



**MINUTES OF THE GOVERNANCE, AUDIT AND RISK ASSURANCE
COMMITTEE HELD AT 9:30AM ON
THURSDAY 9 OCTOBER 2025 IN THE BOARDROOM, NIAS HQ**

PRESENT: Dr P Graham Committee Chair
Mr D Ashford Non-Executive Director
Dr P Corrigan Non-Executive Director

IN

ATTENDANCE: Mr M Riddell Assistant Director of HR & OD
Ms L Donnelly Interim Director of Finance
Ms B McCauley Assistant Director of Finance
Ms W McVeigh Temporary Assistant Director of Finance
Mr N Henry Assistant Director Governance
Ms C McKeown Internal Audit, BSO
Ms N Dowds Internal Audit, BSO
Mr P O'Sullivan Northern Ireland Audit Office
Ms S Beggs Temporary Board Secretary
Mr Rick Jan Van der Schuit ASM
Mr N Sinclair Interim Director of Operations and Chief Paramedic Officer
Ms M Lemon Director of HR & OD
APOLOGIES: Mr D Charles Internal Audit, BSO
Mr S Mullen Interim Director of Planning, Performance and Corporate Services

1. Apologies & Opening Remarks

Apologies noted as above.

The Chair welcomed members to the meeting and welcomed Ms Janine Walsh from the DoH sponsorship branch to the meeting, attending as an observer, and Mr Rick Jan Van der Schuit from External Audit.

2. Procedure

2.1 Declaration of Potential Conflict of Interest

No declarations were made.

2.2 Quorum

The Chair confirmed that the Committee was quorate.

2.3 Confidentiality of Information

The Chair confirmed and emphasised the confidentiality of information.

3. Previous Minutes

The minutes of the previous meeting on 24 June 2025 were **APPROVED** on a proposal from Mr Ashford and seconded by Mr Corrigan.

4. Matters Arising

The Committee **NOTED** the actions arising from the previous meeting have been progressed

5. Chair's Business

The Chair updated the Committee on some events that he recently attended:

- BSO Audit Meeting on 27 October re: Introduction of new Global Internal Audit Standards in the UK Public Sector
- Public Accountability and Governance Training - 11 Nov
- ARAC Chairs Forum - 5 Nov

6. Standing Items

6.1 NIAS Direct Award Contract Register

The Committee **NOTED** the NIAS Direct Award Contracts Update.

Ms McAuley confirmed that since the last meeting one DAC has been approved and there are a further two DACS pending.

The Committee were advised that the Fleet DAC will likely be approved retrospectively due to delays in that area of work.

The Chair reminded colleagues of previous discussions to avoid DACs being approved retrospectively to ensure best practice and governance assurance. Ms Donnelly advised her team continue to have Accountability Meetings with directorates and they have plans in place to avoid DACs being approved retrospectively going forward.

Mr Ashford queried why it is being approved retrospectively and Ms McAuley responded it is due to resources. Mr Corrigan queried why this is not included in the overall business case/DAC and Ms Donnelly confirmed there has been a lot of focus on approving the interim business case, however, the focus going forward will be on the wider picture, and the intention is for NIAS to set up a Task and Finish Group. Mr Corrigan reminded the Committee that the Fleet Team are attending the next meeting and Ms Donnelly agreed to seek an explanation of why this is being approved retrospectively.

ACTION: Ms Donnelly

6.2 Fraud Update

The Committee **NOTED** the update.

Ms McAuley reported there has been four new allegations of fraud/counter fraud since the last meeting.

[REDACTED] Mr Corrigan alluded to this as a procedural weakness and Internal Audit should be part of the investigation, however Ms McAuley confirmed that it was NIAS Fleet that reported this.

The Chair asked if there are timelines for the new cases with Counter Fraud and Ms McAuley confirmed Counter Fraud are generally quite quick, and she believes the first two will probably be closed soon and will provide an update at the next meeting.

ACTION: Ms McAuley

Mr Corrigan pointed out that there appears to be a common thread with new cases and previous ones. A number of cases are relating to staff working during absence and there is an agenda item today about robust internal controls, processes and procedures that need embedded and enforced.

7. Internal Audit

7.1 Advise on Key Issues

The Chair welcomed Ms Catherine McKeown to present Internal Update reports, and she introduced Ms Nicola Dowds to the Committee.

7.2 Internal Audit Progress Report

The Committee **NOTED** the report

Ms McKeown referred to page one of the report regarding performance against KPI's and IA is content with the progress at this stage. The KPI's look unusual at the minute due to a small number of reports but these numbers are expected to rise with continued effort. IA appreciate that some being dealt with at the minute are complex and require engagement.

Ms McKeown referred to page four which is the outcome of the first audit for attendance management. This audit was planned to be regarding 'absence management', but IA widened their assurance to attendance management and are now providing a satisfactory outcome. NIAS are managing absence via corporate risk and IA can see the actions taken to strengthen this area since it was awarded limited assurance. She advised that NIAS have fully implemented the actions for attendance management.

In relation to the management of leave Internal Audit identified significant control issues regarding annual leave and TOIL. NIAS do not have a procedure for TOIL for hours worked and it was identified that there are 13,700 hours owed to staff during this audit. This is a significant amount which puts further pressure on NIAS during service pressures. Therefore, IA found that within management there are insufficient corporate procedures in this area.

Key HR policies and procedures are significantly outdated and need updated.

There was a sample testing regarding absence management and return to work interviews was identified as a key finding. The second finding was the function of how staff are released for Trade Union representation and the quantum of that.

Another finding was that there are no corporate procedures for staff returning from long term leave and the redeployment register hasn't been kept up to date.

It was identified that there is no monitoring and review of staff extensions, and some cases were incorrectly implied, and there is a risk of them continuing before the end date. Management have accepted the recommendations.

Mr Corrigan said there are a number of elements linked to sick absence and absence management which these key findings contribute to. He conveyed his frustration that there are still elements not being managed sufficiently despite assurances and focus on NIAS tightly managing sick absence within the last 12 months.

Mr Corrigan queried how Operational staff are claiming TOIL instead of overtime and Ms McAuley explained that staff have a choice to take it as overtime or TOIL and a lot of staff are claiming TOIL which is why NIAS need to implement a policy. Mr Corrigan suggested that NIAS manage TOIL robustly as well as overtime.

Mr Ashford shared his concern and referred to staff being granted additional leave from next year's entitlement when they

run out of leave for the current year, and he added that this is a culture within the Organisation that needs to be addressed. The Chair agreed and highlighted this is a risk to NIAS when under pressure and need ambulances out and staff are being giving additional leave.

Ms McKeown advised that the leave comes off the balance for next year, and it is continuing for future years.

Ms McAuley confirmed for Mr Ashford that this practice has now been stopped. The Chair acknowledged the procedure has stopped but is concerned that this was a common practice for so long and unnoticed. He queried if it will be discussed at PCOD and suggested that it be discussed at Trust Board due to the seriousness. Mr Corrigan agreed that the Committee and Trust Board should receive a management response and assurance from HR, he is disappointed that there is no representation from HR or Ops today to answer queries.

The Chair asked for an update at the next GARAC meeting, however, Mr Ashford is concerned that this is too long to wait and agreed it should be discussed at the next Trust Board meeting on 23 October.

Mr Ashford conveyed his appreciation to Ms McAuley for answering the Committee's queries however, he sought assurance that this practice will cease permanently with no risk of it occurring in the future and asked if the new policies and procedures are going to be implemented soon. Ms McAuley is content that this procedure has stopped and she is meeting with colleagues from HR and Ops regarding the new policy and procedure.

The Committee requested that HR attend the next meeting as well as providing an explanation at Trust Board on 23 October. The Non Executive Directors are meeting after this meeting and will discuss with other Non Executive Colleagues.

Mr Henry confirmed that the GARAC meeting on 9 December is to focus on Internal Audit and the Chair said that due to the seriousness and concerns this should be discussed at each Committee until it is fully addressed.

The Chair welcomed Mr Michael Riddell to the meeting.

Ms McKeown advised that Ms McAuley is not responsible for checking if processes are being complied with, it is a beneficial second line assurance but the first line of assurance should be with Operations and HR. Ms McKeown sought clarity on whether the controls will be embedded and reminded colleagues that the due date is April 2026. Ms McAuley reassured the Committee that NIAS will be following this up to ensure they meet the deadline and she hopes this will be implemented before April.

The Chair welcomed Ms Lemon to the meeting, who joined by phone, and reiterated to her regarding the Committees concerns about the IA findings and recommendations they have discussed today. He asked Ms Lemon for an overview of action being taken.

Ms Lemon advised the Committee that the issue is a practice that has emerged within the Operations environment. NIAS have an annual leave policy that is out of date but this is a practice that managers are applying, however, controls have been put in place to stop these practices to ensure this does not continue.

Mr Corrigan reiterated that the Committee is very concerned about this particular audit report, he acknowledged the outcome was satisfactory regarding absence management but there are still matters that need addressed. He referred to the annual leave/TOIL matters, which are very concerning to the committee and that it is unfortunate nobody from Operations attended the meeting today to discuss with the Committee. He continued that some of these are basic procedures and the matter will be discussed at Trust Board and PCOD to ensure these are being addressed in a timely fashion.

Ms Lemon agreed with the Committees concerns and whilst acknowledging these and understanding there is further work to do, she hopes the report reflects the progress that has been achieved and that NIAS are in a more satisfactory position.

Ms Lemon referred to the non-absence elements i.e. suspensions, which some are relating to criminal cases and are being dealt with by the legal team. HR are also working with Mr Sinclair and the Operations team to have better governance around them. Ms Lemon advised the Committee that the HR team had a Governance and Assurance meeting yesterday to ensure recommendations are being followed up and improve the overall governance.

Mr Riddell added that they have established a forum to ensure managers are aware of the audit findings and closing them out as quick as possible. They are also reviewing existing gaps of extant procedures, in terms of improvement and have the agenda, minutes, papers available for Internal Audit, at any time, if required.

Mr Ashford said that the audit reflects a lack of adequate policies and leadership and he referred to NIAS providing assurance for the three lines of defence. He hopes to see an improvement and would like to see assurance quickly to ensure these practices don't occur again.

Ms Lemon conveyed her understanding of the concerns raised and reiterated her assurance that there is a policy in place and accepts the three lines of defence should give assurance, however, the practice is out of the principles of the Policy and Managers thought they could manage. Additional controls are now in place to prevent further occurrence.

Mr Riddell advised that Ms Gardner is in post with a specific portfolio for Policy Management and it was on the agenda for the Forum for Policies that need to be reviewed and is a priority.

The Committee Chair reiterated that the matter will be discussed at Trust Board and in the meantime Non-Executive Directors will discuss with the Chair.

Medicines management

Ms McKeown advised that this section starts on page 21 of the report and that whilst it provides limited assurance, they appreciate policies and procedures are in development.

One of the key findings is that there is no formal training and medicines can't be introduced due to the lack of training. All five stations didn't have access codes to the cabinets.

She advised that the Pharmacy lead doesn't have accurate records and is not carrying out a monthly check as required.

The paper-based records are highly manual and labour intensive and data is unreliable. The reporting framework needs to be clarified and a new framework implemented, which Management have accepted.

Mr Henry assured the Committee that plans for training is in place and there is a commitment for this to be a first priority recommendation and a group has been set up to manage this. This area falls within Dr Ruddell's remit and issues are reported via the Safety Committee. Mr Ashford welcomes the progress Ms Hannah has made and was frustrated about the training not being done. He added that it is disappointing that there is nobody from the Medical Directorate to provide a further explanation on same.

Ms McAuley confirmed that the three recommendations are now implemented and there are plans for 50 members of staff to be trained per month in relation to 3.1.

The Committee Chair pointed out that the management of medicines has significantly improved since Ms Hannah has commenced.

Mr Corrigan referred to the Medicines Management Group reporting through SMT but queried whether assurance is reported to Non-Executive Directors. Mr Ashford confirmed he is content with the current process that this is operational and they receive an update at the Safety Committee twice a year.

7.3 Shared Service Audits briefing paper

The Committee **NOTED** the update.

7.4 Mid-Year Follow Up

The Committee **NOTED** the update and the high-level implementation rate for recommendations (83%).

7 of the 16 significant recommendations (44 %) are fully implemented and there are 9 outstanding.

In relation to Complaints and SAI's there has been two findings partially implemented, however there are issues with the system lock down preventing others being implemented.

7.5 Head of Internal Audit Mid-Year Report

The Committee **NOTED** the Report.

8. External Audit

8.1 To advise on key issues

There were no key issues discussed.

8.2 Final RTTCWG 24-25

The Committee **NOTED** and confirmed were content with the management response.

8.3 NIAO Letter of Understanding

The Committee **NOTED** the Letter of Understanding from the NI Audit Office.

The Committee were advised of Ms Colette Kane's upcoming retirement and conveyed their thanks for her support and advice.

9. Resource and Rota Management

Ms Lemon advised the Committee that some recommendations in relation to Resource and Rota management are part of the ORH review and there is also some further ongoing work in the background regarding workforce planning. Rotas are not managed by HR and are managed by GRS but are linked to the process and procedures around that.

The Regional Policy for the management of absence has just been agreed with TUs and is waiting for formal notification that it is being implemented.

In relation to compensatory rest, there is a reference within the Agenda For Change regarding 11 hours between shifts, however, NIAS have a procedure in place that applies to 12 hours which is due to ED Handovers and safety issues with staff not finishing on time. In England there has been a contravention notice for that exact thing and one recommendation in that report is that they would consider 12 hours.

Mr Riddell is considering the development of the Bank Policy with Mr Sinclair and they are meeting tomorrow with staff to look at the elements to progress that policy.

NIAS have implemented a more advanced governance process for vacancies and have appointed a band 6 within Operations to manage vacancies in accordance with the workforce plan. NIAS have met with BSO about additional resources within BSO to assist and are organising a meeting with tactical planning to take this forward.

Ms Lemon advised that some areas are operational and HR are not able to comment on these. Mr Ashford welcomes the progress but would like a further update with Operations present, however, Mr Sinclair is meeting with Non-Executive Directors this afternoon to provide an update.

10. Update on Unsocial Hours IA progress

The Committee **NOTED** the update following report which provides the progress for implementation of the audit recommendations regarding unsocial hours payments.

Mr Riddell and Ms McAuley are working hard to progress the recommendations which are hugely significant.

Mr Riddell advised the Committee they have set up a working group which is a sub group of JCNC to report into the main JCNC to understand the issues in more detail from a TU

perspective. At the first meeting they gained better understanding of the issues with TUS and are planning a further meeting to resolve and provide evidence. Ms Lemon made the Committee aware that with potential further IA action it could affect the ability for NIAS to get all of this over the line.

Mr Corrigan asked for a sense of what the issues are from TUs and Mr Riddell responded one area is how bank holidays are included in rotas, as well as paid meal breaks and how annual leave and TOIL is used. Another significant area is how NIAS calculate the percentage for relief and they need to reach a position that there is a regular review.

Mr Riddell said there has been a good articulation of issues, TUs are advising what they have agreed locally as part of an agreement and if NIAS wish to change this agreement it needs to be negotiated.

From an employment law perspective NIAS need to enter formal negotiations for matters requiring change, which is not an easy process.

NIAS are still in ASOS and ballots are expected in the next few weeks for strike action.

Mr Ashford pointed out this process has identified some serious nuances and the result needs to achieve better governance and remove complex difficult controls.

Ms Lemon welcomed the points raised regarding negotiation and assured the Committee NIAS are doing everything they can to progress, however some elements require investment in new staff and with that will come change in practice.

The Committee thanked Ms Lemon and Mr Riddell for joining the meeting and sought clarity on whether the significant findings are reflected in the Risk Register. Mr Henry confirmed that he plans to review this as a result of the significant conversations regarding the findings around absence management. He confirmed they are current risks as opposed to new risks, but they need refined and it will be a helpful opportunity to articulate and present at Trust Board.

11. IG and Cyber Security Update

The Committee welcomed Mr Marcus and Ms Avery to the meeting. Mr Henry advised that as a result of revising the Terms of Reference it was identified that one area for strengthening updates to the Committee was in relation to Information Governance and Cyber Security, which will be a recurring briefing. NIAS have re-established the Cyber Security and IG Performance meetings.

Ms Avery reported that from an IG perspective, performance is stable and compliant and she reiterated they have established an IG working group. They work collaboratively with ICO in terms of compliance and meetings indicated a positive performance and they are pleased with the progress to date.

The Committee welcomes the positive progress and commended the report which was self-explanatory. Mr Corrigan reminded Committee members that Board members are receiving Cyber training from BSO at the upcoming Trust Board Meeting.

The Committee asked if there is anything on the Corporate Risk Register regarding cyber security and Mr Marcus confirmed there is a permanent risk included as it is always a risk.

The Committee **NOTED** the updates and thanked Mr Marcus and Ms Avery for their attendance and informative reports.

12. Board Governance Self-Assessment Tool

The Committee **NOTED** the Report.

Mr Henry advised that this report has been an annual activity to return to the DoH to provide assurance of good practice. The DoH have recently confirmed that this is no longer required however, NIAS have completed the template for this year and will revise for next year for an in-house evaluation.

Internal Board and Committee governance was flagged as a recommendation and priority should be given to take this forward at Board meetings and with the SLT.

There was a recommendation in relation to good practice requirements for post business cases, which is being addressed via the SPF Committee.

There is a requirement for succession planning for critical posts and the NIAS Board should decide any gaps in skills and abilities.

It was identified that there should be more Non-Executive Director engagement with staff and opportunities for them to participate in activities within the next year.

Mr Henry is working on a simplified version of the tool and benchmarking with other Trusts. The Committee agreed that a more streamlined version would be useful and suggested every third year having an external validation, however, Internal Audit carried out an audit two years ago which was satisfactory and are due to carry out another next year.

Mr Ashford advised that succession planning for critical posts is out of the remit of the Board and responsibility for this is ministerial but the Chair can recommend any gaps officially/unofficially to the DoH.

13. NIAO Checklist

The Committee **NOTED** the NIAO's March 2025 Audit Committee best-practice checklist which has been completed for GARAC.

The Committee is mostly compliant with the essential requirements and good practice and there are a small number of areas of variance, some of which are procedural and can be improved by tweaking the cover page and tracker for correspondence from DoF.

The report suggests formally documenting skills and abilities of NEDs and benchmarking the requirements, which should be

documented before the end of the year. It also suggests particular topics being reported at Committees i.e. formalising whistleblowing oversight at a Committee and that an Annual Whistleblowing Report should be reported to the GARAC Committee.

Mr Corrigan advised that whistleblowing is reported a couple of times a year via a meeting with HR.

The report suggests that ToR should be tabled at each meeting of GARAC, however, the Committee agreed they are content that an annual review is sufficient.

It is suggested that GARAC should have sight of ESG risks and be reported to the SPF Committee, and Mr Henry advised these are scheduled for the end of November but they may be required to flag anything significant to the GARAC Committee.

Mr Corrigan reminded the Committee to ensure they are not bringing too many matters to Committees as it is important that they have adequate time to discuss matters, however he agreed that they can escalate an issue to GARAC by exception if required.

14. Mid-Year Assurance Statement

The Committee **NOTED** the DOH Mid-Year Assurance Statement for 2025-26 which is to be returned to the Department by 10 October 2025.

Mr Corrigan pointed out that the mid-year assurance is tabled at Trust Board on 23 October which also refers to IA and will initiate discussions about the significant findings discussed today.

15. DoH correspondence

None to report

16. GARAC Forward Work Plan

The Committee pointed out that Driver issues and Medicines is also reported at the Safety Committee and that there are still matters reported across different Committees.

Mr Corrigan advised that Fleet and Estates including expenditure is due to be presented at the next SPF Committee on 27 November which may affect the risk register. Sustainability is scheduled for the February meeting which is very late in the financial year to look at this.

Mr Ashford continues to meet with the Operational team regarding HART and is pleased they have recruited to double the size of the HART team and focus is now on recruiting for the full team.

The Chair suggested ensuring Directors are reviewing their devolved areas as part of the Risk Register to focus on what needs to be delivered and specific items are brought to the NEDs attention via the corporate risk register.

Mr Henry assured the Committee that one of the foundations of the forward work plan is the risk register. Mr Corrigan pointed out that they need to have oversight of all governance processes and as part of the assurance framework is the Charitable Trust Fund.

17. Any Other Business

No other matters discussed.

The Chair thanked all members for their attendance and contribution.

18. Closed Meeting

19. Date of Next Meeting

9 December 2025

This meeting is to focus on the Internal Audit recommendations and suggested they meet via MS teams, which can be changed to face to face depending on the recommendations. Ms McAuley agreed to identify if they are significant to determine if a face to face meeting is required.

ACTION: Ms McAuley

**THIS BEING ALL THE BUSINESS, THE CHAIR DECLARED THE
MEETING CLOSED AT 11.45AM**

A handwritten signature in black ink, appearing to read "P. Grubman", is written over a light gray rectangular background.

SIGNED: _____

DATE: 9/12/25

FINAL