022** The minutes of the meeting 21st February 2022 were agreed as an accurate record.	
4. Matters Arising The action log was discussed and updated as appropriate with actions closed off. **5. Visit by Directors – Internal Audit Reports** Mr Corrigan welcomed Directors to the Committee and thanked them for their attendance. **Care Management 21/22** Dr Corr and Mrs Spence thanked the Committee for the opportunity to come and discussed the recommendations from the report. Dr	

Corr noted a number of the recommendations that were on going but advised the team are confident they will meet the deadlines. Dr Corr highlighted recommendations 1.1 and 3.2, which are linked together. Dr Corr noted this area is challenging as it spans over a number of divisions and disciplines. Dr Corr noted they all record Care Management contacts or reviews differently on a variety of Information system programmes, the group continues to explore a solution that will meet the needs of all Divisions.

Mrs Spence noted the reinvigorated Care Management group in the Trust and that this will provide great oversight bringing all divisions together.

Mr Graham enquired how other Trusts were managing this; Dr Corr advised three other Trust were in similar positions. Mr Houston asked if encompass would solve these issues. Dr Corr noted she was hopeful that it would, however given the timescales for this, there would need to be interim arrangements put in place.

Dr Corr felt that arrangements could be put in place to meet the minimum threshold for Internal Audit colleagues but continued work would be needed to future proof this going forward.

Mrs McKeown confirmed this is a regular adult on a 3-4 yearly basis. Mr Corrigan thanked Dr Corr and Mrs Spence for the presentation.

Absence Management

Mrs Burns attended the Committee on behalf of Mrs Reid. Mrs Burns provided an update on the work ongoing within HR. Mrs Burns advised the Committee on structure changes within HR that has moved the attendance management team under her remit with Employee Relations; this will allow a case management approach going forward.

Mrs Burns advised that the Corporate Absence meeting would now be chaired at Assistant Director level with all Divisions represented. The Committee noted system issues concerning recording of homecare staff. Terms of reference have been drafted for a project group and a meeting arranged next week to discuss with the Director of Operational Issues.

Complaints Management 21/22

Mr Corrigan welcomed Mr O'Reilly to the Committee. Mr O'Reilly presented the action plan advising that he is content there is now corporate oversight of all complaints. Mr Reilly noted a number of the recommendations that have since be closed off. Mr O'Reilly also noted the recommendation around the contents of complaint responses and ensuring these answer queries and that the language included is appropriately user friendly, Mr OReilly issued a memo to all Directors confirming this.

Mr Graham enquired about Dom Care complaints and where these are reported. Mr Houston provided an update from Equality, Engagement, Experience and Employment Steering Group noting the more detailed reports that are tabled there. Mr Corrigan thanked Mr O'Reilly for his attendance at the Committee and wished him well for his upcoming retirement.	
6. Terms of Reference The terms of reference were reviewed by the Committee and only minor amendments were noted. The Audit Committee approved the terms of reference.	
7. Draft Governance Statement 2021/22 (Pgs 51-92 of the Annual Report) Mr Harkin presented the draft Governance statement. Mr Harkin advised the report was the usual format. Mr Harkin noted the new divergences including HRPTS administration, Sickness Absence, Appraisal and flu uptake. Mr Harkin advised the Committee he was happy to take comments on the report. Mr Graham enquired about the HRPTS issue and if the Non-Executives were sighted on this, Mr Harkin advised is had been discussed at Trust Board and that although this is a significant risk for the organisation the teams have been working very hard to ensure Trusts & Payroll have contingency's in place. Mr Harkin advised the final draft would be presented at June Committee. **8. Draft Annual Report & Accounts 2021/22** Mr Harkin presented the report to the Committee; again this follows the same standard report. Discussion took place with regards to the performance table. Mr Graham enquired if we are obliged to include this in the report. Mr Harkin agreed to seek comparisons across the region. Mr Houston felt that some regional commentary might also be helpful. Mr Harkin agreed to review and take forward. Mrs McAuley presented the draft accounts for 2021/22 to the Committee noting the remuneration report all mandated information. Staff are aware of what will be published. Mrs McAuley noted a relative increase to staff costs of 17K with 11,195 wte staff; the Trusts management costs were also noted with salaries representing 57% of spend in year.	**Mr Harkin**

Mrs McAuley advised that the Charitable Trust Funds accounts were consolidated into the Annual Report and Accounts. The losses and special payments were noted, this included losses of stores equipment that included COVID items. Mrs McAuley noted the Financial Statements section. The Committee noted that spend had hit £I billion for the first time, with expenses up £18million in respect of Care from Non HSC bodies i.e. reflecting agency spend. Mrs McAuley noted the increase of £3million in spend against Elective Care waiting lists. A number of the note pages were highlighted to the Committee including notes 3, 4, 8 and 14. Mrs McAuley highlighted note 15 included the change in the discount factors balance, which drove an increase in the liability of £13million. Mrs McAuley confirmed the outturns of the RRL & CRL, which both came in under budget.	
9. Draft Charitable Trust Funds Annual Report and Accounts 2020/21 Mrs McAuley advised the accounts have been reviewed and approved at the Charitable Trust Funds (CTF) Committee. Mrs McAuley presented the draft CTF accounts to the Committee. Mrs McAuley noted 26 funds have closed to new donations as part of the on-going streamlining process. A new fund was opened with the approval of the CTFAC during the year in respect of funds from NHS Charities towards the development of the funds themselves and this will contribute towards the High court Costs of streamlining, which is necessary in advance of registration with the Charities Commission for NI. Mrs McAuley advised within the financial review section that 52% of the overall funds are currently invested. Bonds balance of £100K was noted. Mr Houston provided an update to the Committee noting the challenges around spend on both the £3m DoH donation and CFT funds. Mr Houston noted once the new streamlining process finishes with the funds this should help with spend. Mr Graham enquired if there was an upper limit on spend approvals within the Trust. Mrs McAuley advised normal controls are in place with a QA process in place before CEX sign off. Mr Knox enquired why a high court approval was required for the consolidation of the funds. Mr Harkin explained as fund were given with specific intended for specific wards or reasons any change would require their approval.	

10. Update on RTTCWG 2021/22 Mrs McAuley presented the update to the Committee and considered all items closed off with nothing of concern to note. Mrs McAuley noted NIAO would review all issues as part of the year-end audit. Mr Corrigan thanked Mrs McAuley for this report it was a helpful document and ask his thanks be passed on to the team. **11. Draft Audit Committee Annual Report 2021/22** Mr Corrigan presented the report, thanking the team for puling this together. Mr Corrigan advised this was of the same running order as the last few years and welcomed and comments or amendments. This will be tabled at June meeting again for approval.	
12. **Internal Audit Business**	
12.1. Progress Report 2021/22 Mrs McKeown presented the progress report to the Committee; the table of progress was noted. Mrs McKeown presented the Private Practice and Change of Status Audit, this received a limited level of assurance with 4 significant findings noted, and management accepted the recommendations. Mr Graham expressed his concerns around this report given the sensitivities around waiting lists currently. Mr Houston felt it was particularly important that priority status be recorded on the system. Mr Harkin is confident that processes will be in place going forward. Mr Graham felt that job plans have a key role in this and staff declaring any private interests. Mrs McKeown moved on to the Audit into Procurement and Management of Domiciliary Care Contracts 21/22. This Audit again had a limited level of assurance however Mrs McKeown advised this was a much-improved limited assurance since the previous report. The Committee noted the priority 1 recommendation with regards to procurement and 2 significant finding noted. Mr Graham enquired if the compliance team were under resourced. Mr Harkin advised he felt the work plan for these individuals needed to be reviewed and on a risk-based approach. Mr Harkin noted that the region is about to go to tender but highlighted the risks around this. Mrs McKeown presented the Audit on Management of Client Monies; this had a satisfactory assurance for all facilities with the exception of 1 facility. A number of key findings were noted and management accepted the recommendations.	

Mr Graham enquired who reviews our homes. Mrs McAuley confirmed her teams had previously visited the homes on a risk-based approach. This work had been suspended due to Covid but is due to recommence during 2022/23. Mrs McKeown moved to the advisory work around assurance mapping, the Trust identified 1 corporate risk and mapped this out. Risk 902 was selected Risk of significant harm to Children and Young People (CYP) remaining at home when social work outcome is for a care placement. Mr Houston enquired on the numbers of CYP in the Trust are remaining at home and what steps have been take to provide assurance around this. Mr Harkin to discuss at Executive Team and a written update will come to Assurance Committee. Mr Charles noted the Review of the procurement strategy of Adalimumab 21/22; the recommendation was noted by the Committee. 12.2 Year End Follow Up Mrs McKeown presented the report noting 76% of recommendations closed off. 12.3 Shared Services Update Mrs McKeown presented the report noted the level of assurance across the 3 teams. Within the Payroll section, 4 areas remain with a limited level of assurance. The Committee expressed their disappointment that this was still limited assurance. 12.4 Head of Internal Audit Annual Assurance Mrs McKeown presented the report to the Committee; the summary of the year was noted. KPIs were noted. Mrs McKeown advised a satisfactory level of assurance but importantly noted the number of limited and the 1 unacceptable report this year. Mr Corrigan felt this was a fair summary and thank Mrs McKeown and the team for their hard work and support over the last year. 13. Trust Summary of Year End Internal Audit Recommendation Position Mrs McAuley presented the report. This was noted by the Committee. 14. Draft Internal Audit Recommendations Rolling Action Plan Mrs McAuley presented to the committee, noting that table 1 explaining the process. This was noted by the Committee. The Audit Committee felt this was a good process.	**Mr Harkin**
15 External Audit Business **15.1 21-22 audit progress (verbal update)**	

	Mr Knox provide an update to the Committee advised the Audit was ongoing and was progressing as planned and that NIAO were on track for the planned meeting of 15th June. Mr Knox provided an update in relation to the Clinical Excellence - NIAO are awaiting the legal documents for this and that they will be following up on the holiday pay liability.		
16	**Register of STAs** The register of STAs was noted by the Committee.		
17	**Circular Summary** The circular summary was noted by the Committee.		
18	**Annual Counter Fraud Reporting** 18.1 Fraud Liaison Officer Report The report was noted by the Committee, due to time constraints Mrs McAuley advised that any questions or queries in relation to the report could be emailed through to her. **18.2 CFPS Report** The report was noted by the Committee.		
19	**Directors' Attendance** The schedule of Directors attendances were noted by the Committee, any further Internal Audit reports will be added as appropriate.		
20	**Any Other Business** There was no additional business discussed.		
21	Date of Next Meeting: **15th June 2021, 9pm, via Zoom** **13th October 2021, 9am via Zoom**		