



**MINUTES OF THE AUDIT AND RISK ASSURANCE COMMITTEE
(ARAC) HELD ON THURSDAY 18 MAY 2023 AT 10AM IN THE
BOARDROOM, NIAS HQ**

PRESENT: Mr W Abraham Non-Executive Director (Chair)
Mr D Ashford Non-Executive Director

IN

ATTENDANCE: Mr M Bloomfield Chief Executive
Mr P Nicholson Director of Finance, Procurement,
Fleet & Estates
Ms M Paterson Director Planning, Performance &
Corporate Services
Dr N Ruddell Medical Director
Ms K Keating Risk Manager
Ms C Hagan External Audit ASM
Mr S Knox External Audit Northern Ireland Audit
Office
Ms C McKeown Head of Internal Audit, BSO
Ms L Mitchell Independent Adviser to Committee
Mrs C Mooney Board Secretary
Ms B McAuley Assistant Director of Finance

APOLOGIES: Ms R Byrne Director of Operations
Ms L Charlton Director of Quality, Safety &
Improvement
Ms M Lemon Director of HR & OD

Welcome, introduction and format of meeting

The Chair welcomed everyone to the meeting.

1 Apologies

Apologies were noted.

2 **Declaration of Potential Conflict of Interest & Confirmation of Quorum**

The Chair confirmed that the meeting was quorate and asked those present to declare any conflicts of interest now or as the meeting progressed.

The Chair noted the fact that, in accordance with the Trust Standing Orders, the Non-Executive Director (NED) membership of the Audit Committee 'shall consist of not less than three members'. He advised that he had drawn this requirement to the Trust Chair's attention in the context of appointing additional NEDs when this was possible.

The Chair also stressed the confidentiality of information presented.

3 **Previous Minutes (AC18/05/23/01)**

The minutes of the meeting on 30 March 2023 were **APPROVED** on a proposal from the Chair and seconded by Mr Ashford.

4 **Matters Arising (AC18/05/23/02)**

4.1 **Action List**

The Committee **NOTED** the Matters Arising.

The Chair invited Mr Nicholson to update the Committee in relation to the holiday pay issue and the consideration given to whether it should be identified as a risk within NIAS and across the wider HSC.

Mr Nicholson advised that this issue was discussed at length at the Strategic Finance Forum which comprised representation of HSC Directors of Finance, the SPPG and DoH. He advised that other Trusts had not included this as a risk on their Risk Registers.

Mr Nicholson explained that, unlike the last Agenda for Change dispute, it did not constitute a NIAS specific risk.

He said that the DoH intended to write to the Department of Finance to highlight this risk along with a number of others in

the context of the current financial position. However, he pointed out that there was a risk on the Corporate Risk Register around the requirement for the Trust to achieve breakeven and suggested that this could be expanded to include the holiday pay issue in terms of any issue that materialised during the year.

The Chair said he remained of the view that, while the DoH intended to write to the Department of Finance, the risk continued to merit specific inclusion on the Risk Register to ensure it was highly visible.

Mr Nicholson indicated that this issue and other pay liability issues remained very much on the agenda.

Mr Ashford said that he understood the Chair's wish to have the issue identified as a risk. He was of the view that the issue had been well documented and remained a live issue. He pointed out that if the Chair was not in a position to have a handover with a new incoming Committee Chair, then it might be prudent to include this on the Corporate Risk Register.

Ms Paterson indicated that this issue would be included in the Risk Register moving forward.

Referring 'Progress towards Achieving Business as Usual', Ms Paterson said she intended to bring a presentation to the October meeting given the extent of business to be transacted at the June meeting. She reminded the Committee that an update was last provided in October 2022 and members would be able to see the progress which had been made.

5 Chair's Business

The Chair advised that he was approaching the end of his tenure as Non-Executive Director in August. He expressed his disappointment that his comments re the need for an effective handover had not been taken into consideration and that the recruitment process had not commenced earlier.

Mr Bloomfield explained that the appointment of Non-Executive Directors was a DoH-led process and such posts were subject to

Ministerial approval. He added that the process had been impacted by the current political situation.

The Chair noted that he had requested an induction pack be provided to new ARAC members and that Mrs Mitchell and Mrs Mooney were developing this. He asked Mrs Mitchell to consider a specific information pack for a new ARAC Chair.

6 **Standing Items**

6.1 **Direct Award Contract (DAC) Register (AC18/03/23/03)**

Mr Nicholson drew the Committee's attention to the DAC Register. He pointed out that nine DACs remained current while a number, mainly around Occupational Health Services (OHS), remained outstanding. Mr Nicholson said he had been advised that the paperwork for the outstanding DACs had been drafted with support from the Transformation Team and was currently being finalised by the HR & OD Directorate. He explained that the paperwork would then be passed to the BSO PaLs Compliance team for review and ultimate sign-off by the Chief Executive. He said he hoped that alternative routes to procurement for the Enterprise Management Agreement (EMA) would be identified negating the need for a DAC.

Mr Ashford welcomed the reduction in the number of DACs and sought clarification that, should a DAC be required for the EMA, ARAC would have oversight of this.

Mr Nicholson confirmed that this would be the case.

The Committee **NOTED** the DAC Register.

6.2 **Fraud Update – verbal update**

Mr Nicholson noted that the Committee would consider the Fraud Policy later in the meeting and he asked Ms McAuley to provide an update on current cases.

Ms McAuley advised that there were currently two cases, both of which had been mentioned at the previous meeting. She explained the nature of both cases and described how these were being investigated.

Mr Nicholson pointed out that BSO Counter Fraud Unit now undertook the preliminary investigation which provided an additional level of independence and assurance to the Committee.

The Committee **NOTED** the Fraud Update.

6.3 Progress on Achieving Business As Usual – verbal update

Discussion at item 4.1 refers.

7 Internal Audit

7.1 To advise on key issues

Discussion at subsequent agenda items refers.

7.2 Progress Report (AC18/05/23/04)

Ms McKeown highlighted the salient points of the Progress Report.

Responding to a question from the Chair around the transition of Staff in Post (SIP) reports from Finance to HR, Ms McKeown explained that such reports lay more appropriately within HR.

Mr Nicholson said that both Finance and HR had examined the SIP return and determined that improvements could be made by moving to a more granular information source contained within HRPTS. However, he said, at that time, the Trust was experiencing pressures in terms of industrial action and reports were not issued. Mr Nicholson said that officers now planned to revisit this work with a view to making the SIP reports more meaningful.

Mr Bloomfield agreed that all HR-related information should be sourced from HRPTS.

The Chair sought clarification on any other work which was being transitioned between Directorates and emphasised the need to ensure that nothing was missed.

Mr Nicholson acknowledged that the Trust was constantly reviewing processes and where such processes would be best located. He referred to the Attendance Management project which, he said, could potentially result in changes to processes and their location and alluded to the significant governance structure surrounding the project.

The Chair encouraged the Senior Management Team to continue to monitor the position. He referred to unsocial hours and the issue of what constituted a representative sample and sought further information around the error rate.

Ms McKeown explained that Internal Audit had identified cases based on the highest risk areas and accepted that there would not be a 40% error rate across the board. However, she pointed out that this was an issue which needed to be addressed.

The Chair asked if a wider sample would be taken and a report provided.

Responding, Mr Nicholson confirmed that, as part of the programme of work, the treatment of unsocial hours would be reviewed.

The Chair welcomed this and said it would be important for the Committee to be advised of the error rate or the potential for this to become irrelevant as a result of the work undertaken.

Mr Ashford agreed with the points made by the Chair and said that he too had shared the Chair's concern.

The Chair referred to the IA finding that the SLA for the provision of legal services needed to be further developed to include KPIs and he sought further information on what KPIs might be used.

Ms McKeown acknowledged that both organisations needed to undertake further work in this regard and advised that this recommendation had been made across the HSC this year. She explained that, while the SLA was in place, she would like to see some further detail with regard to performance indicators and delineation of roles and responsibilities.

Ms McKeown advised that the BSO was currently undertaking some work around the provision of legal services and was of the view that this would dovetail with the IA finding.

Mr Bloomfield indicated that Trust officers met with Directorate of Legal Services (DLS) colleagues at least once per year where discussion focussed on the number and nature of cases being undertaken. He added that feedback was generally positive and said the Trust had always received a responsive service from DLS.

Ms McKeown drew the Committee's attention to page 17 of the report and referred in particular to the end of year stock-take. She noted that, as had previously been reported, central stores do not have an automated stock system in place.

Mr Nicholson emphasised the importance of the end of year stock-take this year as there had not been any physical verification over the last three years due to the Covid-19 pandemic. However, he pointed out that the same principles and procedures in terms of stock-taking had been applied during this time.

The Chair highlighted the area of legal claims and asked for confirmation of where this work sat in the Trust Committee structure.

Mr Nicholson clarified that any legal claims would be included within the 'Losses and Special Payments' section of the Trust accounts. It is a specific responsibility of the ARAC to review this schedule, however it represented payments only and was a subset of legal claims in total. However, Ms Paterson agreed to report back on where legal claims could best be reported within the Committee structure.

The Chair congratulated all involved in the audits which had been undertaken at a time when the Trust continued to experience significant pressures. He was of the view that the process adopted by the Committee in terms of convening an additional meeting which considered IA findings only had been extremely helpful in this regard. The Chair said that the

meeting in December 2023 would be scheduled; however, the decision to convene the meeting would be a matter for the incoming Committee Chair.

The Committee **NOTED** the Progress Report as presented by Ms McKeown.

7.3 Year-end Follow Up (AC18/05/23/05)

Ms McKeown reported that a total of 178 recommendations (80%) had now been fully implemented; 35 recommendations had been partially implemented and one recommendation had not been implemented as it had been deemed no longer applicable. She explained that this particular recommendation related to the management of medical devices training.

The Chair asked whether it had not been possible to complete the training due to Covid-19.

Responding, Dr Ruddell explained that there were two elements involved. The management of medical devices in terms of asset tracking and maintenance was being progressed by the Medical Equipment Manager, but there were also a number of items of medical equipment which required updated training. He acknowledged that a major issue was the release of staff in the context of operational pressures. Dr Ruddell indicated that the Clinical Education Programme would include updates for staff on new pieces of equipment.

The Chair referred to the fact that arrangements had now been put in place and asked if this recommendation could be categorised as fully implemented.

Dr Ruddell explained that clinical education was an annual programme to be delivered to all staff. He added that the programme had to be completed before the next year's programme could commence. Dr Ruddell pointed out that, given the level of competing demands on the clinical education team, such training had to be delivered within the two days of training allowed for all operational staff.

Dr Ruddell was confident that the Medical Directorate would be able to evidence that progress had been made against

particular areas of training. However, he explained that new equipment would always be introduced and would therefore require training. He alluded to the intention to replace defibrillators across the Trust and said training in respect of this would be required on a rolling basis.

Ms McKeown acknowledged that there would always be new devices and an ongoing need for training for those devices. However, she pointed out that there was not yet sufficient evidence provided to implement the recommendation and that progress would be reviewed at mid year.

Ms McKeown provided an overview of the current position regarding the audits undertaken.

Mr Ashford welcomed the progress which had been made and recognised the significant work involved in reaching this position. He commented that there were some recommendations where the implementation dates had not yet passed and said there was a need to ensure momentum and focus were maintained. Mr Ashford emphasised the importance of addressing the older recommendations.

Responding to a point made by the Chair, Ms McKeown confirmed that Internal Audit continued to report on the current position this as part of the follow-up process.

The Chair was of the view that, if it had not been possible to address recommendations which had been in existence for a number of years, then it might be prudent to revisit and perhaps reframe these. He commended all involved on such a positive result.

The Committee **NOTED** the Year End Follow-up report as presented by Ms McKeown.

7.4 Shared Service Update (AC18/05/23/06)

Ms McKeown drew the Committee's attention to the Shared Service Update and advised that, as these constituted BSO audit reports, the responsibility to manage the implementation of the recommendations lay with the BSO. She added that the reports had been provided to all Trusts.

There was discussion in relation to the Payroll Quality Improvement Programme (PQIP) which had been established to take forward the significant changes being experienced by the BSO Payroll Department.

The Chair alluded to the IA finding that the PQIP had not been appropriately empowered to make decisions in respect of the recovery of overpayments.

Ms McKeown said that IA had recommended that such decisions should have been taken by the Business Services Forum which was a Director-led forum.

The Chair explained that his concern focussed on the seniority of the structure and was of the view that, if NIAS staff had been overpaid, the decision to recoup any overpayments should lie with NIAS as opposed to the BSO. He asked if the Trust had agreed with the PQIP decision not to recoup any overpayments.

Ms McKeown explained that the Business Services Forum was a customer forum with Director representation from each organisation. Mr Nicholson confirmed that he and Ms Lemon were the NIAS representatives on the Forum.

The Chair suggested that the decision not to recoup should be revisited and reported to the ARAC.

Mr Nicholson explained that, if it transpired that the overpayments were of a high volume and low cost with little chance of recovery, such costs would be included within the 'Losses and Special Payments' section of the Trust Accounts which would be reviewed by this Committee.

Ms McKeown stressed the complexity of this area of work and assured the Committee that the BSO was not taking decisions on behalf of the Trust to write-off payments. She acknowledged that the issue was linked to processing these through the current HRPTS system and a decision had been made that the efforts to recover the costs would have been significant in comparison to the costs involved.

The Chair asked whether the SLA would allow such costs to be written off.

Responding, Mr Bloomfield explained that Shared Service would undertake the transactional elements of payments and if any issues relating to this needed discussion, such discussion would take place within the Business Services Forum to agree how the HSC would approach such matters in a consistent manner.

Mr Bloomfield pointed out that the responsibility towards NIAS employees remained with the Trust and said that should it transpire that costs had to be recovered, then that would be a matter for the Trust.

Ms McKeown said that the point being made in the IA recommendation was that the decision should not have been made in isolation.

The Chair said it would be helpful to know the quantum being discussed.

Mr Nicholson reiterated that the matter would be progressed through the Business Services Forum and a report provided to the Committee in due course.

Ms McAuley described the processes within the BSO and pointed out that, while the decisions within PQIP had been taken at Assistant Director level, it had been IA view that such decisions should have been taken at a more senior level.

The Shared Services Update was **NOTED** by the Committee.

7.5 HIA Annual Report for the year ended 31 March 2023 (AC18/05/23/07)

Ms McKeown drew the Committee's attention to her Annual Report for the year ended 31 March 2023, in particular page 2 which summarised the work undertaken within NIAS.

Ms McKeown advised that the level of assurance with regard to Performance Management had been revised at year-end to Satisfactory.

She confirmed that, overall for the year ended 31 March 2023, she could provide an overall satisfactory assurance on the adequacy and effectiveness of the organisation's framework of governance, risk management and control. It is important to note that, even though overall satisfactory assurance was provided, limited assurance has been provided in a number of areas in 2022-23 and continued management action is required to implement Internal Audit recommendations.

Ms McKeown specifically noted the improved control environment in Patient Care Services and in Performance Management.

Mr Ashford welcomed the improvement and congratulated all involved. He said it would be important to maintain this level of assurance and noted that Limited assurance had been provided in a number of areas in the 2022-23 year.

Mr Bloomfield welcomed the Satisfactory level of assurance and acknowledged that not maintaining this would have been problematic. He recognised the need to ensure a continued focus on IA recommendations.

The Report was **NOTED** by the Committee.

7.6 Internal Audit Plan 2023/24-2025/26 (AC18/05/23/08)

Ms McKeown explained that the IA Plan was largely based on the Trust's Corporate Risk Register and set out a three-year plan for audit within the Trust.

She acknowledged the resource challenges within IA and said she expected these to continue to some extent for the foreseeable future given the challenging recruitment market for Internal Auditors.

Ms McKeown drew the Committee's attention to page 16 of the Plan which set out the audit areas for 2023-24 and reminded the meeting that the three-year plan was refreshed on an annual basis in conjunction with the Trust. She pointed out that the Resource and Rota Management audit had been deferred to 2024-25.

The Chair commented that he could not recall IA having audited HEMS previously.

Ms McKeown advised that IA had undertaken an audit of HEMS a number of years previously which had looked specifically at governance systems.

Mr Nicholson pointed out that IA undertook a Financial Review on an annual basis and welcomed its frequency. He clarified that the Fleet and Procurement now fell within the Finance Directorate and noted that there was a specific review of Procurement and Contract Management. Mr Nicholson welcomed this audit given the level of expenditure within the Trust on these areas.

Mr Bloomfield commented on the process to reach this point in terms of the confirmation of the audits to be undertaken and advised that Ms McKeown had met with SMT to present her proposed audit plan for the 2023-24 year. He said that, following discussion, a revised plan had been presented for agreement. Mr Bloomfield was of the view that this process had been beneficial for all concerned.

Following this discussion, the Committee **APPROVED** the IA Strategy, incorporating the IA Plan 2023-24 to 2025-26.

The Chair thanked Ms McKeown for her presentation of the various reports.

8 External Audit

8.1 To advise on key issues

Mr Knox and Ms Hagan made a number of comments in relation to the Trust Annual Accounts and Governance Statement and undertook to communicate these formally to Mr Nicholson.

8.2 NIAO letter re: Auditor Rotation (AC18/05/23/09)

The Committee **NOTED** the NIAO letter advising of the retirement of Mr Neil Gray and that Ms Colette Kane would

assume responsibility for the audits of the DoH and its sponsored bodies.

9 **Annual Report and Accounts**

9.1 **Submission Letter and Draft, Unaudited, Uncertified, Consolidated Annual Report & Accounts for the Year Ended 31 March 2023 (AC18/05/23/10)**

The Chair commented on the format of the Annual Report and was of the view that the use of pictures engaged the reader more quickly. However, he said it was clear that the report was written by a number of contributors and suggested that this, as well as ensuring a consistent house-style throughout, should be revisited.

At the Chair's invitation, Mr Nicholson explained that these accounts were presented to the Committee for the first time as draft, unaudited and uncertified. He advised that this was the first opportunity for members to see the accounts at an early stage and to influence the final document and the review by External Audit.

Mr Nicholson said it was likely that there would be a number of changes to the document ahead of the audited accounts coming back to the Committee on 22 June and subsequently to Trust Board for approval. However, he said, the changes were not expected to be major ones.

Mr Nicholson referred to the extensive nature of the report and conveyed his thanks to all involved in bringing it together. He said that, while he would commend the entirety of the report to members, he would highlight the following:

- Performance overview and analysis from the start of the document provided detail on the activities and performance of the Trust through the year. He welcomed the use of pictures which highlighted the activities and individuals involved.
- Mr Nicholson said that, although he recommended a full reading of the detail contained in the Consolidated Accounts from page 134, he referred members to the Financial

Resources & Performance on page 66 as an executive summary. He explained that this set out the Trust's performance against its financial targets to breakeven, remain within the Capital Resource Limit and pay suppliers promptly. He pointed out that the Trust's turnover for the 2022-23 year had been in excess of £130 million and the Trust had achieved a break-even position with an operational surplus of £24,000 and also proceeds from the sale of assets, which consist of decommissioned vehicles, of £86,000, which resulted in a surplus against the Revenue Resource Limit of £110,000. Mr Nicholson advised that there had been a small underspend of £2,000 against a Capital Resource Limit of £6.9 million. He pointed out that 96.6% of invoices had been paid within 30 days of receipt of a valid invoice or the goods and services.

- The Committee's attention was drawn to the Non-Executive Directors Report on page 83 which had this year been written by the Committee Chair.
- Referring to the Governance Statement which started on page 85, Mr Nicholson said that members would be aware of the format and the various sections of the Statement. Again, said that, without prejudice, he would like to highlight Section 10, 'Sources of Independent Assurance' on page 97 and Section 12, 'Internal Governance Divergences' on page 101 and said that members would be familiar with the format of resolved, ongoing and new control issues.
- Mr Nicholson advised that the Remuneration Report from page 109 highlighted the terms and conditions for the Chief Executive and Directors who operated at Board level and said that this was a section of the report that often drew the attention of staff and the public.
- Mr Nicholson referred to the 'Losses and Special Payments' section on page 126 which highlighted items of expenditure which had been subject to special controls and required specific approvals within limits set by the DoH. He pointed out that the ARAC was required to review this Section of the report which showed 11 payments totalling £101,000 in the year. Mr Nicholson advised that there was nothing surprising in these

payments across three broad areas of Clinical Negligence, Employers Liability and Ex Gratia Payments.

Continuing, Mr Nicholson explained that the blank pages from 107 were intentionally blank for the insertion of the certification from NIAO when the audit had been completed.

He referred to page 134 which represented the start of the prima facie financial statements and the notes to the accounts. Again, Mr Nicholson said, without prejudice, he would draw the Committee's attention to the entirety of the document but highlighted two areas in particular.

One related to the introduction of a new Accounting Standard in relation to leases. This, he said, had the effect of moving some of the payments made for commercial leases for ambulance premises from revenue onto the balance sheet. The other related to the holiday pay issue which has resulted in the qualification of NIAS accounts for the last two years. Mr Nicholson advised that, in line with the rest of the HSC and DoH guidance, the Trust had moved to treating this liability from an accrual to a provision. He indicated that this transition had required a restatement of the last two years in the accounts. Mr Nicholson said that, whilst overall, it had no impact of the Trust's financial performance and in simplistic terms transferred numbers between lines of the accounts it did bring the Trust in line with the position expressed by NIAO and would hopefully result in an unqualified opinion for the 2022-23 accounts.

Mr Nicholson advised that the Trust was in discussion with the rest of HSC, SPPG and DoH as to how this financial risk in particular, and others in general, would be managed when they became clearer in future years.

Mr Nicholson explained that he would move to present the Charitable Trust Funds and would be happy to answer any questions thereafter.

9.2 Submission Letter and Draft, Unaudited, Uncertified, Charitable Trust Funds Trustee's Annual Report for the Year Ended 31 March 2023 (AC18/05/23/11)

Mr Nicholson pointed out that the Charitable Trust Fund Accounts were being presented as draft, unaudited and uncertified and advised that the income and expenditure in these accounts had also been consolidated into the public accounts.

Mr Nicholson indicated that donations from the public had now returned to pre-pandemic levels but continued to be very much appreciated.

Continuing, Mr Nicholson drew the Committee's attention to a few specific highlights for the year including funding for the Frequent Caller Project from NHS Charities Together and also the partnership with the Children's Heartbeat Trust for the provision of a bespoke children's Ambulance. He said that both these projects had been referenced within the Trustee's Annual Report as well as the public funds Annual Report and Accounts along with some fascinating facts and figures and also some great pictures.

He reminded the meeting that the Trust had a recently approved Charitable Trust Fund Policy and would work with ongoing initiatives such as the Frequent Caller Project and would continue to work to apply the fund balances that were held.

Mr Ashford welcomed the format of the report. He referred to the holiday pay issue and sought further information around the effect on last year's final accounts.

Mr Nicholson explained that, at a high level, there had been two years of accounts on which the holiday pay issue had impacted and said that the broad effect was that it would increase the provisions provided. However, the Trust's overall break-even position would not change.

Mr Ashford referred to the change in Accounting Standards around leases. He asked whether the change would impact on

governance in this area and commented that the management of leases appeared quite onerous.

Mr Nicholson clarified that the only change had been in the accounting treatment and the management remained onerous. He noted that this issue had been identified within the Trust's Governance Statement. Mr Nicholson said it was an issue which the Trust had intended to address in the current year and he confirmed that all leases were now compliant with the new process which required engagement with the DoH and Land and Property Services prior to any lease being renewed.

The Chair referred to page 105 of the report and the reference to attendance management which he believed was 'anodyne' and lacking in context. He suggested that further narrative should be included around the efforts being made by the Trust to address this significant issue.

Mr Knox and Ms Hagan undertook to forward their comments to Mr Nicholson in the coming days.

Dr Ruddell drew the Committee's attention to the reference on page 106 to paramedical education development. He explained that the current cohort of BSc students were completing their second year of studies and added that the intention would be for the Trust to recruit these students upon completion of their degree. However, he said, in the current financial climate, the Trust had yet to receive confirmation from the DoH that the funding would be made available for the Trust to do so. He emphasised that any plans the Trust had for recruiting these students would be dependent on funding being made available by the DoH.

Dr Ruddell highlighted the risk to the Trust, both operationally and reputationally, if funding was not available to recruit graduates from the Ulster University BSc programme in 2024. He reminded the Committee that the Trust had worked with the DoH to put the programme in place and there was an expectation on the part of the students that they would be recruited by NIAS upon completion of their BSc. Dr Ruddell advised that other UK ambulance services had already approached students with opportunities in other services including relocation packages. He said it was important for the

Trust to have some degree of certainty around timescale of the availability of funding to allow the Trust to engage with students around their future employment at the earliest opportunity.

The Chair endorsed this approach and said it would be important for the Trust to be seen as a potential employer for those students completing their BSc.

Mr Bloomfield explained that the funding for paramedics was linked to CRM funding. He said that Directors had met with DoH Deputy Secretaries, Mr Toogood and Mr Wilkinson, earlier this week and had taken the opportunity to highlight this issue and emphasise the risk that it posed.

Mr Bloomfield said it would be damaging if, on completion of the inaugural BSc programme, it was not possible to offer students employment with NIAS. He said it was emphasised at the meeting that this was a huge risk for the 2024-25 financial year and said that the Trust needed to commence work in September 2023 to give students a clear message on the recruitment process and timescales.

Continuing, Mr Bloomfield said that the DoH had acknowledged the issue. He pointed out that, while it was an approach he would not be supportive of, the only way for the Trust to mitigate against this would be not to fill vacancies over the next 12-18 months. He advised that the Trust currently did not have any paramedic vacancies but did have a waiting list for qualified paramedics wishing to work with NIAS. He said that officers would continue to work through this issue with DoH colleagues with a view to reaching a level of shared risk by early autumn. He undertook to keep members apprised.

Mr Bloomfield reminded the meeting that the BSc course had been one of the most over-subscribed programmes run by the Ulster University and said this would be the first cohort of paramedic students to qualify with a further three groups in train.

The Chair alluded to a number of critical issues facing the Trust including sickness absence, delayed handovers and education and was of the view that there needed to be an increase in capacity to the minimum level required. He said the Committee

would support the efforts being made by the Trust to push this issue forward.

Ms Hagan commented that Northern Ireland was a very good training region for professionals who then sought employment elsewhere.

Dr Ruddell advised that the Ulster University BSc course was limited to applicants from the island of Ireland and believed that the lack of opportunity of local employment had the potential to encourage students to seek employment outside of Northern Ireland.

Mr Bloomfield advised that, upon appointment, any newly qualified paramedic would be required to undertake a 12-month programme alongside a qualified paramedic. He said his preference would be to proceed and have DoH support for doing so.

The Chair was of the view that the future of ambulance service provision was of paramount importance and encouraged Directors to take every opportunity to emphasise this issue. He assured Mr Bloomfield of the support of the Committee and NEDs.

Following this discussion, the Committee **NOTED** the following:

- Submission Letter and Draft, Unaudited, Uncertified, Consolidated Annual Report & Accounts for the Year Ended 31 March 2023
- Submission Letter and Draft, Unaudited, Uncertified, Charitable Trust Funds Trustee's Annual Report for the Year Ended 31 March 2023

10 **Anti-Fraud Bribery Policy (including Fraud Response Plan)**
(AC18/05/23/12)

At the Chair's invitation, Ms McAuley advised the Committee that the Anti-Fraud Bribery had last been updated in 2016 and had been reviewed in line with other regional policies and the regional policy for Anti-Fraud and, as such, now included the Fraud Response Plan.

The Chair sought further information around reference to actions to be taken following the identification of corrupt practices.

The Chair referred to paragraph 3.1.6 and was of the view that the current wording was limiting and needed to be rephrased.

Mr Nicholson referred to the fact that Counter Fraud Unit now undertook the preliminary investigation and that this was included in the Fraud Plan.

Following this discussion, the Anti-Fraud Bribery Policy, including the Fraud Response Plan, was **APPROVED** on a proposal from the Chair which was seconded by Mr Ashford.

11 **Network Information Systems (NIS) Cyber Assessment Framework (AC18/05/23/13)**

The Committee **NOTED** the NIS Cyber Assessment Framework.

12 **Closed Meeting**

Following the closed meeting, the Chair noted that no issues had been identified.

13 **Any Other Business**

There were no items of Any Other Business.

14 **Date, time and venue of next meeting**

The next meeting of the Audit Committee will take place on Thursday 22 June 2023 at 10am. Arrangements to be confirmed.

ARAC dates for 2023-24 are as follows:

- 5 October 2023
- 1 February 2024
- 28 March 2024

All meetings will commence at 10am unless otherwise advised.

THIS BEING ALL THE BUSINESS, THE CHAIR CLOSED THE MEETING AT 11.50AM.



SIGNED:

(signed in Mr Abraham's absence)

DATE:

22 June 2023

FINAL