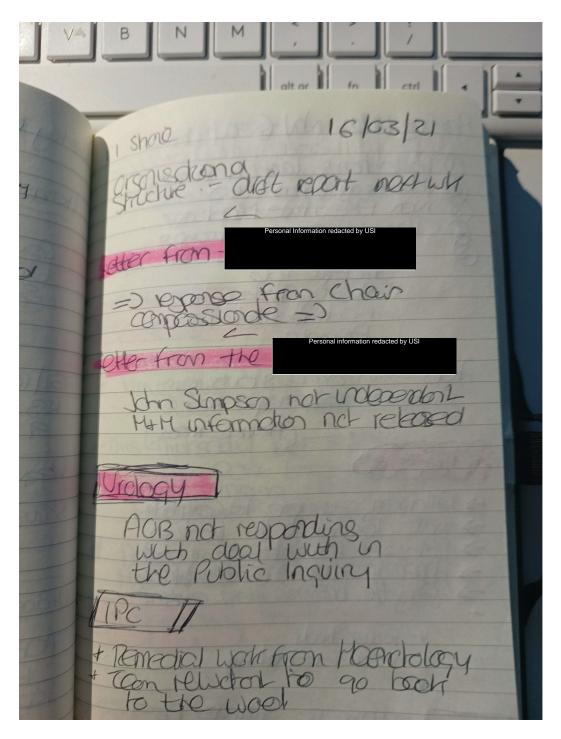
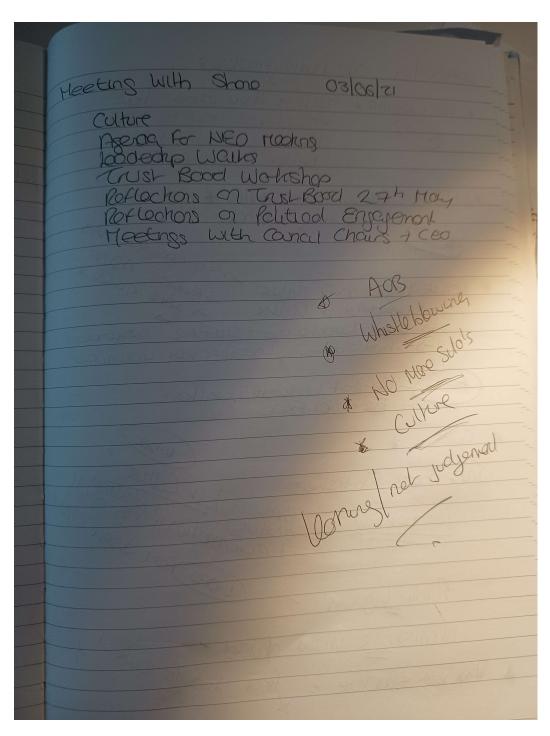
## WIT-101476



Received from Eileen Mullan on 26/09/2023. Annotated by the Urology Services Inquiry.

## WIT-101477



Received from Eileen Mullan on 26/09/2023. Annotated by the Urology Services Inquiry.

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### Dr Maria O'Kane, Chief Executive – Ms Eileen Mullan, Chair 1-1 11:30am, 30<sup>th</sup> January 2023

#### 1. Matters Arising

#### **General Matters**

a. Review of Action log

Leadership walks – Standardise the format of walks

Action - Ruth to speak to Chair

Merseycare visit to SHSCT being planned, will be a meet with the Chair as part of the programme.

#### b. Update from Permanent Secretary Meeting

Useful meeting, able to build on reporting going forward – Sandra, Lesley and Catherine have met to discuss approach to Partnership agreements. Efficiency and productivity of Trust to be developed.

#### c. Update from Elected Representatives Meeting

Discussion update from elected representatives meeting.

#### d. Regional Efficiency Board

Discussion how ICPBs will shape services, update on the Telford scoring regarding service provision levels within the Trust. Scope of reduction in waste to support efficiency drive. CX discussing with regional CX's potential for efficiency drives.

#### **Trust Board**

- a. Board Workshop 21<sup>st</sup> February 2023 @ 2.00 3.30 p.m. on Financial Planning for 2023/24 Workshop to update Trust Board regarding efficiencies to be held in February 2023.
- Board Workshop on 23<sup>rd</sup> March 2023 am with IHRD team
   Peter McBride visit to discuss IHRD findings with Trust Board
- c. Board Workshop in April 2023 on new C&SCG structures date needs agreed (27<sup>th</sup> April is one option)

Date for update agreed.

#### 2. Organisational Culture / Development

a. Merseycare Visit (23<sup>rd</sup> and 24<sup>th</sup> February 2023)
 Discussed under matters arising

### 3. Urology Services Inquiry

a. Update on USI

Update and discussion on USI current position

b. Lookback Progress Update

Discussion around the GIRFT revew

#### 4. Industrial Action

a. Industrial Action Update

Impact on waiting lists and cancellations, working to mitigate impact.

#### 5. SMT Appointments / Positions

 Director Surgery, Interim Director of Surgery and Elective Care, Integrated Maternity and Women's Health, Cancer and Clinical Services

Interviews this week Received from Eileen Mullan on 26/09/2023. Annotated by the Urology Services Inquiry



- b. Director Performance and Reform Interviews this week
- c. Organisational DevelopmentTo bring forward to next meeting agenda

### 6. Provision of Emergency General Surgery in the Southern Health and Social Care Trust

General Surgery Options Appraisal
 Consultation launch last Friday, in progress

#### 7. Cytology Update

a. Progress UpdateReferred to Trust Board update

#### 8. Clinical and Social Care Governance Review

a. Review of Operational Governance
 To prioritise this for Acute Services following appointment of SEC Director

b. Trust Board Workshop April 2023 – New Structures Update
Discussed under matters arising

#### 9. Directorate Accountability Meetings

a. 2023/24 Format
 Adult services meeting last week, useful format. Separate from 1-1 meetings with CX and Directors

### 10. Any Other Business

a. Nuffield VisitDiscussed under matters arising

#### 11. CX Performance Review

a. Private Practice DeclarationSigning to be agreed



# Dr Maria O'Kane, Chief Executive – Eileen Mullan, Chair 1-1 2:00pm 28<sup>th</sup> February 2023

1.	Ma	tters Arising	
		Review of Action Log (Paper Attached)	
	b)	Governance Committee 12 <sup>th</sup> January 2023	
		• Learning from Experience – Forum Report Violence and aggression Quality Improvement	
		initiatives within the Bluestone Unit to be presented at a future Board Workshop.	
		Risk Appetite – Risk Appetite Statement to be further developed – timescale to be agreed  Risk Appetite – Risk Appetite Statement to be further developed – timescale to be agreed	
		<ul> <li>Directors Visits &amp; Leadership Walks – working towards a single appropriate approach.</li> </ul>	
	c)	Governance Committee 09 <sup>th</sup> February 2023	
	٠,	Corporate Risk Register – Consideration to be given to sharing/escalation of risk between	
		g,g,	
		MHPS Training Programme	
2	0**	anisational Cultura	
۷.	_	anisational Culture Organisational Development Update	
	ω,	organisational severopment opuate	
	b)	Well Led Organisation (Paper Attached)	
	c)	Joe Rafferty Visit	
	d)	Implementation of Collective Leadership	
3.	Оре	erational Update	
	a)	Agency Spend / Beds	
	4.1	December 2011 - 2022/22	
	b)	Break Even Position 2022/23	
	c)	Transformation Board - Quintuple Aim Board	
4	Dra	ft Partnership Agreement – For Review Discussion (Paper Attached)	
₹.	Dia	it raithership Agreement - For Neview Discussion (ruper Attuction)	
_			
5.		logy Services Inquiry	
	a)	Update on USI	
	b)	Learning and Quality Assurance for Trust Board	
	c)	PIPERG Update	
8.	C	nampion Governance Report Review (Paper Attached)	
0.		Steering Groups	
	- ,		
	b)	Committee Structure – Trust Board Update April 2023	
9.		Cytology Update	



and Social Care Trust	
10. Nuffield Update	
11. Regional Matters	
a) Fiscal Council Meeting – outcome/focus from FC meeting held on Wednesday 15 <sup>th</sup>	
February	
, , , , , , , , , , , , , , , , , , , ,	
b) NICON Strategic Planning Workshop - 2023/24 and Beyond, Thursday 16 <sup>th</sup> March 2023	
(Paper Attached)	
(Taper Attached)	
s) Pagional Dragramma Efficiency Bods Wasta productivity and agency costs (Daner	
c) Regional Programme Efficiency Beds, Waste, productivity and agency costs (Paper	
Attached)	
d) Health Economics Unit Engagement / John Appleby	
12. Emergency General Surgery Consultation	
a) Approach and plan for consultation events	
b) SWAH Consultation Feedback	
c) Perm Sec Engagement	
13. CESR Certificate of Eligibility for Specialist Registration or Certificate of Eligibility for GP	
Registration application	
14.CX Performance Review	
a) 360 Appraisal Tool (Paper Attached)	
a) 300 Appraisal 1001 (Lapel Accadined)	
b) Signed 4 month CEO Performance Review	
b) Signed 4 month CLO Performance Review	
c) MSc in Coaching Institute of Continuing Education	
c) MSc in Coaching – Institute of Continuing Education	
45 Avv Other Duringer	
15.Any Other Business	
a) Trust HQ – Administration Review (Hugh McPoland)	
b) Minutes of Trust Board Corporate Clinical and Social Care Governance Workshop (Paper	
Attached)	



### 2:00pm 14<sup>th</sup> March 2023

	Issue	
1.	Matters Arising	
	a) Review of Action Log (Paper Attached)	
2.	Trust Board Meeting	
	a) Meeting 30th March (Agenda and Boardroom)	
	b) Workshop 23rd March	
	<ul><li>c) Board and Committee meetings (face to face and virtual)</li><li>d) Support for SMT</li></ul>	
	· · · · ·	
3.	Organisational Culture	
	a) Corporate Plan Update b) Joe Rafferty Visit	
	c) Implementation of Collective Leadership	
	i) Deputy Chief Executive	
	ii) Chief Operating Officer	
	d) Director of Performance and Reform	
4.	Operational Update	
	a) Agency Spend / Beds	
	b) Break Even Position 2022/23	
	c) Transformation Board - Quintuple Aim Board	
5.	Draft Partnership Agreement (Paper Attached)	
6.	Urology Services Inquiry	
	a) Update on USI	
	b) Learning and Quality Assurance for Trust Board	
	c) ERG Update	
	d) UAG Update	
8.	Champion Governance Report Review	
	a) Steering Groups	
	b) Committee Structure – Trust Board Update April 2023	
9.	Cytology Update	
	a) Update	
10	. Nuffield Update	
	a) Update	
11	. Regional Matters	
	a) Health Economics Unit Engagement / John Appleby	
	b) CEO Regional Activities	
12	. Emergency General Surgery Consultation	
	a) Update	
13	Any Other Business	
	a) Trust HQ – Administration Review (Personal Information redacted by the USI	
	b) Personal information redacted by USI (Paper Attached)	
	c) Personal Information redacted by the USI Letter (Paper Attached)	
	d) Newry and Mourne and ABC Council	
	e) Monaghan Row / Newry CTC	
	f) Risk Appetite Statement (Paper Attached)	



### 2:00pm 27<sup>th</sup> March 2023

	Issue	
1.	L. Matters Arising	
	a) Review of Action Log (Paper Attached)	
2.	2. Trust Board Meeting	
	a) Meeting 30th March	
	b) Risk Appetite Workshop 18 <sup>th</sup> May 2023	
3.	3. Organisational Culture	
	a) Corporate Plan Update	
	b) Joe Rafferty Visit	
	c) Implementation of Collective Leadership	
	i) Deputy Chief Executive	
	ii) Chief Operating Officer	
	iii) Director of Cultural Transformation	
	iv) Director of Transformational Change	
	d) Director of Performance and Reform	
4.	4. Operational Update	
	a) Agency Spend / Beds	
	b) Break Even Position 2022/23	
5.	5. Urology Services Inquiry	
	a) Update on USI	
	b) Lookback Review and RQIA (Chair)	
	c) ERG Update	
	d) SPPG Approach (Chair)	
8.	8. Champion Governance Report Review	
	a) Steering Groups	
	b) Committee Structure – Trust Board Update April 2023	
9.	9. Cytology Update	
	a) Update	
10	10. Nuffield Update	
	a) Update	
11.	L1. Regional Matters	
	a) Health Economics Unit Engagement	
12	12. Proposed Surgery Changes	
	a) Update on Emergency Surgery Consultation	
	b) Reflections from Public Meeting	
	c) DHH Elective Surgery Update	
13	13.Any Other Business	
	a) Trust HQ – Administration Review	
	b) Personal Information redacted by the USI Letter	
	c) Appointment of HSC Chairs (Chair)	
	d) NED Recruitment Update (Chair)	
	e) Chair Meeting with Peter May (Chair)	



# 6:00pm 20<sup>th</sup> April 2023

	Issue	
1.	Matters Arising	
	a) Review of Action Log (Paper Attached)	
2.	Trust Board Meeting	
	a) Clinical and Social Care Governance Workshop 27 <sup>th</sup> April 2023 (Paper Attached)	
	b) Risk Appetite Workshop 18 <sup>th</sup> May 2023	
2	Overviortional Culture	
3.	Organisational Culture a) Corporate Plan Update	
	b) Joe Rafferty Visit	
	c) Implementation of Collective Leadership	
	i) Deputy Chief Executive Posts	
	ii) Director of Cultural Transformation	
	iii) Director of Transformational Change	
	d) Director of Performance and Reform	
4.	Operational Update	
	a) Agency Spend / Beds	
	b) Break Even Position 2022/23	
_		
5.	Urology Services Inquiry a) Update on USI	
	b) Lookback Review and RQIA (Paper Attached)	
	c) ERG Update	
	d) SPPG Approach (Chair)	
	The second secon	
8.	Champion Governance Report Review	
	a) Steering Groups	
	b) Committee Structure – Trust Board Update April 2023	
9.	Cytology Update	
	a) Update (Paper Attached)	
10.	Daisy Hill Hospital	
	a) Nuffield Update (Paper Attached)	
	b) Dr Seamus Murphy Email (Paper Attached)	
	c) DHH Elective Surgery	
11.	Regional Matters	
	a) Health Economics Unit Engagement	
12.	Proposed Surgery Changes	
	a) Update on Emergency Surgery Consultation	
12	Any Other Business	
13.	a) Trust HQ – Administration Review	
	b) NI Sport Report (Paper Attached)	
	c) Personal Information redacted by the USI	
	d) Appointment of HSC Chairs (Chair)	
	e) NED Recruitment Update (Chair)	
	f) Chair Meeting with Peter May (Chair)	
	g) Leadership Walk Template (Paper Attached)	
	h) NED Visit Edenvilla (Paper Attached)	



## 2:00pm 2<sup>nd</sup> May 2023

	Issue	
1.	Matters Arising	
	a) Review of Action Log (Paper Attached)	
2.	Trust Board Meeting	
	a) Clinical and Social Care Governance Workshop 27 <sup>th</sup> April 2023	
	b) Risk Appetite Workshop 18 <sup>th</sup> May 2023	
_	Overwingtional Culture	
3.	Organisational Culture	
4.	Operational Update	
	a) Corporate Plan Update	
	b) Financial Update	
5.	Urology Services Inquiry	
	a) Update on USI	
	b) ERG Update	
8.	Champion Governance Report Review	
	a) Recommendation 11 Discussion (Paper Attached)	
9.	Cytology Update	
	a) Update	
10	. Daisy Hill Hospital	
	a) Nuffield Engagement	
	b) DHH Elective Surgery	
11.	Regional Matters	
	a) Health Economics Unit Engagement	
	b) Regional Heath Blueprint	
12	Proposed Surgery Changes	
	a) Update on Emergency Surgery Consultation	
13	Any Other Business	
	a) Trust HQ – Administration Review	
	b) CX Meeting with Peter May	
	c) Leadership Walk Reflections (Paper Attached)	
	d) Meetings and Protected Time (Chair)	
	e) COVID SAI Trust Board CX Business (CX)	
	f) IHRD Recommendation 81 (Paper Attached)	



## 2:00pm 16<sup>th</sup> May 2023

Issue	
1. Matters Arising	
a) Review of Action Log (Paper Attached)	
2. Trust Board Meeting	
a) Risk Appetite Workshop 18 <sup>th</sup> May 2023	
b) Trust Board Meeting 25 <sup>th</sup> May 2023	
3. Daisy Hill Hospital	
4. Organisational Update	
a) Corporate Plan Update	
b) Financial Update	
5. ESG Consultation and Trust Board Preparedness	
a) Pre- mortem	
b) Consideration of standalone meeting as a single agenda	
6. Urology Services Inquiry	
a) Update on USI	
b) ERG Update	
8. Cytology Update	
a) Update	
9. Regional Matters	
a) Regional Heath Blueprint	
12. Appraisal	
a) Chair 360	
b) MSc Cambridge	
13.Any Other Business	
a) Trust HQ – Administration Review	
b) Leadership Walks and reporting through to Governance Committee	



## 8:00am 30<sup>th</sup> May 2023

Issue	
1. Matters Arising	
a) Review of Action Log (Paper Attached)	
2. Trust Board Meeting	
a) Trust Board Meeting Follow Up 25 <sup>th</sup> May 2023	
3. Daisy Hill Hospital	
4. Organisational Update	
a) Corporate Plan Update	
b) Financial Update	
5. ESG Consultation and Trust Board Preparedness	
a) Pre-mortem	
b) Consideration of standalone meeting as a single agenda	
6. Urology Services Inquiry	
a) Update on USI	
b) ERG Update	
8. Cytology Update	
a) Update	
9. Regional Matters	
a) Regional Heath Blueprint	
12. Appraisal	
a) Chair 360	
b) MSc Cambridge	
13.Any Other Business	
a) Trust HQ – Administration Review	
b) Leadership Walks and reporting through to Governance Committee	



### 5:00pm 9<sup>th</sup> June 2023

Issue	
1. Matters Arising	
a) Review of Action Log (Paper Attached)	
2. Trust Board Meeting	
a) Trust Board Meeting 22 <sup>nd</sup> June 2023	
3. Second Emergency General Surgery Consultation	
4. Daisy Hill Hospital	
5. Organisational Update	
a) Corporate Plan Update	
b) Financial Update	
6. ESG Consultation and Trust Board Preparedness	
a) Pre- mortem	
b) Consideration of standalone meeting as a single agenda	
7. Urology Services Inquiry	
a) Update on USI	
b) ERG Update	
8. Cytology Update	
a) Update	
9. Regional Matters	
a) Regional Heath Blueprint	
10.Appraisal	
a) Chair 360	
b) MSc Cambridge	
11. Any Other Business	
a) Trust HQ – Administration Review	
b) Leadership Walks and reporting through to Governance Committee	



### 2:00pm 18<sup>th</sup> July 2023

### **Medical Directors Office, Daisy Hill Hospital**

	Issue	
1. Ma	tters Arising	
a)	Review of Action Log (Paper Attached)	
2. Bet	tter Outcomes	
	oard Meeting	
a)	July Trust Board Meeting Reflection	
•	ited Governance Framework	
b)	Governance Committee Steering Groups	
c)	Draft Strategy and Transformation Committee (Paper Attached)	
3. He	althy Lives	
	Iill Hospital Update	
a)	Current Position	
b)	DHH Governance Structure	
c)	Collaborative Group	
d)	Planning of Visits to Similar Trusts	
e)	DHH – Newry Accommodation Request	
DLS Bre	eakeven / Duty of Quality Response	
f)	Response from June Turkington (Paper Attached)	
4. Bet	ter Value	
Organi	sational Update	
a)	Corporate Plan (Paper Attached)	
b)	Financial Update	
c)	Potential Well Led Engagement	
5. Imp	provement	
Emerge	ency General Surgery Consultation and Trust Board Preparedness September	
	Pre-mortem	
b)	Consideration of standalone meeting as a single agenda	
	y Services Inquiry	
c)	Update on USI	
d)	ERG Update	
Cytolog	gy Update	
e)	Update	
6. Go	od Partners	
_	al Matters	
	Regional Heath Blueprint	
	ment with Local Councils	
b)	Council Engagements	
7. Ou	r People	
CESR P	rocesses	
a)	Royal College and GMC	
Apprais	sal and Development	
b)	MSc Cambridge	
c)	Recuperation of Monies	
8. Any	Other Business	
a)	Trust Leadership Development (Joe Rafferty)	
b)	Leadership Walks and reporting through to Governance Committee	
c)	Risk Appetite Position	
d)	Trust HQ – Administration Review / Head of Office Role (Paper Attached)	



### Our Trust Corporate Objectives are described below:

**BETTER OUTCOMES** We will put **Quality and Safety** above all else, providing safe, high value evidence based care to improve patient, service users and carer **experience**.

HEALTHY LIVES We will work to advance Health Equity and reduce health inequalities to enable our service users to enjoy long healthy full lives; Living Matters, Dying Matters.

**IMPROVEMENT** We will integrate **Improvement** into every day working, reducing harm, variation and waste and encourage innovation, authenticity and excellence.

**BETTER VALUE** We will ensure we make the **Best use of** all our resources.

**GOOD PARTNERS** We will **Work Collaboratively** with patients, service users, our people and stakeholders and become a better partner.

**OUR PEOPLE** We will support the **wellbeing**, **sense of belonging and growth** of all our people working in our organisation.



### 2:00pm 25<sup>th</sup> July 2023

### Trust Headquarters, Craigavon Area Hospital

	Issue	
	tters Arising	
a)	Review of Action Log (Paper Attached)	
2. Bet	tter Outcomes	
Trust B	soard Meeting	
a)	September Meeting Planning	
Integra	ated Governance Framework	
b)	Governance Committee Steering Groups	
	althy Lives	
-	Hill Hospital Update	
,	Current Position	
b)	MRI Scanner	
c)	DHH Governance Structure	
1	Collaborative Group	
e)	Planning of Visits to Similar Trusts	
f)	DHH – Newry Accommodation Request	
	ter Value	
	sational Update	
a)	, 5 1	
	Corporate Plan (Paper Attached)	
c)	Financial Update  Retential Well Led Engagement	
	Potential Well Led Engagement	
-	provement	
_	ency General Surgery Consultation and Trust Board Preparedness September	
	Consideration of standalone meeting as a single agenda	
_	y Services Inquiry Update on USI	
c)	ERG Update	
L)		
Cytolog		
-	gy Update	
d)	gy Update Update	
d) 6. Go	gy Update Update od Partners	
d) 6. Go Region	gy Update Update od Partners al Matters	
d) 6. Go Region a)	Update Update od Partners al Matters Regional Heath Blueprint	
d) 6. Go Region a) Engage	gy Update Update od Partners al Matters	
d) 6. Go Region a) Engage b)	gy Update Update od Partners al Matters Regional Heath Blueprint ement with Local Councils Council Engagements	
d) 6. Go Region a) Engage b) 7. Ou	Update Update od Partners al Matters Regional Heath Blueprint ement with Local Councils	
d) 6. Go Region a) Engage b) 7. Ou CESR P	Update  Od Partners  al Matters  Regional Heath Blueprint  ement with Local Councils  Council Engagements  r People	
d) 6. Go Region a) Engage b) 7. Ou CESR P a)	gy Update Update od Partners al Matters Regional Heath Blueprint ement with Local Councils Council Engagements  r People rocesses	
d) 6. Go Region a) Engage b) 7. Ou CESR P a) Apprair	gy Update Update od Partners al Matters Regional Heath Blueprint ement with Local Councils Council Engagements r People rocesses Royal College and GMC	
d) 6. Go Region a) Engage b) 7. Ou CESR P a) Apprai b)	gy Update Update od Partners al Matters Regional Heath Blueprint ement with Local Councils Council Engagements  r People rocesses Royal College and GMC sal and Development	
d) 6. Go Region a) Engage b) 7. Ou CESR P a) Apprai b) 8. Any	gy Update Update Od Partners al Matters Regional Heath Blueprint ement with Local Councils Council Engagements  r People rocesses Royal College and GMC sal and Development MSc Cambridge	
d) 6. Go Region a) Engage b) 7. Ou CESR P a) Apprai b) 8. Any	gy Update Update Od Partners al Matters Regional Heath Blueprint Ement with Local Councils Council Engagements  r People rocesses Royal College and GMC sal and Development MSc Cambridge  y Other Business Staff Excellence Awards	
d) 6. Go Region a) Engage b) 7. Ou CESR P a) Apprai b) 8. Any a)	gy Update Update Od Partners al Matters Regional Heath Blueprint ement with Local Councils Council Engagements  r People rocesses Royal College and GMC sal and Development MSc Cambridge  y Other Business	



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**OUR PEOPLE** We will support the **wellbeing**, **sense of belonging and growth** of all our people working in our organisation.



### 2:00pm 8<sup>th</sup> August 2023

### Trust Headquarters, Craigavon Area Hospital

	Issue	
1. Ma	tters Arising	
a)	Review of Action Log (Paper Attached)	
2. Better Outcomes		
	nber Trust Board Meeting	
a)	ERG Update to Trust Board	
b)	Integrated Care Partnership Update to Trust Board	
c)	Department of Health SAI Re-design	
d)	Board Workshop on Risk Appetite	
Integrated Governance Framework		
e)	Trust Board Committee Terms of Reference	
f)	Governance Committee Steering Groups	
3. He	althy Lives	
	Hill Hospital Update	
	DHH Expert Panel	
	Planning of Visits to Similar Trusts	
c)	DHH – Newry Accommodation Request	
4. Better Value		
Organisational Update		
a)	DoH Accountability Meeting Preparation	
b)	Financial Update	
c)	Potential Well Led Engagement	
5. Imp	provement	
	y Services Inquiry	
_	Update on USI	
-	ERG Update	
6. Go	od Partners	
Region	al Matters	
a)	Regional Heath Blueprint	
	r People	
	sal and Development	
a)	MSc Cambridge	
8. Any Other Business		
	Leadership Walks and reporting through to Governance Committee	
-	Chair – Perm Sec 1-1	



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#### Governance Committee outcomes note from meeting held on 11th May 2017

Confidential Section: 0930 - 1000hrs

Children's Home visit reports received for assurance to Trust Board

CEO and SMT leading on reviewing concerns raised in relation to the Datix-System. CEO will update on progress at next meeting.

#### Governance meeting: 1000 - 1230hrs

1. Apologies from DR T Boyce and Dr R Wright

Chairs Business: Chair outlined the recent workshop on the governance implications from the NI Events company with the focus on culture, behaviours and communications. These outcomes are as applicable to the working of committees as well as the full Trust Board. This is work in progress and members were reminded of the board and committee etiquette and in particular mutual respect.

2. Matters arising:

SAI categorisation is still coming up in discussions and this has yet to be bottomed out. Siobhan Rooney is to meet with Stephen McNally and Margaret Marshall.

3. Medicines Governance Report

In Dr Boyce's absence, Esther provided a brief overview and agreed to take question back to Dr Boyce for answering. The trends remained similar and nothing of significance was reported.

4. Presentation re learning following an inquest in Non-Acute.

We had a very important presentation form Pat Nugent which outlined to the committee then impact and learning outcomes from an inquest. The committee was particularly minded that an early year old had lost her life, family was suffering and indeed the impact on staff as a result of attending and contributing to investigations and the inquests.

- Work currently being done to support staff particularly around inquests and SAI's
- Acknowledgement of work to date in this area, but further work needed
- Options to engage with family in a supportive and caring manner were explored (card and note) and how SHSCT could look at new ways of following up and offering support.
- There has been continued learning from inquests and indeed this one which has been shared regionally

#### 5. Clinical and Social Care Governance

Margaret Marshall took members through the report. Directors were to provide an overview of the catastrphoic incidents, but that did not take place and will come to the next meeting in September. The committee discussed holding a session with Margaret and the team (if necessary) to look at the SAI's, trends and ensure all members have a baseline of knowledge and understanding. This section in the meeting, always develops into a longer discussion. Whilst a new way of reporting is being explored the reporting is as it is right now. I think it would be helpful for members to have a session that ensures a baseline across all NED's.

6. Corporate Risk Register

Committee welcomed the revised register and understood that it is work in progress

Additional inclusion of the following risks to be taken on board and factored in revised register:

- Reputational risk
- Succession Planning SMT and Trust Board
- 7. Draft Governance Statement

Committee noted it. Any questions were to be sent through to Helen by Tuesday 16<sup>th</sup>.

8. Controls assurance statement

This has been submitted, committee noted it

9. Information Governance

Eileen will continue conversation with Aldrina on triaging and reporting options.

10. Annual mortality review

This has been deferred until the next meeting

11. Update on carers action plan

Update and report accepted. Carers Trust is back on track which is great news.

12. Update from Patient and Client Experience Committee

Revised terms of reference will be coming the next meeting of that committee

13. Feedback from Audit Committee

Chair of Audit provided overview of the internal audit report on the Cinical Audit which received limited assurance. As a significant element of the limited assurance was in relation to governance, it was felt appropriate that this be brought to the Governance Committee. It was agreed that the revised timeline and progress report is to come back to the next Audit Committee. The Governance Committee would seek a progress update at its next meeting.

14. Leadership walks

These were noted and accepted

15. Childrens Home visits summary report

This was noted and accepted

16. Any other Business

Aldrina raised the concern of cyber safety and potential attacks. She will be undertaking a number of activities to raise awareness across the Trust.

#### Additional notes for discussion with Chair of the Trust Board and CEO at follow up meeting.

- 1. I will over the summer work up a policy on presenting to the Governance Committee in conjunction with Sandra and the tea.
- 2. There is a piece of work to be done around where the committee is getting bogged down in operational matters around SAI's and I will seek to explore how best to re-work agenda and content to support the meeting to be more effective.
- 3. I am not overly happy with attendees who are assigned to present/comment on behalf of a colleague who is absent, not being able to take questions or explore. Would appreciate a discussion on this.
- 4. I was not happy that the Directors were not ready/prepared to present on the catastrophic incidents. There was a communication failure here that needs to be rectified.

#### Governance Committee outcomes note from meeting held on 07th September 2017

#### Confidential Section: 0930 - 1000hrs

Non-Executive Directors to meet with Colm McCafferty to inform induction training regarding Children's Home Visit.

Interim CEO updated on progress made regarding Dr Duffins Concerns:

- o Independent person assigned to investigate.
- o They have met with Dr Duffin and a number of other Doctors as Dr Duffin's request
- The process is to conclude over the coming weeks
- Nothing of concern raised to date
- o Report will come to the December Governance Committee
- o Dr Duffin will receive a copy of the final report

#### Governance meeting: 1000 - 1230hrs

 Apologies from Hilary McCartan, Pauline Leeson and Siobhan Rooney (NED's), Angela McVeigh Director of Older People Services, Dr Richard Wright Medical Director and Esther Gishkori Director of Acute Services.

Dr Tracey Boyce Director of Pharmacy will now attend the full governance committee meetings in her capacity as Director of Pharmacy.

Chairs Business: Chair noted that the work on preparing people to give presentations to Trust Board and Committees was now complete and will be discussed at the committee review at the end of the meeting.

#### 2. Matters arising:

All complete

#### 6. Medicines Governance Report

Dr Boyce reported a positive last quarter. There has been an increase in reporting with pharmacists.

There is training and work underway to support Trust and Independent Domiciliary Care teams in administrating medication.

Comfort and assurance received from the report.

#### 7i. Clinical and Social Care Governance.

Siobhan met with Stephen and Margaret and addressed the repeated concern around categorisation of SAI's.

There has now been a change in the reporting to provide a consistent timeframe across all reporting measures.

Some additions for future reporting include:

- Additional points on complaints to include the complexity of some of the complaints received
- An example to be included to provide a deeper understanding for readers

The committee heard from 3 Directors (Acute, Mental Health and Disability Services, Children and Young Peoples Services) on an example catastrophic incident.

- Learning received from all three incidents which included
- Cross discipline and cross directorate working
- Sharing expertise from within the trust externally
- Engagement and understanding within the 3<sup>rd</sup> sector of who provides additional support
- Communications in handover and team changes

#### 8. Annual Health and Safety Report

Vivienne provided a detail report and outlined the key issues/concerns for the Committees consideration:

- Risk that the current model of audit and inspection is not sustainable. Alternative models are being researched currently the aim is to deliver a better service across the spectrum.
  - Governance Committee agreed to raise this risk with the Audit Committee and request an internal audit within health and safety in the current year.
  - Vivienne will provide the Governance Committee with a mid-term update on this risk
- Corporate Mandatory Training and mandatory moving and handling training have fallen below target and expectations.
  - Key challenges are pressures on the day to day service means people are not released for the training.
  - This then has a follow through to the claims against the trust that have a direct correlation to moving and handling. If the training is out of date, then the trust cannot defend an action.

#### 9. Annual Whistleblowing report

This was another significant and important report. Vivienne outlined Trust position and responsibility to date. Key points to note:

- The current Trust policy is now out of date, but all Trusts, Southern included are awaiting the regional policy which remains outstanding.
- Funding for freedom to speak up guardian role has not been secured or ring fenced at this
  point. The Southern Trust SMT will now need to discuss and prioritise resources is
  appropriate.