

minutes

Title of Meeting	Meeting of the Public Health Agency Governance and Audit Committee
Date	9 December 2019 at 2.00pm
Venue	Fifth Floor Meeting Room, 12/22 Linenhall Street, Belfast

Present

In Attendance	
Mr Ed McClean- Interim Deputy Chief Executive / Director OperationsMiss Rosemary Taylor Mr Paul Cummings Ms Jane Davidson- Assistant Director, Planning and Operation - Director of Finance, HSCB - Head Accountant, HSCBMr David Charles Mr Simon McKeown Mr Roger McCance Mr Robert Graham- Internal Audit, BSO - NIAO - Secretariat	

Apologies

Mr John Patrick Clayton - Non-Executive Director

57/19	Item 1 – Welcome and Apologies	Action
57/19.1	Mr Drew welcomed everyone to the meeting. Apologies were noted from Mr John Patrick Clayton.	
58/19	Item 2 - Declaration of Interests	
58/19.1	Mr Drew asked if anyone had interests to declare relevant to any items on the agenda. No interests were declared.	
59/19	Item 3 – Minutes of previous meeting held on 3 October 2019	
59/19.1	The minutes of the previous meeting, held on 3 October 2019 were approved as an accurate record of that meeting.	

These minutes will be brought to the PHA Board on 23 January for noting.

60/19 Item 4 – Matters Arising

47/19.4 Family Nurse Partnership Audit

60/19.1 Mr Drew asked if there was any update following the FNP audit. Mr Charles said that Internal Audit will be carrying out a follow up review of the recommendations in February/March 2020 and will then report back. Mr McClean assured members that the recommendations are begin addressed thoroughly. Miss Taylor added that she had been liaising with Mrs Quinn and Ms Webb and that there will be an FNP Report coming to a future PHA Board meeting.

47/19.17 NIAS PPI Self-Assessment

60/19.2 Miss Taylor confirmed that a self-assessment has been received from the Northern Ireland Ambulance Service and is currently being assessed.

49/19.8 Workshop on Risk Management

60/19.3 Mr Drew proposed that this workshop take place in the first quarter of next year.

61/19 Item 5 – Chair's Business

- 61/19.1 Mr Drew advised that he had received the BSO Annual Assurance letter for 2018/19. He noted that while there had been improvements in terms of payroll, there remained further work to be done. In terms of information governance, he said that there were some issues in relation to training. Mr Stewart said that this was also an issue in PHA. Miss Taylor advised that while there has been an improvement in the PHA, there is still work to be done. She said that Assistant Directors receive lists showing if their staff have completed the training or not to follow up with individuals.
- 61/19.2 Mr Drew said that there were also some issues in relation to Information Asset Registers, but Miss Taylor pointed out that this related specifically to BSO, and that there is a process in PHA for Registers to be reviewed.

62/19 | Item 6 – Internal Audit

Internal Audit Progress Report [GAC/45/12/19]

- 62/19.1 Mr Charles began by seeking members' consent to defer an audit relating to Screening until 2020/21 and instead conducting an audit of IT Security. He explained that there are currently staffing issues within the Screening team, and a number of recent personnel changes. Furthermore, a review by the Department of Health is about to take place. Members confirmed that they were content with the rationale to defer this audit.
- 62/19.2 Mr Charles advised that an audit of Risk Management and the Assurance Framework had been completed and that a satisfactory level of assurance was being provided. He said that although there were no significant findings, the audit highlighted a need for there to be closer links between the Risk Register and the Assurance Framework. He added that as part of the next review, a mapping exercise should be carried out to ensure all assurances are included. He noted some instances where assurances had not been provided as outlined in the Framework.
- 62/19.3 In terms of the Risk Register, Mr Charles noted that the PHA does not bring its Directorate risk registers to the Board. He said that all the recommendations in the audit had been accepted by management.
- 62/19.4 Mr Stewart said that it was important that the Directorate risk registers were brought to the Board. Mr Drew agreed saying that they should be brought on a rotational basis.
- 62/19.5 Ms Mann-Kler noted that 36% of staff had not completed risk management training, and she asked what could be done to ensure there is a culture of risk management embedded in the organisation. Miss Taylor explained that risk management training should be done on a 3-yearly basis, and there is some analysis to be undertaken in terms of determining which staff have not completed the training. Mr Stewart suggested that the training should be tailored to make it relevant to each staff member's role. Ms Mann-Kler said that she understood that rationale, but felt that a high level overview of responsibility in relation to risk management is important. Mr Drew said that training should be completed as soon as possible after induction.
- 62/19.6 Members noted the Internal Audit Progress Report.

	Shared Services Audits [GAC/46/10/19]
62/19.7	Mr Charles presented the latest Shared Services audit. He said a limited assurance had been provided in terms of Payroll. He explained that this audit had looked at implementation of previous recommendations, and while some improvements had been made, further work was required.
62/19.8	Ms Mann-Kler asked how it was possible for staff to be paid below the National Living Wage. Mr Cummings explained that this may be due to the system operating under a previous Circular prior to the introduction of the living wage.
62/19.9	Mr Charles said that audits in relation to accounts payable and accounts receivable had both resulted in a satisfactory level of assurance being provided.
62/19.10	Members noted the Internal Audit Mid-Year Follow Up Report.
63/19	Item 7 – Corporate Governance
	Corporate Risk Register (as at 30 September 2019) [GAC/47/12/19]
63/19.1	Miss Taylor advised that one new risk, relating to industrial action, has been added to the Corporate Risk Register following the review for the period up to 30 September 2019. She added that no risks have been removed, and the status of other risks remains unchanged.
63/19.1	action, has been added to the Corporate Risk Register following the review for the period up to 30 September 2019. She added that no risks have been removed, and the status
	action, has been added to the Corporate Risk Register following the review for the period up to 30 September 2019. She added that no risks have been removed, and the status of other risks remains unchanged.
	 action, has been added to the Corporate Risk Register following the review for the period up to 30 September 2019. She added that no risks have been removed, and the status of other risks remains unchanged. Members noted the Corporate Risk Register. <i>Review of Standing Orders, Standing Financial Instructions</i>

Business Continuity Management revised Plan and Policy [GAC/49/12/19]

- 63/19.5 Mr McClean advised members that PHA had recently conducted a "walk through" of its Business Continuity Plan with AMT, and that following that exercise, minor changes had been made to the Plan. Mr Drew noted that the Plan had been reviewed in anticipation of issues relating to EU Exit and he felt the Plan to be robust.
- 63/19.6 Mr Stewart said that there was no explicit reference with the Plan or Policy to state that the PHA Board would be informed if the Plan was activated. Mr McClean assured members that in the event of the Plan being activated the Board would be informed immediately.
- 63/19.7 Members **APPROVED** the Business Continuity Management Plan and Policy which will be brought to the PHA Board on 23 January.

Whistleblowing Update [GAC/50/12/19]

- 63/19.8 Miss Taylor gave members an overview of an investigation relating to a recent whistleblowing allegation and the learning which emanated from this investigation.
- 63/19.9 Members noted the Whistleblowing update.

64/19 Item 8 – Finance

Fraud Liaison Officer Update Report [GAC/51/12/19]

- 64/19.1 Mr Cummings presented the latest Reports and advised that there were no new cases of fraud. He said that there was one issue outstanding following the National Fraud Initiative data match exercise.
- 64/19.2 Mr Cummings advised that following Fraud Awareness Week there had been a presentation by Counter Fraud Services at a recent joint HSCB SMT/PHA AMT meeting.
- 64/19.3 Members noted the Fraud Liaison Officer Update Report.

65/19 Item 9 – Information Governance Action Plan Update [GAC/52/12/19]

65/19.1 Miss Taylor presented the update as at 30 September and said that most of the actions are on track, but some are rated "amber". She said that these relate to issues around training as discussed earlier in the meeting.

- 65/19.2 Miss Taylor said that the one action rated "red" relates to Personal Data Guardian (PDG) training. She explained that this training only takes place once a year and that the Director of Public Health, who fulfils this role, was unable to attend. However, she advised that one of her senior managers had attended. Mr Drew asked why the Director of Public Health is the PDG. Mr Cummings said that it is normal practice for this role to fall to a medical professional. Mr McClean added that he is the Senior Information Risk Officer (SIRO) so cannot also act as PDG.
- 65/19.3 Mr Drew asked if the training would be completed next year. Miss Taylor said that the new post holder should complete the training when they take up post and that the training normally takes place in May. Mr Stewart asked if the training is generic, and could it not be completed elsewhere. Miss Taylor said that it is organised by the Department of Health, and that there are some slight differences from a Northern Ireland perspective.
- 65/19.4 Miss Taylor said that one further issue from the update relates to contracts and GDPR, but she said that work is ongoing in this area.
- 65/19.5 Members noted the Information Governance Action Plan update.
 - 66/19 Item 10 Direct Award Contracts Report for 1 April to 30 September 2019 [GAC/53/10/19]
- 66/19.1 Miss Taylor said that this Report is presented to the Committee twice a year. She advised that PHA has amended its Direct Award Contract process in line with the revised procurement control limits.
- 66/19.2 Miss Taylor advised that 14 DAC applications have been made, which represents a slight increase, but she explained that this is mainly due to confidence and supply funding initiatives and transition to a new technology procurement framework. She said that 13 of the 14 applications were rated "amber" with the other rated as "red".
- 66/19.3 Ms Mann-Kler asked why the threshold for the application rated "red" had been exceeded. Miss Taylor said that this initiative has been running for several years and should be reviewed as part of PHA's mental health and suicide prevention work. Miss Mann-Kler asked when this would happen. Miss Taylor said that planning for these services is currently underway. Mr McClean added that those involved in this work should be cognisant of timescales. He assured

members that he would report back the concerns of the Committee to the relevant officers.

66/19.4 Members noted the update on Direct Award Contracts.

67/19 Item 11 – Any Other Business

67/19.1 There was no other business.

68/19 Item 12 – Details of Next Meeting

Friday 28 February 2020 at 10am Fifth Floor Meeting Room, 12/22 Linenhall Street, Belfast. Signed by Chair:

Leslie Drew

Date: 28 February 2020