





# NIPSO AUDIT AND RISK COMMITTEE MINUTES

# **MEETING 25th October 2024, NIPSO, Progressive House**

### **Members Present:**

Dónall Curtin – Chair; Independent Member (DC) Terry McGonigal – Independent Member; (TM) Patricia Snell - Independent Member, (PS)

### In Attendance:

Margaret Kelly – Accounting Officer/Ombudsman; (MK) Sean Martin –Deputy Ombudsman; (SM) Kirsty McCool – Director of Governance and Support Services (KM) Kathy Doey – NIAO (KD) Graham Gilespie - WGB (GG) - Virtually Sarah Sherry – NIPSO; Secretariat (SS)

| Item | Minute   |
|------|--|
| 1.   | Apologies  |
|      | Apologies from Scott McCready WGB  |
| 2.   | Conflicts of Interest  |
|      | DC invited those present to register any actual or perceived conflicts of interest relevant to the agenda.                         |
|      | No conflicts were noted.   |
| 3.   | Minutes  |
|      | Minutes from 21 <sup>st</sup> August 2024 were agreed.   |
| 4    | Update on Action Points  |
|      | SM updated the following on outstanding actions:   |
|      | Advisory Committee – still under consideration, DC would like an action date of the end of Q4 to be included in the action points. |
|      |  |
|      |  |

## 5 Ombudsman Update (verbal)

MK advised that both the Ombudsman Report and Commissioner Report have been redesigned, and published, and are available online, printed copies are also available. The Ombudsman report indicates a significant increase in complaints in 2023/24. Projections for 2024/25 indicate that the increase in the number of complaints will continue and current forecasts indicate around1,400 complaints. This marks a substantial rise in the volume of complaints compared to previous years, highlighting the growing demand for NIPSO's services.

MK and SM recently met with the NI Assembly Audit Committee to discuss the need for an increased budget. The focus was on conducting a pay and grading review as well as the need for additional Investigating Officer (IO) staff.

NIPSO received significant media coverage recently, regarding the report of an investigation into the restraint of a child.

DC queried communication with the Assembly regarding the need for further funding. In response, SM informed the committee that the team is reviewing their progress to identify areas for improvement. Additionally, they are actively working on enhancing Complaints Standards to better meet the needs of service users.

JH and SM had been invited to the Education Committee regarding Restraint and seclusion. MK and SM will be attending the Health committee on the 14<sup>th</sup> November.

# 6 Financial Management

The 2025-26 budget request was presented to NIAAC on the 16<sup>th</sup> October 2024, and included proposed recommendations as a way forward on a possible pay and grading review. It is anticipated that NIAAC will write to DoF and any queries arising from the consultation will be addressed at a further committee meeting after which it is expected the committee will communicate its position on NIPSO's budget.

DC acknowledged the tightness of the current overall position of the management accounts.

### 7 Case Performance Management

SM reported that the KPIs were met, however, there has been considerable pressure on staff. The total number of decisions at KPI1 is 800, compared to 659 last year.

TMcG requested prompt payment performance reported in the ARC papers.

### 8 Internal Audit

GG provided an overview of the NIPSO Case Management Audit.

Following the review, WBG provided a satisfactory level of assurance on the case management arrangements in place and confirmed that they are being adhered to by staff. There were no recommendations and several good practice points were recorded.

SM noted that the team found the audit a beneficial and useful exercise. The team were pleased to note the satisfactory assurance and confirmation of their adherence to appropriate procedures.

GG reviewed the Follow Up Review 24/25.

11 recommendations have been fully implemented, 1 not yet due, 2 are classified as partially implemented, and two implementation dates have been revised – 30/11/24 and 30/12/24.

GG confirmed that the first audit experience with NIPSO was very positive. He described it as a smooth process, emphasizing the ease of access to staff and the strong support provided by management throughout the audit.

# 9 External Audit - NIAO Update

The report to those charged with Governance was taken as read. KD confirmed that the accounts were certified on the 2nd July 2024.

### 10 Business Plan – Q3

KM advised of the 73 objectives, 4 are amber and are still on target to be achieved by the end of the financial year.

### 11 | Risk Register – Q3

KM confirmed there were no changes to the scoring and risks. The description in Risk 1 has been amended.

DC advised he had recently viewed a Risk Management package – which he thought would be useful for KM to review.

## 12 | Schedule of Progress Against Audit Recommendations Database Update

KM highlighted the recent progress by SMT in-relation to the older recommendations, which are almost complete. The following remain outstanding:

DC requested that old recommendations be kept within a master sheet however they need not be presented to every ARC meeting.

## 13 Communications Presentation

AR joined the meeting and provided an Overview of Communications

AR advised that NIPSO has a 3 year Communication Strategy 2022-2025, which will be reviewed next year.

He further advised an annual Communication Plan is prepared. This document sets out the communication priorities for the year ahead. It draws on the communication and engagement strategy, which provides the strategic direction on external communication and reflects the priorities of the Office's Business and Strategic Plan. A publications and media planning timetable is discussed at each SMT meeting.

Communication is a support function within NIPSO therefore some of the activity is reactive and determined by the publications produced.

As well as communicating the core role, he and other staff members promote the 3 key messages which are:

- 1 Establish a Patient Safety Framework for NI
- 2 Improving trust in public services
- 3 Improving the experience of complaining about public services.

DC suggested after each year's end – AR should reflect on what worked and feedback should be provided to the Ombudsman. This approach aims to ensure valuable insights are captured and incorporated into processes and outcomes for the future.

AR discussed the Crisis Communication Plan.

DC encouraged the testing of the plan, and a review if a situation arises where the plan was activated. He also indicated the Chair of ARC should be updated if the Crisis Communication Plan is implemented.

### 14 Comment on Information Items

No comments

## 15 Date of next meeting

Thursday 30<sup>th</sup> January 2025 – Progressive House, Pre-Meet at 2.30 pm for Chairperson, Committee Members, Ombudsman and Deputy Ombudsman

Main Meeting 3.00 pm