Northern Health and Social Care Trust

Audit Committee
Notes

Monday 19th June 2023 at 2pm
Hybrid Meeting Boardroom Trust HQ/MS Teams

Present: Mr Paul Corrigan, Non-Executive Director (Chair)
Mrs Lesley Mitchell, Independent external

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
Mr Paul Jameson, Internal Audit BSO
Mr Stephen Knox, Northern Ireland Audit Office
Mrs Colette Kane, Director, Northern Ireland Audit Office
Ms Megan West, Assistant Director of Governance
Mr Chris Young, Audit Manager, Internal Audit BSO
Mr Alan Campbell, Financial Governance, NHSCT
Mrs Una McKenna, Financial Governance, NHSCT
Mr Ruairi Pollock, Financial Assessments, NHSCT
Miss Colette Carey, Office Manager
Mrs Jacqui Reid, Director of Human Resources, OD & Corporate Communications
Mrs Suzanne Pullins, Executive Director of Nursing, Paediatrics, Women's Services & Corporate Support
Mr Kevin McMahon, Divisional Director of Surgical and Clinical Services
Mr Neil Martin, Director of Strategic Planning, Performance and ICT

1.	**Apologies** Apologies noted for Mr Glenn Houston, Non-Executive Director.		**ACTION** **All**
2.	**Conflicts of Interest** There were no conflicts of interest declared at the beginning of the meeting. Mr Corrigan asked members to make him aware of any conflict of interest and commented that should one arise during the meeting to make it known.		**All**
3.	**Minutes of the Previous Meeting**		
	3.1	The minutes of the meeting of 10th May 2023 were agreed an accurate record and approved by the Committee.	
4.	**4.1**	**Action Log**	
	The action log was discussed and the updates noted by the Committee.		

5.	**Directors/AD Presentations** **5.1 Radiology 2022/23** Mr Corrigan welcomed Mr Mahon to the Committee. Mr McMahon presented an update on Radiology audit which was limited in respect of plain film X-Ray in EDs and MIU and procurement of Radiology WLI related spend. Mr McMahon noted one priority 1 recommendation and four priority 2 recommendations. The first recommendation was the Operator Duty Function, Mr McMahon advised the Committee all substantive Emergency Nurse Practitioners (ENPs) are entitled to evaluate as operators and a process has been conducted to ensure staff training to allow them continue to undertake clinical evaluations. In relation to recommendation 2.1 Mr McMahon advised the Trust has repeatedly tried to engage with SPPG colleagues to progress the regularisation of spend in respect of WLI for radiology and other specialties. Mr McMahon noted this is a regional issue. Mrs McAuley advised the issue has been highlighted to directors and correspondence has been issued to SPPG to outline the risks. Unfortunately the Trust has not received a response from SPPG and therefore is not in a position to give an implementation date for this recommendation. Mr McMahon confirmed assurances are in place for recommendation 3.1 and that weekly feedback is completed and a twice yearly audit report on discrepancies has been scheduled. Mrs Mitchell queried if recommendation 5.1 had been implemented, Mr McMahon confirmed, that consultants receive official x-ray reports for sign off. Mrs Mitchell suggested amending the narrative to reflect this. Mr Corrigan thanked Mr McMahon for his presentation and enquired if ENP's post are resourced outside of the organisation, Mr McMahon didn't believe so and noted these are held by internal core staff, Mr McMahon to confirm. Mr Corrigan asked Mr McMahon which forum the clinical evaluations are reported at, Mr McMahon confirmed the report is tabled at Safety and Care Quality Group. **5.2 Payments to staff 21/22 – follow up** Mr McMahon provide an update on the payments to staff audit which had previously been discussed at the Committee. Mr McMahon explained to the committee that the recommendations process had begun however due to Industrial Action these have been paused. Mr Corrigan acknowledged the difficulties progressing these recommendations due to Industrial Action and noted that the Committee recognises the work that has been implemented to date.	**Mr McMahon**

	Mrs Mitchell enquired about recommendation 4.1 'The production/review of reports similar to those used by Internal Audit to identify obvious outliers' and that Finance do not have the resource to implement. Mrs McAuley provided an update to the Committee and advised she has been liaising with Payroll Branch who have been piloting a process to flag data errors in advance of going to payroll. Mrs McAuley noted she will provide a further update at the next committee.	**Mrs McAuley**
	Mrs McKeown noted that this was a regional recommendation and that she would advise what action other Trusts were taking.	**Mrs McKeown**
	5.3 E-Rostering	
	Mr Corrigan took the opportunity to welcome Mrs Pullins to the Committee. Mrs Pullins advised the E-Rostering audit has 1 priority 1 recommendation, 2 priority 2 recommendations and 2 priority 3 recommendations. Mrs Pullins discussed recommendation 1.1 'Delivering contracted hours', she advised a working group was established and a review has been undertaken. Mrs Pullins noted a manual adjustment will be completed and that monthly monitoring will also be implemented. Mrs Mitchell enquired if the Trust has engaged with staff and Trade Unison colleagues. Mrs Pullins advised HR colleagues are members of the working group. Mrs Pullins informed the Committee that correspondence was issued to managers to meet the recommendation set out in point 2.1. Mrs Pullins advised that the supplier of Allocate has confirmed that the functionally recommended by IA in 2.2 is available and will be implemented to users, it is anticipated that the project to implement the Allocate solution will be complete by 31st March 2025. Mrs Pullins noted that the Electronic Roster Management Policy referred to in recommendation 5.1 is continuing to progress and will be reviewed in the coming months in line with the new eRoster System. Mr Corrigan and Mrs Mitchell thanked Mrs Pullins for her presentation. Mr Corrigan enquired about the timeline for the new eRoster System roll-out, Mrs Pullins explained both systems will work in parallel until the launch in July 2025.	
	5.4 Core Mandatory And Professional/Role Dependent Training 2022/23	
	Mr Corrigan welcomed Mrs Reid to the Committee meeting and noted the Core Mandatory And Professional/Role Dependent Training Audit Report had received a limited assurance outcome.	

	Mrs Reid began her report by advising there was 7 priority 2 recommendations. Mrs Reid advised recommendation 1.1 ‘Dashboard and reporting to EEEE should be updated to report training against all 8 mandatory training courses’ is on target for the end of March 2023 however Mrs Reid noted that reporting arrangements for the 5 areas currently reported on requires significant manual data manipulation. Mrs Reid advised that a new interim data management system will enable collaborate working with regional colleagues to explore options to provide compliance based information for all 8 core mandatory training courses. Mrs Reid updated the Committee on the promotion of Statutory and Mandatory training. Mrs Reid noted this tabled at Trust Board, SMT and communicated via broadcasts and staff meetings. Mrs Reid advised a training update will be taken to divisional SMT/DMT, People and Culture meetings on a periodic basis as opposed to sharing as a standing agenda item. In relation to recommendations 3.1; Mrs Reid advised a review of the Statutory and Mandatory training matrix commenced in November 2022 and this will continue throughout 2023/24 through the establishment of the Mandatory and Professional Training Task and Finish Group. The completion of this recommendation will then provide a basis to implement recommendations 2.1, 2.2 and 2.3. Mrs Mitchell thanked Mrs Reid for her helpful and informative update. Mr Corrigan noted his expectations around the implementation dates, that they are reflective of the amount of work involved in this labour intensive exercise.		
6.	**Internal Audit**		
	6.1	**IT Audit** Mr Corrigan welcomed Mr Jameson to present the IT Audit. Mr Jameson discussed the ICT and cyber security areas within the Northern Trust. Mr Corrigan thanked Mr Jameson for this presentation and accepted the outcome of the report was of a satisfactory assurance level.	
7.	**External Audit**		
	7.1	**22-23 Audit Update (verbal)** Mr Knox took the opportunity to thank Finance colleagues for their assistant during the audit process. **Draft Report to Those Charged with Governance (RTTCWG)** Mr Knox presented the RTTCWG report to the Committee. Mr Knox advised the letter of representation provided should be submitted with the accounts.	

	Mr Knox discussed the findings from the audit, the recommendations and target date for implementation. Mrs Mitchell enquired if there were any issues around Charitable Trust Funds, Mr Knox confirmed there were not and noted this would be reflected in the final paper. Mr Corrigan thanked Mr Knox and his team and accepted the findings of the report on behalf of Audit Committee. Mr Harkin also thanked the Northern Ireland Audit Office for their assistance this year and for previous years, noting that an external supplier would be used next year.	
8.	**Counter Fraud** **8.1 HSC Circular HSC (F) 21 – 2023 DoF Anti-Theft and Fraud Report 2020-21** The above circular was noted by the Committee. Mrs McAuley advised she will table a report on the Trust's approach to fraud prevention at the next committee meeting.	**Mrs McAuley**
9.	**Annual Report and Accounts** **9.1 Draft Annual Report & Accounts 2022/23** Mrs McAuley shared the Draft Annual Report & Accounts 2022/23. The Audit Committee recommended the final version for approval by Trust Board. **9.2 Draft Charitable Trust Funds Annual Report and Accounts 2022/23** Mrs McAuley tabled the Draft Charitable Trust Funds Annual Report and Accounts 2022/23. Mrs McAuley advised she has revised the document following comments from Mr Knox. Audit Committee approved and the final version will be tabled at Trust Board.	
10.	**Audit Committee Annual Report 2022/23** Mr Corrigan tabled the Annual Report and it was approved by the Committee.	
11.	**Proposed Timetable for Directors Attendance** Mrs McAuley advised the Committee that is are no limited audit reports pending however will review the position over the summer months and invite appropriate Directors to the October Audit Committee as required.	
12.	**Circulars Summary** Mrs McAuley advised there were no circulars for the Committee at this meeting.	

13.	**Any Other Business** There was no additional business noted by the Committee.	
14.	**Date of Next Meeting** Wednesday 18^{th} October at 2pm	