Minutes of a Trust Board meeting held in Public on Thursday 29th January 2015 at 11.30 am in the Board Room, Trust Headquarters, Craigavon.

PRESENT:
Mrs R Brownlee, Chair
Mrs M McAlinden, Chief Executive
Mr E Graham, Non Executive Director
Mrs E Mahood, Non Executive Director
Dr R Mullan, Non Executive Director
Mrs S Rooney, Non Executive Director
Mr S McNally, Director of Finance and Procurement
Mr P Morgan, Director of Children and Young People’s Services/Executive Director of Social Work
Mr F Rice, Director of Mental Health and Disability Services/Executive Director of Nursing
Dr J Simpson, Medical Director

IN ATTENDANCE:
Mrs D Burns, Interim Director of Acute Services
Mrs P Clarke, Director of Performance and Reform/Deputy Chief Executive
Mr M Crilly, Acting Director of Mental Health and Disability Services
Mr K Donaghy, Director of Human Resources and Organizational Development
Mrs A McVeigh, Director of Older People and Primary Care Services
Mrs R Rogers, Head of Communications
Mrs S Judt, Board Assurance Manager (Minutes)
Mrs S McLoughlin, Acting Committee Secretary (Minutes)

APOLOGIES:
Mrs D Blakely, Non Executive Director
Mrs H Kelly, Non Executive Director
1. **CHAIR’S WELCOME AND APOLOGIES**

The Chair welcomed everyone to the meeting including members of the public. Before commencing with the business of the meeting, the Chair reminded members of the principles of Board meeting etiquette and asked that phones are turned to silent and laptops are to be used for accessing Trust Board papers only.

The Chair sought and received confirmation from members that they had read and fully understood their papers in advance of the meeting.

2. **DECLARATION OF INTERESTS**

The Chair requested members to declare any potential conflicts of interest in relation to any matters on the agenda. There were no declarations of interest noted.

3. **CHAIR’S BUSINESS**

The Chair referred members to her written report detailing events she had attended since the previous meeting, together with details of some good news stories across the Trust. On behalf of Board members, the Chair extended congratulations to all of the staff on their successes.

The Chair informed members that it was with regret that she had accepted the resignation of the Chief Executive, Mrs Mairead McAlinden, who will leave the Trust on 31 March 2015 to take up post as Chief Executive of Torbay and South Devon Health and Care Trust. The Chair spoke of Mrs McAlinden’s strong strategic leadership ability, as well as her high personal and professional values, putting patients and clients at the centre of all she does. She stated that Mrs McAlinden’s resignation was a great loss, not only to the Trust, but to the wider HSC family and wished Mrs McAlinden every success in her new post.

The Chair advised that she was pleased to announce that Mrs Paula Clarke, Director of Performance and Reform, has been
appointed as Deputy Chief Executive with effect from 19th January 2015. Mrs Clarke will then take up the post of Interim Chief Executive, when Mrs McAlinden leaves the Trust. The Chair wished Mrs Clarke well in her new role and assured her of the continued support of the Trust Board. The Chair stated that she had been advised by the Permanent Secretary that the recruitment process for Mrs McAlinden’s replacement would not take place until late Autumn at the earliest.

The Chair also acknowledged the resignation of Mr Roger Alexander, Non-Executive Director, who stood down on 31 December 2014 due to personal and work commitments. The Chair took the opportunity to thank Mr Alexander for his hard work and contribution to Trust Board.

Members extended congratulations to Dr Lisheen Cassidy, Child and Adolescent Consultant Psychiatrist who is based in the CAMHS team in South Tyrone Hospital on her recent appointment as “High Sheriff of Tyrone”.

The Chair concluded her business by thanking all staff who had worked tirelessly in the recent extreme weather, many going beyond the call of duty to visit clients.

4. CHIEF EXECUTIVE’S BUSINESS

Mrs McAlinden thanked the Chair for her kind words and for her leadership, friendship and support during her term as Chief Executive. She also paid tribute to the Trust Board, and the clarity of strategic direction members had given to her and the Executive Team which has been a key factor in the organizational performance of the Trust and ensuring the needs of the population served by the Trust always come first.

Mrs McAlinden commended the commitment of the Executive Team to driving forward innovation and high quality care, and thanked them for their support to her as Chief Executive. She stated that the success of the Trust was due their leadership and the daily efforts of
our 13,000 staff. Mrs McAlinden also congratulated Mrs Clarke on her appointment and wished her every success in her new role.

At this point, members were shown a short DVD on the Emergency Department.

Mrs McAlinden referred members to her written report which included a number of items of business both internal and external to the Trust. Mrs McAlinden informed members of the forthcoming retirement of Dr John Simpson on 31st July 2015 and thanked him for his outstanding contribution to the Trust’s leadership and success both as a member of the Senior Management Team and Trust Board. She wished him a long and happy retirement.

Mrs McAlinden spoke of the adverse weather conditions which affected large areas of the Trust on Friday 16 January 2015 which resulted in the activation of the Trust’s ‘snow plans’ to ensure that clients in receipt of domiciliary care services were being supported. She endorsed the Chair’s remarks on the efforts of staff over an extremely busy number of weeks and placed on record her thanks to all staff who have went the extra mile to ensure care of our patients and clients.

Mrs McAlinden spoke of the recent publication of Sir Liam Donaldson’s report which examines the governance arrangements for ensuring the quality of health and social care provision in Northern Ireland. The report makes ten recommendations, some focusing on specialist areas of quality and safety improvement, such as maximizing learning from incident reporting, while other recommendations are broader and focus on the wider health system. The Chair stated that it was important for members to take time to read this report and time will be set aside at the forthcoming Directors’ Workshop on 26th February 2015 for a full discussion.
5. SERVICE IMPROVEMENT/LEARNING FROM SERVICE USER FEEDBACK: FAMILY NURSE PARTNERSHIP

Mr Morgan informed members that the Family Nurse Partnership (FNP) was established in the SHSCT in November 2012. This is a programme offered to first time teenage mothers and is an intensive home visiting programme from before birth until the child is two years old. Evidence has demonstrated this programme leads to improvements for mother and baby on a number of levels.

The Chair welcomed Ms Mairead Donnelly, Family Nurse Supervisor and Ms Olivia Delaney, Family Nurse, who gave a detailed presentation on the FNP. Ms Donnelly explained that 105 mothers and babies have now been recruited to the programme and the first annual review was completed in September 2014 which demonstrates the value of FNP. A Case Study of a teenage pregnancy was presented which showed positive outcomes for a young mother who is able to live independently with her baby.

Dr Mullan asked how the team decides who to take on the programme to which he was advised that the woman must be less than 28 weeks pregnant and must meet the criteria for the service. Dr Mullan also asked what follow up measures were in place if someone left the programme. He was informed that the family nurses maintain a level of contact to encourage re-engagement and advise women they can return to the Programme.

Mrs Mahood praised the excellent presentation and enquired why the programme was not available throughout the Southern Trust area. It was explained that funding was limited and Mr Rice advised that an application for additional funding had been made and, if successful, the programme would be extended.

The Chair expressed her thanks to both Ms Donnelly and Ms Delaney for an interesting and informative presentation and stated that the Chief Executive and herself had visited the service and were very impressed with the improvement it was making in the lives of young mothers.
6. **MINUTES OF BOARD MEETING HELD ON 27\(^{th}\) NOVEMBER 2014 (ST566/15)**

The Minutes of the meeting held on 27\(^{th}\) November 2014 were agreed as an accurate record. The Minutes were duly signed by the Chair.

7. **MATTERS ARISING FROM PREVIOUS MINUTES**

The Chair drew member’s attention to the Allied Health Professional Internal Review (Item 10ix), stating that a progress update would be available at the next Trust Board meeting on 26\(^{th}\) March 2015.

*Action: Mr Rice*

8. **STRATEGIC ISSUES**

i) **Update on Transforming Your Care**

Mrs Clarke advised that there was little progress to report in respect of the work of the Regional TYC Programme Board since the last Trust Board meeting. She advised that the Health and Social Care Board is seeking nominations for the four system wide initiatives that have been identified as priority work, but there is no indication as yet how these will be taken forward. She stated that locally there were a number of items on today’s Trust Board agenda that reflect how the Trust is continuing to deliver transformational change locally thereby delivering the objectives of Transforming Your Care.

ii) **Summary of Internal Capital Business Cases in excess of £300,000 (ST567/15)**

Mrs Clarke presented the summary report for approval.

In discussion, Mrs Mahood asked why some projects were listed retrospectively. Mrs Clarke explained this was a timing issue and was something the Trust would continue to look at. In general, all business case approvals were within the timeframe.

*The Board approved the Summary of Internal Capital Business Cases in excess of £300,000 (ST567/15)*
Mr D Cunningham joined the meeting at this point for the next item

iii) Option Appraisal for the future use of Zest and Horticulture Unit, Bannvale Site, Gilford (ST568/15)

Mr Crilly presented the option appraisal for the future use of Zest and the Horticulture Unit on the Bannvale site, Gilford for approval. Mr Cunningham gave members a detailed background of the two services which provide training and development opportunities for adults with a learning disability. Although established as training facilities neither have operated nor achieved the required outcomes in terms of client throughput and commercial growth.

Mr Cunningham explained that the Trust does not have the business expertise or resources to develop these services to their true potential and with the right level of expertise and focus, both these services have the potential to provide diversity of training and development opportunities to adults with disabilities and could act as an important stepping stone to other day opportunities within the community including accredited further education, volunteering, paid and supported employment, which is currently not possible. He stated that both projects are in line with the regional strategic direction for Day Opportunities.

Members discussed the preferred option to lease ZEST and/or the Horticulture Centre to an external provider and establish contractual arrangement for the provision of day opportunities for adults with disabilities with same provider (thereby off-setting cost of lease in part or full). Mr Cunningham noted that Equality Screening has been applied for the preferred option and stated that the future of these projects is on the agenda for the next Carer’s Forum meeting and a meeting is in place for affected service users and their parents. Following Trust Board approval, an engagement plan, including consultation, will be developed and implemented.

The Chair thanked Mr Cunningham for an informative briefing and members asked a number of questions.
Mr Graham referred to the Local Commissioning Group’s suggestion to provide the catering service at ZEST through the Trust and enquired if the Horticultural project would be able to do likewise. Mr Cunningham responded saying that there was a lot of potential for this to happen with the right provider. Mr McNally stated that grounds maintenance was currently contracted out and asked about timescales as regards current arrangements. Mr Crilly stated that he believed the timescales could allow this to be explored.

Mrs Mahood enquired if there was an organization in mind who could take these enterprises on, to which Mr Cunningham replied that it would have to go to tender but there were organization who may be interested and have the capability to develop both services to their true potential. Mrs Mahood stated that this project fitted well with Day Opportunities and also Transforming Your Care to give full potential to the clients using the service.

Dr Mullan noted his concern at the lack of progression from training to employment as well as the low staffing level within the horticultural unit. He also felt that there was an opportunity for local Further Education Colleges to be involved with such projects.

**The Board approved the Preferred Option (Option 3) for the future use of Zest and Horticultural Unit, Bannvale Site, Gilford (ST568/15)**

*Mr Cunningham left the meeting at this point.*

**iv) Addiction In-Patient Services Update**

Mr Crilly spoke to this report and reminded members that Trust Board had previously considered the outcome from the regional consultation on In-Patient Addiction Services and decisions by the HSCB in relation to the Review of Addiction Services in Northern Ireland. Under the agreed model, inpatient services will be provided on three sites in Northern Ireland.

Mr Crilly referred members to the copy of the letter he had written to HSCB to advise of the planned transfer of inpatient addictions
provision from St. Luke’s Hospital to Downshire Hospital, managed by South Eastern Trust, on 2nd February 2015. This service change is consistent with the HSCB strategic decisions for the provision of Tier 4 Addiction Inpatient Services. In his letter, he reiterated previously expressed concerns about the insufficient investment available to develop appropriate local community addiction services to support the regional inpatient model. He advised that the local inpatient service is no longer sustainable due to the risk created by skilled staff moving to other services in anticipation of the ward transfer with resulting workforce and safety issues which have required the transfer to take place no later than 2nd February 2015.

Mr Crilly stated that the Trust supports the HSCB strategic direction to enhance community based addiction services and reduce reliance on inpatient care. The Trust continues to raise the need for further investment to deliver the level of community based addiction support identified as necessary for local need and is continuing to work with HSCB on this requirement.

Mr Crilly concluded by advising that GPs have been kept updated on the planned transfer and a formal letter of new admission arrangements and effective date of change has been circulated to all GP’s. Staff who are affected will be redeployed within the Trust and alternative employment agreed, and current inpatients have been informed of new arrangements and/or discharged as planned. Communication with Armagh District Council and local MLAs has also taken place.

The Chair thanked Mr Crilly for an informative report.

v) **Consultation on the future support of Independent Living Fund (ILF) Users in N Ireland**

Mr Crilly advised members that the Independent Living Fund was created in 1988 to provide financial support to disabled people. Currently in Northern Ireland the fund comes from the Department of Social Development but from 30th June 2015 the proposal is that it will transfer to the Department of Health and Public Safety. Mr Crilly drew members’ attention to the Trust’s response to the consultation in their
papers and the Trust’s view that option 3 for the transfer of funding and responsibility to Health and Social Care Trusts is the preferred option.

9. **PATIENT/CLIENT SAFETY AND QUALITY OF CARE**

   i) **Director of Social Work**

   - **Unallocated Childcare Cases**

   Mr Morgan informed members that the total number of unallocated cases was 83 as at 30 November 2014, 94 as at 31 December 2014 and 61 as at 26th January 2015. Mr Morgan stated that although there has been a decrease in referrals since November the service is still endeavouring to deal with the backlog of additional referrals from previous months and absorb same into the system. Additional staff have helped reduce this, however Christmas leave also had an impact on service capacity.

   Mr Morgan paid credit to the Principal Practitioners who have supported teams, on top of their normal job, during a difficult period.

   The Chair thanked Mr Morgan for this clear and easy to read report. She asked if any of the current 61 unallocated cases had Child Protection issues to which Mr Morgan assured her this was not the case.

   - **SBNI Safeguarding Generic Standards Audit**

   Mr Morgan spoke to this inaugural report which shows that the Trust is fully compliant with the audit which highlights the Trust’s adherence to statutory legislative requirements and delegated statutory functions. No issues or concerns were raised and no risks were identified.

   The Chair stated that she had got a lot of assurance from the report regarding safeguarding practice within the Trust.

   Mrs Mahood expressed her concern that the audit had taken place 12 months earlier but the report was only now available to which
Mr Morgan responded explaining that it had been slower for the community and voluntary groups to produce evidence than it had been for the statutory bodies. However, Mrs Mahood felt the report should have been published at least 6 months earlier in order to action any areas necessary. Mr Morgan accepted that there was learning to take on board from this time frame.

ii) **Annual Care Management Reviews**

The Chair noted the disappointing performance with a decrease in compliance in December compared to November 2014. However, she stated that she was assured that there were no homes with failure to comply notices that had outstanding reviews.

Mrs McVeigh spoke to this report and informed members that the decrease in compliance in December 2014 was due to increased sickness absence. Mrs McVeigh explained that OPPC continue to work to deliver on the DSF Annual Review related standard for approximately 5420 individuals in receipt of community care either through a placement in a nursing/residential home or provision of a domiciliary care package.

Mrs McVeigh drew attention to the shortage of District Nurses at present due to sickness and vacant posts. She noted that currently some staff are undertaking District Nurse Training and she will work with Human Resources and the Director of Nursing to support them to address current vacancies. Mrs McVeigh stated her Directorate are actively recruiting additional temporary and permanent support staff to work across the Trust area to support the professional staff to deliver the Annual Review Target. Mrs McVeigh also drew attention to the challenge of organising annual reviews which fully engaged the client and family members within the timescales for the review process.

The Chair asked Mrs McVeigh to give assurance to Trust Board members that staff were aware of how serious this issue was. Mrs McVeigh assured members that there was accountability and monitoring in place to report on the annual review position on a weekly basis from the 1 April 2014. She stated that not only were
they looking at the current difficulties but also at the best way to shape future services with engagement of staff side also involved in this.

The Chair drew attention to the 50 outstanding Annual Reviews and in particular 23 people who are waiting longer than a year for their review and asked for assurance that the 23 longest waiters were being visited by a Professional and that there are no concerns around these reviews. Mrs McVeigh assured the Chair that all the longest waiters were known to the Care Home support Team key worker allocated to their Care Home and there were no concerns about any of them.

Mrs McAlinden confirmed that this situation has been closely monitored by the Senior Management Team and had been discussed in detail at least 5 times in the past 3 months to ensure all possible options to improve performance were tested. She confirmed that Mr Morgan and Mrs McVeigh are working closely together to drive improvement, and there were on-going negotiations with the Trade Unions on structural change to improve efficiency and effectiveness. Mrs McAlinden reported that significant managerial focus had been invested in reducing the outstanding Annual Care Management Reviews and it was disappointing, both for herself and also for Mrs McVeigh, that this has not yet been achieved. Mrs McAlinden assured the Chair that this item would continue to be a high priority for the Senior Management Team meetings and there would be continuing support to Mrs McVeigh on this area of corporate risk.

iii) Medical Director Report

Dr Simpson spoke to his report which provides an update on the Medical Revalidation process advising that as at 19\textsuperscript{th} January 2015, 143 doctors have successfully revalidated. In relation to medical appraisals, Dr Simpson advised that the 2013 round of appraisals, which commenced in March 2014, will be completed by end of January 2015. He stated there was only one Doctor whose appraisal is outstanding. Dr Simpson went on to advise that an audit of the quality of the 2013 appraisals has just
been completed and he agreed to bring the results to a future Trust Board meeting.

Mrs McAlinden referred to the section in the report on Medical Education and Training and stated that it was interesting to consider what Sir Liam Donaldson in his report considers to be a safe, high quality service and what Junior Doctors thought. Dr Simpson spoke of the importance of the Deanery visits as an external audit.

The Chair thanked Dr Simpson for an informative report and acknowledged Daisy Hill Stroke Team who have been shortlisted for the next round of the 16th Northern Ireland Healthcare Awards which will be announced at the end of February 2015.

iv) **HCAI Update**

Dr Simpson reported on HCAI to date (29th January 2015). He advised of 36 cases of C.Difficile infections against a regional target of 32 cases, 8 of which occurred during December and which had been fully reviewed. He advised that this review indicated no systemic issues or cross infection but that there were areas which needed increased focus such as antibiotic compliance. To date, no cases had been reported for January 2015. He told members that there had been 6 cases of MRSA against a Trust target of 3 cases. MSSA Infections to date number 27 cases with a Trust target of 34 cases and he stated that of this number 9 cases were preventable. Dr Simpson informed members that the regional targets are challenging, however an action plan is currently being developed for antibiotic compliance and implementation is currently underway.

The Chair asked Dr Simpson about the support for improved antibiotic stewardship to which he replied that a Pharmacist and Micro-biologist are now part of the hospital ward round for active learning about antibiotic compliance, which is unique both within Northern Ireland and also within the UK. He advised that hand washing compliance within the Trust is the best in Northern Ireland. The Chair reminded members that some of the infections were not hospital acquired, having come from the community.
Mrs McAlinden spoke of the recent norovirus outbreak on Ward 2 South, which had the potential to be very challenging given the pressures on the hospital system. She commended Mrs Burns, Dr Simpson and their teams on the management of this outbreak. The Chair endorsed Mrs McAlinden’s remarks.

v) **Executive Director of Nursing Report**

Mr Rice highlighted the key aspects of his report. He stated that the Nursing Quality Indicator audits and the Patient Experience Survey reflect sustainable quality improvements and, together with patient safety initiatives and professional projects, enhanced patient experience of care. He advised that further implementation of the NQI Framework will provide a more comprehensive and balanced picture of the quality of nursing and midwifery care in the Southern Trust. He informed the Board about the new revalidation arrangements for nurses and midwives due to be tested this year in the HSC Trusts and the challenges of the proposed implementation date of December 2015. Mr Rice also drew attention to the Review of Professional Code which has been agreed by the NMC and is due to be published in March 2015. Concluding his report, Mr Rice spoke of the Development Programme for Ward Sisters and Team Leaders which has been organised with the Beeches Education Centre and will be delivered during early 2015/16.

The Chair thanked Mr Rice for his detailed report and asked that he would report back to Trust Board in the Autumn regarding the Ward Sisters and Team Leaders Development Programme.

**Action: Mr Rice**

The Chair recorded her disappointment that although Nursing Staff attendance at mandatory training is generally good, they do not appear to have achieved the minimum two sessions of supervision annually. Mr Rice responded by explaining that anecdotally there is more compliance with meeting the required two sessions than is actually recorded. Group supervision and
reflection sessions have been introduced in some areas and other ways of improving compliance are being explored.

vi) **Patient and Client Council Report “People’s Priorities”**

Mrs McVeigh spoke to this report by the Patient and Client Council and drew attention to the top 10 priorities identified by the population for health and social care.

Mrs McAlinden informed members this report had been discussed at the recent Chief Executives Forum when Mrs M Hully, Chief Executive, Patient and Client Council, had been in attendance. At that meeting, the future format of Patient and Client Roadshows was discussed and a more thematic engagement approach with the public proposed.

10. **OPERATIONAL PERFORMANCE**

i) **Performance Report (ST569/15)**

Mrs Clarke presented a report detailing performance as at end December 2014 for approval. Mrs Clarke drew members’ attention to Appendix 1 of the report which summarizes performance against elective and non-elective Service and Budget Agreement (SBA). She stated that this demonstrates a fairly static position in all areas with most performing within the 5% tolerance limit.

Mrs Clarke advised that the performance report highlights a number of areas of risk predominantly with respect to elective access standards. She stated that as Trust Board members are aware, performance against this target has become increasingly challenging, particularly in the Acute Service Directorate, the reasons for which are detailed in the report. Members discussed the following areas in detail:-

**Cancer Pathways:** In respect of the 14-day breast cancer performance, Mrs Clarke advised that the Trust has maintained its increased performance with 99% of red flag/urgent patients in November seen within 14 days. This position further improved in December to 100%. Members noted that additional capacity as a
result of Trust Board agreeing temporary funding to focus on routine waits resulted in the access time for routine patients decreasing to 15 weeks at the end of December 2014.

**Memory/Dementia Service:** Members were advised that in light of the current performance issues across the pathway the Trust, in conjunction with the Health and Social Care Board (HSCB) and the Local Commissioning Group (SLCG), has reviewed this service area. It is anticipated that the new reporting arrangements subsequently agreed by the HSCB will be implemented in January 2015.

**GP Out of Hours:** Mrs McVeigh drew members’ attention to the fact that the number of calls has not varied hugely from the same period the previous year, the challenge has been the ability to maintain adequate service provision for triage due to the ongoing difficulties in filling the necessary number of GP shifts. She outlined the actions being taken to address this. The Chair agreed that this is a hugely challenging area and therefore it is appropriate to be on the Trust’s Corporate Risk Register.

**AHPs:** Mrs Rooney queried the reference to AHPs being currently excluded from SBA analysis pending input from HSCB/PHA on new baselines to which Mrs Clarke advised that a meeting date was being finalized with HSCB to progress this issue.

**Carers’ Assessments:** Members discussed the fact that the number of carers’ assessments offered in Quarter 2 is 30% below the target of 774. Mrs McVeigh clarified that both the number offered and the number declined are captured by the Trust and stated that this target is particularly challenging. Mr Crilly advised that new case management procedures now require those who receive respite to have a carers assessment completed beforehand and this should improve performance on the uptake of carers’ assessments.

**The Board Approved the Performance Report (ST569/15)**
ii) a) Finance Report (ST570/15)

Mr McNally reported that as at 31\textsuperscript{st} December 2014, the Trust had exceeded its expenditure budget by £7.2m. Non-rrl income is more than anticipated thereby decreasing this overspend to £5.1m. He went on to advise that this is a further improvement from the month 8 position and is largely as a direct result of newly confirmed RRL and movement in anticipated spend. Mr McNally reminded members that the Trust has received £15.1m non-recurrent HSCB support, £3m of this income is now reported in the overall position which has had the effect of reducing the cumulative overspend down to £2.1m.

Mr McNally stated that the Trust continues to raise with the commissioner the impact of late notification of funding. He spoke of the difficulty for the Trust to plan, forecast and ensure timely use of such allocations so late in the financial year and stated that this is further complicated by the delay in recruitment being experienced as a result of the transfer to BSO Shared Services Recruitment. The Chair asked about the availability of social work, nursing and AHP bank staff and emphasised the importance of exhausting every avenue to ensure the use of the allocation. Mr Donaghy advised that these banks had been exhausted, but he agreed to check the position again.

\textbf{Action: Mr K Donaghy}

Members discussed the fact that spend against general capital allocation is significantly below target. From the £5.8m available, the Trust has spent £2.2m although there has been a significant improvement in the number of requisitions placed during the current month. Mrs Clarke advised that the situation is closely monitored and Budget holders are reminded that there are strict procurement guidelines that must be followed.

\textbf{The Board Approved the Finance Report (ST570/15)}
b) **SH& SCT Response to Draft Budget**

Mr McNally presented, for information, the Trust’s response to the draft Budget for 2015/16.

c) **Increase in Car Parking charges (ST571/15)**

Mrs Burns presented, for approval, a proposal to increase car parking charges on both Acute hospital sites in respect of each charge band by 20% with effect from 1\textsuperscript{st} April 2015.

Mrs Burns advised that the Trust has not increased car parking charges since 2010 and if charges were increased by 20%, this would potentially generate increased income for the Trust in the region of £90k per annum which would address the increased cost pressures of car parking provision since 2010 and forms part of the Trust’s financial planning for 2015/16.

Members discussed the outcome of the consultation on the proposal. Mrs Burns stated that if approved, the Trust will continue to monitor usage of car park provision across both acute hospital sites and, in particular, the impact of the proposed increase. Mrs Rooney suggested that it would be useful to list the criteria for those patients/carers who are exempt from car parking charges. Mrs Burns agreed to include in the document.

**The Board approved the proposal to increase car parking charges across the two Acute hospital sites in respect of each charge band by 20% with effect from 1\textsuperscript{st} April 2015. (ST571/15)**

iii) **Human Resources Report (ST572/15)**

Mr Donaghy reported on the recruitment scrutiny arrangements which continue to operate. In particular there have been risks identified in the future availability of Nurse band 5 staff both to meet the need for an element of flexible workforce but also in sustainability and stability of the permanent workforce. This is due to the demands for nursing workforce across the province starting
to outstrip supply. He advised that discussions are ongoing at senior level to develop strategies to attract this group of staff to the Southern Trust and ensure our current and future needs can be met.

The Chair suggested placing an advert with the UK Universities in order to attract students back to Northern Ireland to work. Mr Donaghy stated this was actively being pursued.

Mrs Mahood expressed her disappointment that Shared Services are still experiencing difficulties, particularly as other Trusts become part of this platform. Mr Donaghy confirmed he was keeping this under close review and bringing back regular reports to the Senior Management Team, and he stated that Mr McNally and himself attend the Regional Board while Mrs McAlinden attends the Programme Board of BSTP and these issues are regularly brought up.

Mr Donaghy reported that HSC E-locums is progressing with joint working across the province but in particular between the Southern and South Eastern Trust on the further development of the E-locum project.

The Chair referred to the use of bank block booking to which Mrs Burns explained that often this is necessary due to long term sick leave and workforce gaps. However, she confirmed the progress against normative staffing levels when permanent and flexible workforce was considered.

Mrs Rooney drew attention to both long and short term sickness absence to which Mr Donaghy explained the process in that each staff member is expected to go before a panel following three periods of sick leave, which has proved a deterrent in this area. The Chair asked for assurance that all managers were complying with this directive to which Mr Donaghy stated there were no exemptions to it as it was triggered by HR.

**The Board approved the Human Resources Report (ST572/15)**
11. APPLICATION OF TRUST SEAL (ST573/15)

A number of documents were presented requiring the Trust Seal to be applied.

The Board approved the application of the Trust Seal (ST573/15)

12. BOARD COMMITTEES

i) Governance Committee

- Minutes of meeting held on 9th September 2014 (ST574/15)

Dr Mullan presented the minutes of the Governance Committee held on 9th September 2014 for approval.

The Board approved the Minutes of the Governance Meeting held on 9th September 2014 (ST574/15)

- Feedback from meeting held on 9th December 2014

Dr Mullan highlighted the key discussion points.

ii) Patient and Client Experience Committee

- Minutes on meeting held on 18th September 2014 (ST575/15)

Mr Graham present the minutes of the Patient Client Committee held on 18th September 2014.

The Board approved the Minutes of The Patient and Client Meeting held on 18th September 2014 (ST575/15)
- **Feedback from Meeting held on 4\textsuperscript{th} December 2014**

  Mr Graham reported due to the absence of all PPI members there was no quorum, therefore the meeting continued in information sharing mode only.

**iii) Endowments & Gifts Committee**

- **Minutes of Meeting held on 10\textsuperscript{th} June 2014 (ST576/15)**

  Dr Mullan, on behalf of Mrs Kelly, presented the minutes of the Endowments and Gifts Committee held on 10\textsuperscript{th} June 2014, for approval.

  The Board approved the Minutes of The Endowments & Gifts Committee held on 10\textsuperscript{th} June 2014 (ST576/15)

- **Feedback from Meeting held on 9\textsuperscript{th} December 2014**

  Dr Mullan highlighted the key aspects of discussion.

- **Revised Terms of Reference (ST577/15)**

  Dr Mullan presented the revised Terms of Reference for approval.

  The Board approved the Revised Terms of Reference (ST577/15)

**13. CHAIRMAN AND NON EXECUTIVE DIRECTORS’ BUSINESS AND VISITS**

A list of business and visits undertaken since the previous Board meeting was noted for information.

**14. CHIEF EXECUTIVE’S BUSINESS AND VISITS**

A list of business and visits undertaken by the Chief Executive since the previous Board meeting was noted for information.
15. ANY OTHER BUSINESS

i) Regional Emergency Social Work Service Annual Report

Mr Morgan presented, for information, the first annual report of the new Regional Emergency Social Work Service.

ii) Southern Area Hospice Ball

The Chair reminded members of the Southern Area Hospice Ball on Friday 6th March 2015.

The Chair asked members if they felt they had sufficient time to ask questions during the meeting and members confirmed that they had.

*The meeting concluded at 3.05pm.*

Signed: ____________________________

Date: ____________________________