

MID-YEAR ASSURANCE STATEMENT

This statement concerns the condition of the system of internal governance in the Northern Ireland Social Care Council as at **30 September 2022**.

The scope of my responsibilities as Accounting Officer for the Northern Ireland Social Care Council, the overall assurance and accountability arrangements surrounding my Accounting Officer role, the organisation's business planning and risk management, and governance framework, remain as set out in the Governance Statement which I signed on 8 July 2022. The purpose of this mid-year assurance statement is to attest to the continuing effectiveness of the system of internal governance. In accordance with Departmental guidance, I do this under the following headings.

1. Governance Framework

The Governance framework as described in the most recent Governance Statement continues in operation. The Audit and Risk Assurance Committee and the Remuneration Committee have continued to meet and to discharge their assigned business. Minutes of their meetings, together with board meeting minutes containing the Committees' reports, are available for Departmental inspection to further attest to this.

2. Assurance Framework

An Assurance Framework, which operates to maintain, and help provide reasonable assurance of the effectiveness of controls, has been approved and is reviewed by the board. Minutes of board meetings are available to further attest to this.

3. Risk Register

I confirm that the Corporate Risk Register has been regularly reviewed by the board of the organisation and that risk management systems/processes are in place throughout the organisation. As part of the board-led system of risk management, the Register is presented to every Audit and Risk Assurance Committee for discussion and approval and all significant risks are reported to the Board – most recently on 12 October 2022.

In addition I confirm that Information Risk continues to be managed and controlled as part of this process.

4. Performance against Business Plan Objectives/Targets

I confirm satisfactory progress towards the achievement of the objectives and targets set by out in the organisation's business plan as approved by the Department with no exceptions.

5. Finance

I confirm that proper financial controls are in place to enable me to ensure value for money, propriety, legality and regularity of expenditure and contracts under my control, manage my organisation's budget, protect any financial assets under my care and achieve maximum utilisation of my budget to support the achievement of financial targets.

I confirm compliance with the principles set out in MPMNI and the Financial Memoranda which includes:

- safeguarding funds and ensuring that they are applied only to the purposes for which they were voted;
- seeking Departmental approval for any expenditure outside the delegated limits in accordance with Departmental guidance;

- preparation of business cases for all expenditure proposals in line with Northern Ireland Guide Expenditure Appraisal and Evaluation (NIGEAE) and Departmental guidance and ensuring that the organisation's procurement, projects and processes are systematically evaluated and assessed;
- accounting accurately for the organisation's financial position and transactions;
- securing goods and services through competitive means unless there are convincing reasons to the contrary; and
- procurement activity should be carried out by means of a Service Level Agreement with a recognised and approved Centre of Procurement Expertise (CoPE)

6. Information Governance – General Data Protection Regulation (GDPR) & Data Protection Act (DPA) 2018

I can confirm that my organisation has taken appropriate steps and is carrying out the necessary actions to ensure ongoing compliance with GDPR and DPA 2018.

7. External Audit Reports

I confirm implementation of the external auditor's accepted recommendations with no exceptions.

8. Internal Audit

I confirm that action plans are in place to implement all accepted recommendations made by internal audit.

9. Other Reports

There were no external reports in the assurance period April to September 2022.

10. NAO Audit Committee Checklist

I confirm completion of the NAO Audit Committee Checklist and that action plans will be implemented to address any issues. I also confirm that any relevant issues will be reported to the Department.

11. Board Governance Self-Assessment Tool

I confirm completion of the Board Governance Self-Assessment Tool and that action plans will be implemented to address any issues. I also confirm that any relevant issues will be reported to the Department.

12. Internal Control Divergences

I confirm that my organisation meets, and has in place controls to enable it to meet, the requirements of all extant statutory obligations, that it complies with all standards, policies and strategies set by the Department; the conditions and requirements set out in the MSFM, other Departmental guidance and guidelines and all applicable guidance set by other parts of government. Any significant control divergences are reported below.

- a) The Social Care Council was to move premises to James House as part of the Belfast Optimisation Project in July 2022. Due to contractor delays this date was moved to October 2022 (and subsequently February 2023). This placed the organisation in a significant financial deficit as it was funded on the basis of a move of premises in July 2022 which would have resulted in a significant savings in rent and related accommodation costs. The Social Care Council sought permission to secure a further short-term lease in its current premises at Millennium House until such time as the premises at James House can be occupied. The organisation has escalated the financial deficit to its sponsor organisation and also to the Department of Finance, who are responsible for the overall management and delivery of the Belfast Optimisation Project.

- b) The Department of Health (DOH) policy to defer registration fee income in response to the COVID pandemic had a significant impact on the organisation's fee income and recovery. The Social Care Council adopted IFRS 15 Revenue from Contracts with Customers (IFRS 15) in the way that it accounts for fees. On the back of the unique circumstances presented by the DoH policy to defer fees, the Audit and Risk Assurance Committee queried the way in which the organisation treated deferred fee income over previous years and the Business Services Organisation (BSO) Finance produced an Income Recognition Paper and Fee Income Review Report which presented a chronology of events from year end last year (2021/22) and how the current income treatment methodology came to fruition. The Audit and Risk Assurance Committee endorsed the methodology retrospectively for the calculation of fee and deferred fee income while noting the change had not been brought to them for prior approval.

13. Mid-Year Assurance Report from Chief Internal Auditor

I confirm that I have referred to the mid-year Assurance report from the Chief Internal Auditor, which details the organisation's implementation of accepted audit recommendations.

Signed:

Date:

CHIEF EXECUTIVE & ACCOUNTING OFFICER