

<b>Title of Meeting</b>	Meeting of the Public Health Agency Governance and Audit Committee
<b>Date</b>	15 April 2024 at 10am
<b>Venue</b>	Fifth Meeting Room, 12/22 Linenhall Street, Belfast

**Present**

- Mr Joseph Stewart - Chair
- Mr John Patrick Clayton - Non-Executive Director
- Mr Robert Irvine - Non-Executive Director

**In Attendance**

- Mr Aidan Dawson - Chief Executive
- Ms Leah Scott - Director of Finance and Corporate Services
- Mr Stephen Wilson - Interim Director of Operations
- Mr Stephen Bailie - Head Accountant, PHA
- Mr David Charles - Internal Audit, BSO
- Mrs Catherine McKeown - Internal Audit, BSO
- Mr Ryan Falls - Cavanagh Kelly
- Mr John Irwin - NIAO
- Mr Robert Graham - Secretariat

**Apologies**

- Mr Stephen Murray - Interim Assistant Director of Planning and Business Services

**13/24 | Item 1 – Welcome and Apologies**

- 13/24.1 Mr Stewart welcomed everyone to the meeting. Apologies were noted from Mr Stephen Murray.
- 13/24.2 Mr Stewart welcomed Ms Leah Scott to her first meeting as Director of Finance and Corporate Services.

**14/24 | Item 2 - Declaration of Interests**

- 14/24.1 Mr Stewart asked if anyone had interests to declare relevant to any items on the agenda.
- 14/24.2 Mr Clayton declared an interest in relation to Public Inquiries as Unison is engaging with the Inquiries.

**15/24 Item 3 – Minutes of previous meeting held on 1 February 2024**

- 15/24.1 The minutes of the previous meeting, held on 1 February 2024 were **approved** as an accurate record of that meeting, subject to a minor amendment in paragraph 7/24.2
- 15/24.2 Mrs McKeown clarified that in paragraph 7/24.25, Internal Audit would be deferring the audit on Personal and Public Involvement until 2024/25.

**16/24 Item 4 – Matters Arising**

- 16/24.1 Mr Stewart went through the action log and noted for action 1, that a paper on screening IT systems will now be brought to the PHA Board in May. For the other 2 actions relating to complaints, he advised that information was sent to members. He noted that proposed dates for training on the 3 Lines Assurance model have been shared with members.

**17/24 Item 5 – Chair’s Business**

- 17/24.1 The Chair advised that he had no business to update on.

**18/24 Item 6 – Corporate Governance**

*Ms Heather Reid joined the meeting for this item*

*Corporate Risk Register as at 31 March 2024 [GAC/11/04/24]*

- 18/24.1 Ms Scott advised that following the latest review of the Corporate Risk Register, no new risks have been added to the Register and no risks have had their rating changed. Mr Wilson added that a lot of work has been put into this review with the 3 Lines Assurance Model now fully incorporated. He added that there has been work undertaken to look at all gaps in assurance and provide RAG ratings in those areas.
- 18/24.2 Mr Stewart said that risk 60 relating to migration needs to be fully revised and this risk has been on the Register for more than 2 years, and that the Chief Executive needs to consider this further and bring this risk to a conclusion.
- 18/24.3 Looking at risk 71 on public inquiries, Mr Stewart said that this risk raises issues about how PHA supports former members of staff and asked whether the Chief Executive feels there is adequate support. The Chief Executive explained that Public Inquiries are very prescriptive when it comes to outlining how former members of staff can be supported. He added that former staff should have access to papers, but under GDPR legislation those papers cannot be removed from PHA offices. He explained that PHA has taken advice from its solicitor in the Directorate of Legal Services (DLS) who has outlined how PHA can provide support and have access to advice. He noted that PHA cannot

- be seen to influence former staff members' statements and that those individuals are entitled to express their own views. He advised that to date only two former members of staff have been asked to provide statements to the Muckamore Inquiry and while one has taken up PHA's offer of support, the other has indicated they do not wish to. Mr Stewart said that this update was reassuring as individuals can feel isolated once they leave an organisation.
- 18/24.4 Mr Clayton asked about risk 59 relating to screening. He noted that there was a discussion on this with Dr Joanne McClean at the previous meeting and suggested that an update on the audit of PHA's Quality Assurance processes should be included within the narrative of the risk. The Chief Executive reported that in terms of that audit, PHA has met with individuals who are in a position to carry out this work and have asked that they make formal submissions. Mr Clayton welcomed this update. The Chief Executive explained that there are two options, either the individuals carry out the work in a private capacity, or they do it in their capacity as employees of NHS England. He added that the latter would be preferable, but noted that in each case the same product would be delivered.
- 18/24.5 Mr Clayton noted that risk 64 around cyber security refers to an Information Governance Emergency Plan, but that this was a regional piece of work and required funding. Mr Wilson confirmed that this is a regional initiative and that ALBs have been pushing the Department to get funding for it.
- 18/24.6 Mr Irvine said that while he welcomed the format of the Register, he felt that if target dates have been changed, there should be a rationale included as to why they have moved.
- 18/24.7 The Chief Executive responded to the comments on the risk around migration and advised that a piece of work is being led by the Permanent Secretary and Mr Mike Ferrar which should conclude by the end of May. He advised that PHA continues to work with SPPG and that an evaluation of the Area Integrated Programme Board (AIPB) is being prepared. He added that it is likely that PHA will take more of a lead in the future AIPBs as their focus will move to early intervention and prevention. He said that PHA will also work with SPPG in terms of commissioning services from Trusts. He added that he does not see that migration poses a risk. Mr Stewart said that he felt that there is still some confusion. The Chief Executive agreed to review the risk and the focus is now around the lack of clarity in the area of commissioning **(Action 1 – Chief Executive)**.
- 18/24.8 Members **APPROVED** the Corporate Risk Register.

*Nursing and AHP Directorate Risk Register as at 31 March 2024*  
*[GAC/12/04/24]*

- 18/24.9 Mr Stewart said that he wished to compliment the brevity of the Nursing and AHP Directorate Risk Register and noted that it was clear a lot of work has been done on it. He invited Ms Reid to give members an overview.
- 18/24.10 Ms Reid said that she has sought not to repeat any of the risks that appear in the Corporate Risk Register and that work has been carried out to update all of the risks.
- 18/24.11 Ms Reid advised that for the Family Nurse Partnership (FNP) the licence for the programme sits outside Northern Ireland but PHA is required to maintain a database and the current system has been out of date for some time. She said that PHA had been looking at a system that is used in Bulgaria but had previously been advised that it could not use this system because of Encompass, but given it would be more expensive to try to fix the current system, permission has now been given to move forward on the Bulgarian system.
- 18/24.12 Ms Reid said that PHA now has contingency arrangements in place for vaccination programmes and has registered as a nursing agency with RQIA. With regard to the Reshape and Refresh programme, she said that it is important that elements of work within her directorate, including PPI, Patient and Client Experience (PCE), and Quality and Safety are not lost.
- 18/24.13 Ms Reid noted that within Safety and Quality, the HSC Framework is out of date and this Framework had outlined PHA's previous role within this area, but now there is a clarity which she hoped would be addressed in the new Framework. Mr Stewart agreed saying that what is currently outlined is a responsibility that PHA cannot execute and it is important that this is resolved. Ms Reid advised that clarity is being sought. She outlined how previously correspondence would have been issued from the Department indicating that PHA and HSCB were jointly responsible for areas of work, but now there is a separation.
- 18/24.14 Mr Clayton said that he was also going to raise queries regarding FNP and vaccinations. He sought clarity that the risk around FNP is that PHA cannot use the licensed materials. Ms Reid confirmed this and added that PHA would not then be able to expand on the programme. Mr Clayton noted that previously when PHA had to scale up for vaccination programme this had thrown up some HR issues. Ms Reid said that the list of bank staff is regularly kept under review and contains staff who can assist in the Duty Room. She advised that discussions are taking place with HR around issues such as supervision. She noted that recently there has been an increase in cases of pertussis so PHA needs to think about scale and spread and having arrangements in place.

- 18/24.15 Mr Stewart thanked Ms Reid for attending today's meeting.
- 18/24.16 Members noted the Nursing Directorate Risk Register.
- Gifts and Hospitality Register [GAC/13/04/24]*
- 18/24.17 Mr Stewart noted that there were no declarations on the Gifts and Hospitality Register for 2023/24.
- 18/24.18 Members noted the Gifts and Hospitality Register.
- Complaints Report [GAC/03/02/24]*
- 18/24.19 Mr Stewart asked if members had any comments on the Complaints Report. Mr Clayton said that in the information shared with members on previous complaints, it showed that it is often not clear where complaints should be directed to. In the complaint regarding cervical screening, he noted that while PHA issues correspondence regarding screening, it is the Trust laboratories which are responsible for issuing results. He also noted that one complaint had taken over 100 days to be resolved. He suggested that if a complaint is not going to be resolved within the required timescales, that PHA should write to the complainant explaining why this is the case.
- 18/24.20 Mr Wilson said that PHA will take the learning from complaints to improve outcomes. He added that while this report is looking at the metrics, an annual report is currently being prepared and it will be shared with all PHA staff. He advised that the complaint which had taken over 100 days to resolve was a complex one. He noted that PHA has a complaint which is with the Northern Ireland Ombudsman, but the Ombudsman's office has not processed it as yet.
- 18/24.21 The Chief Executive advised that PHA had 2 previous complaints which went to the Ombudsman and PHA had a face to face meeting to discuss these, which had been helpful. Mr Wilson said that for the current complaint, PHA has offered to meet with the Ombudsman, but they have not yet looked at the complaint.
- 18/24.22 Members noted the Complaints Report.
- 19/24 Item 7 – Internal Audit**
- Internal Audit Progress Report [GAC/15/04/24]*
- 19/24.1 Mrs McKeown advised that the Progress Report shows that Internal Audit has completed its programme of work for the year, and that at the next meeting she will bring her Head of Internal Audit Annual Report and a final report on Shared Services.
- 19/24.2 Members noted the Internal Audit Progress Report.

*Year End – Follow Up on Outstanding Internal Audit Recommendations  
2023/24 [GAC/16/04/24]*

- 19/24.3 Mr Charles said that Internal Audit carries out a follow up on outstanding audit recommendations twice a year and that following the most recent review, of the 97 recommendations outstanding, 78 have been fully implemented, 18 partially implemented and 1 not implemented.
- 19/24.4 Mr Charles advised that two Priority 1 recommendations remain partially implemented. He said that the first one of these relates to the procurement of community and voluntary sector contracts, but he acknowledged that there is a lot of work ongoing in that area. He added that the second recommendation relates to Board effectiveness and the need for a strategic plan. Again, he acknowledged that there is work ongoing and a commitment in PHA's Business Plan for 2024/25 around this.
- 19/24.5 Mr Charles said that in respect of the newborn screening programme, a programme of quality assurance visits was to be established and while some work has been undertaken, issues have been highlighted around funding and management have asked that this recommendation be closed, but he feels that it should be kept open.
- 19/24.6 Mr Charles advised that Internal Audit will carry out a further review of the outstanding recommendations in August/September.
- 19/24.7 Mr Clayton noted that there had been discussion at the last Board meeting about the need for a Corporate Plan and he hoped that this recommendation would be closed before March 2025. With regard to the quality assurance issue, he suggested that it may be useful to have a paper on this to give members more detail on this issue.
- 19/24.8 Mr Stewart expressed concern around the implementation of the recommendation relating to recruitment as it is not acceptable to say that it is too difficult to implement. Mr Clayton echoed this saying that while the Committee was aware of issues relating to timescales from BSO, the audit highlighted areas where PHA needed to improve. The Chief Executive said that he would give this matter further consideration **(Action 2 – Chief Executive)**.
- 19/24.9 Mr Stewart noted that the issue around the quality assurance recommendation appears to be a funding one. The Chief Executive explained that a bid was made to the Department for funding and this bid was rejected. Mr Stewart said that he would welcome clarity on this and on the rationale as to why management feel that this recommendation should be closed. **(Action 3 – Chief Executive)**.
- 19/24.10 Mr Stewart acknowledged that work had been led by Mr Wilson and Mr Murray in relation to facilitating clinics to work through outstanding audit recommendations, but he noted that many of the responses in this

report rely on recommendations being implemented at a date in the future and he did not feel confident that this would be the case. Mrs McKeown said that some of the wording in the report may have been that of Internal Audit. Mr Stewart acknowledged this, but said that the implementation dates will soon creep up. Mr Wilson noted that PHA has had to redeploy staff in certain areas which has had an impact.

- 19/24.11 Mr Wilson said that in relation to the recommendation on screening, there is an issue that the standard in Northern Ireland differs from that across the UK. Mr Charles said that the recommendation was that quality assurance visits should be established and it was noted as “partially implemented” to open a conversation. Mrs McKeown added that if the recommendation were to be closed, that would be a matter for the Committee.
- 19/24.12 Mr Irvine expressed concern about those recommendations which have been outstanding for some time, and said that they should be given more priority by the Chief Executive, and also the Board. He said that if an implementation date is missed, there should be a narrative explaining why it has been missed. He suggested that there should be a business improvement process put in to look at the recommendations so the Directors can agree an approach which can then be looked at as part of a Board workshop. Mr Clayton noted that a more recent audit of community and voluntary sector contracts may have overtaken the original audit and the recommendations should be grouped. Mr Stewart said that considerable effort has been made to progress issues relating to procurement and that he met with Mr Wilson, the PHA Chair and Ms Anne Henderson to discuss this, but the volume of contracts that need to be re-procured means that it will take time to clear the backlog. He added that he was content that matters are moving forward.
- 19/24.13 Members noted the update on outstanding audit recommendations.
- External Quality Assessment Final Report 2023/24 [GAC/17/04/24]*
- 19/24.14 Mrs McKeown said that Internal Audit is required to have an audit undertaken every 5 years. She said that Mersey Internal Audit Agency (MIAA) had brought useful expertise. She thanked those members who had completed a stakeholder survey.
- 19/24.15 Members noted the External Quality Assessment Final Report.

## **20/24 Item 8 – Information Governance**

*Information Governance Action Plan 2023/24 Update [GAC/18/04/24]*

- 20/24.1 Ms Scott advised that the action plan for 2023/24 has been closed off and those actions not completed on time have been rated “red”. She said work is ongoing around new staff completing cyber security awareness training and getting outstanding Information Asset Registers

up to date. Mr Stewart expressed concern that those actions rated “red” are some of the most important areas. Mr Clayton advised that the issue of training for new starts was discussed at the Information Governance Steering Group and that in the 2024/25 Plan there is reference to PHA exploring the concept of an “induction day”.

20/24.2 Members noted the update on the Information Governance Action Plan.

*Information Governance Action Plan 2024/25 [GAC/19/04/24]*

20/24.3 Mr Clayton said that the 2024/25 Plan has been designed to address recommendations from the most recent Internal Audit. He said that work will continue in the area of GDPR and contracts.

20/24.4 Mr Irvine said that new employees should not start until they have completed their training. Mr Stewart commented that this is a mindset issue and noted that PHA is now holding more sensitive information than it has done previously. The Chief Executive agreed that the mindset needs to change, and said that there has been discussion around the concept of an induction day, but given the small numbers of new starts each month an approach has been agreed where new starts should do their training and then there will be quarterly induction meetings with Directors.

20/24.5 Ms Scott said that she welcomed that PHA has an Information Governance Steering Group. Mr Wilson agreed that there may have been issues in the past with getting new staff inducted appropriately, but there has been a change in culture over the last year.

20/24.6 Members noted the Information Governance Action Plan 2024/25.

**21/24 Item 9 – Finance**

*Fraud Liaison Officer Report [GAC/20/04/24]*

21/24.1 Mr Stewart advised that there were no new fraud cases to report.

21/24.2 Members noted the Fraud Liaison Officer Report.

**22/24 Item 10 – Draft PHA Annual Report 2023/24 [GAC/21/04/24]**

22/24.1 Mr Stewart acknowledged that the compilation of the Annual Report takes a lot of time and requires a lot of effort. He noted that while the Report focuses on the good work that PHA has done, it does not outline what difference it has made. He suggested that next year’s report should outline what PHA’s statutory responsibilities are, the funding it has received and the difference that it has made.

22/24.2 Mr Clayton noted that the Report is a work in progress and he agreed on the comments that it should demonstrate how PHA has made an impact.



He said that the moratorium on campaigns has likely had an effect. He suggested that in the section on the cervical screening review, there should be a reference to the review of quality assurance processes. He added that the section on health improvement should contain information on how PHA's work has helped to reduce health inequalities.

22/24.3 Mr Clayton said that there should be a reference in the report to the fact that there was a period during the year when PHA had Interim Chairs. Mr Stewart echoed this saying that there should be a comment about the delay in the appointment of a new Chair and suggested that this could be included in the Chair's foreword.

22/24.4 Mr Wilson thanked members for their comments on the draft Report.

22/24.5 Members **APPROVED** the draft Annual Report.

**23/24 Item 11 – Draft PHA Governance Statement 2023/24 [GAC/22/04/24]**

23/24.1 Mr Stewart said that the Governance Statement contains those issues that are fully within the bailiwick of the organisation and he welcomed the references to quality assurance and screening. Mr Clayton suggested that some of this narrative should be included in the Annual Report.

23/24.2 Mr Clayton noted the reference to the ALB Self-Assessment and that this will be discussed at the Board meeting on Thursday. He sought clarity on the commentary on the Assurance Framework as he did not recall this coming to the Committee on two occasions. It was agreed that this section would be revisited (**Action 4 – Mr Wilson**).

23/24.3 Mr Irvine said that many public sector reports are the same in that there is such a detailed focus on activity, financial governance and accountability and they need to be more succinct and outcomes-based. He added that there needs to be more focus on issues that would be of interest to the general public, for example MMR. He said that PHA needs to reinvent itself and reflect on its use of social media

23/24.4 Subject to minor amendments, members **APPROVED** the draft Governance Statement.

**24/24 Item 12 – Governance and Audit Committee Annual Report [GAC/23/04/24]**

24/24.1 Mr Stewart said that the Governance and Audit committee Annual Report had been updated to reflect work carried out this year in the areas of information governance and recruitment.

24/24.2 Mr Clayton said that the references to the Assurance Framework and the review of the Committee terms of reference may need to be reviewed again as they may not have happened during that year.

24/24.3 Members noted the Governance and Audit Committee Annual Report.

**25/24 Item 13 – SBNI Declaration of Assurance [GAC/24/04/24]**

25/24.1 Mr Stewart noted that the Committee had received the latest SBNI Declaration of Assurance. The Chief Executive said that there are matters that PHA is seeking clarification on from the Department and a draft letter has been prepared. He expressed concern around the responsibilities placed on him due to this hosting arrangement.

25/24.2 Members noted the SBNI Declaration of Assurance.

**26/24 Item 14 – Any Other Business**

26/24.1 There was no other business.

**27/24 Item 15 – Details of Next Meeting**

*Monday 13 June 2024 at 10am*

*Fifth Floor Meeting Room*

*12/22 Linenhall Street, Belfast, BT2 8BS*

Signed by Chair:

Joseph Stewart

Date: 13 June 2024