

**Minutes of Trust Board meeting held on Thursday, 26<sup>th</sup> June 2025  
at 10.30 a.m. in the Boardroom, Monaghan Row, Newry**

**PRESENT**

Ms E Mullan, Chair  
Mr S Spoerry, Interim Chief Executive  
Ms G Browne, Non-Executive Director  
Ms M Corkey, Non-Executive Director  
Mrs L Ensor, Non-Executive Director  
Mr A Hughes, Non-Executive Director  
Mr J Johnston, Non-Executive Director  
Mr R Lynas, Non-Executive Director  
Mr C Stewart, Non-Executive Director  
Dr S Austin, Executive Medical Director  
Mr C McCafferty, Executive Director of Social Work/Director of Children and Young People's Services  
Ms C Teggart, Executive Director of Finance, Procurement and Estates  
Mrs D Ferguson, Interim Executive Director of Nursing, Midwifery and Allied Health Professionals, Functional Support Services and IPC

**IN ATTENDANCE**

Ms E Wilson, Director of Planning, Performance and Informatics  
Ms J McGall, Director of Mental Health and Disability Services  
Mr B Beattie, Director of Adult Community Services  
Mrs C Reid, Director of Surgery and Clinical Services  
Mrs T Reid, Director of Medicine and Unscheduled Care  
Mrs M O'Hagan, Director of Transformation and Improvement  
Mrs V Toal, Director of Human Resources and Organisational Development  
Mrs R Rogers, Head of Communications  
Mrs S Judt, Board Assurance Manager  
Mr S Wallace, Head of Office (Minutes)

**APOLOGIES**

None noted

## **1. CHAIR'S WELCOME AND APOLOGIES**

The Chair welcomed all in attendance to the meeting. The Chair commented on the recent and ongoing violence and racial attacks that have taken place across Northern Ireland. The Chair stated the Board's support of the statements made by the Health Minister and Chief Professional Officers stating clearly to international colleagues across health and social care they are welcome, deeply valued and have our full support. She stated that Board members stand with international colleagues and condemn in the strongest possible terms these blatant acts of thuggery. The Chief Executive concurred with the Chair's statement and emphasized the importance of the Trust as an organization and individuals in standing up to this behaviour.

## **2. DECLARATION OF INTERESTS**

The Chair asked members to declare any potential conflicts of interest in relation to any matters on the agenda. No interests were declared.

## **3. CHIEF EXECUTIVE'S UPDATE**

The Chief Executive referenced recent engagements with Trust medical teams to learn about models of service delivery and views on how services could be improved. He announced that following competitive interview process that Mrs Grace Hamilton had been appointed to the role of Executive Director of Nursing, Midwifery, AHPs, IPC and Functional Support Services. The Chief Executive noted that Mrs Hamilton will commence this role following the retirement of the interim post holder, Mrs Dawn Ferguson later this year.

The Chief Executive referred to the Belfast Trust Cardiac Surgery issues that had recently been in the media. He stated that the Trust has engaged with Trade Union colleagues, and he emphasized the importance having internal processes to highlight concerns. He added that regional Trusts may be asked to undertake an organizational cultural assessment, and the Trust awaits further regional decisions on this. Mrs Toal stated the Trust maintains constructive and helpful relationships with trade union partners. She added it would not be possible to state that the Trust has no culture issues that exist within the organisation, however the Trust continues to monitor and intervene where these are identified. Mrs Toal added that early interventions such as mediation are best, noting that escalations

beyond this are often stressful for all involved. She noted the importance of raising concerns at work, and the benefit of supported training for staff to remove the fear of raising concerns.

Regarding Encompass, Mrs Corkey asked if there had been any data on the initial outcomes or feedback on the implementation. Ms Wilson stated there was no formal feedback yet however this will be sought as part of the programmes evaluation in due course.

#### **4. MINUTES OF PREVIOUS MEETING HELD ON 29<sup>th</sup> MAY 2025**

Minutes of the meeting held 29<sup>th</sup> May 2025 were approved.

#### **5. MATTERS ARISING**

No matters arising were noted.

#### **6. EXECUTIVE DIRECTOR OF NURSING, MIDWIFERY AND AHP'S REPORT**

Mrs Ferguson presented the Executive Director of Nursing, Midwifery and AHP report and advised that this gives an overview of professional and educational requirements that underpin the competence and continued development of Nurses, Midwives and AHPs within the Trust. She also noted that with the introduction of Encompass in May 2025, this report also outlines the extensive work carried out by the Corporate Digital, Nursing and AHP team in preparation for the successful Go Live.

Mrs Ferguson noted that further detail on Infection Prevention Control (IPC) measures requested at a previous Trust Board meeting is not included. She noted areas of improvement/achievement as an increased compliance against the standards for Reflective Supervision for Nurses and Midwives; continued good attendance to training via Clinical Education Centre Service Level Agreement and AHP staff and the Trust continuing to attract relatively high numbers of pre-registered nurses seeking a band 5 post.

She also noted challenges regarding compliance against second Reflective Supervision for Specialist Nurses and Radiography Professional Supervision, the diminished recruitment pool for Band 3 workforce and continued recruitment challenge for Physiotherapy staff.

The Chair asked about the challenges to recruit band 3 staff and if the recruitment pool still exists, Mrs Ferguson advised that the pool has been depleted over the last number of months and her team were working closely with retained recruitment team to fill vacancies. Mr Johnston asked was there any regional recruitment drives regarding Band 3 staff, Mrs Toal noted that band 3 recruitment is locally driven at Trust level as this is usually more efficient and productive to fill vacant posts.

Mrs Teggart noted the importance of the work that Mrs Ferguson and her team completed to reduce nursing agency spend in 2024/25, she asked if that culture to reduce agency reliance had been instilled across the Trust. Mrs Ferguson stated there was a renewed focus for Phase 2 of the project to further reduce agency use which includes increasing the substantive workforce however advised this will not be without challenges.

Mrs O'Hagan asked regarding midwife vacancies and if this is still the position following the recent recruitment drive, Mrs Ferguson advised this is. The Chief Executive advised that on behalf of the regional Chief Executives he had written to the Permanent Secretary to request greater involvement of Trusts in workforce planning, he noted this will be discussed further with Department of Health colleagues this week.

Mrs Ferguson also noted Trust success at the Nurse of the Year Awards with Mrs Agnes Dee winning the Team Manager Award and Mr John McAteer received the joint runner-up Learning in Practice. The Board added their congratulations to both staff members.

**7. EXECUTIVE DIRECTOR OF SOCIAL WORK REPORT INCLUDING DIRECTED STATUTORY FUNCTIONS (ST1229/25)**

Mr McCafferty presented the Executive Director of Social Work Report including Directed Statutory Functions. He noted the Trust maintains high compliance with its statutory functions despite significant challenges. He noted that the Trust had its Department of Health accountability meeting regarding statutory functions yesterday and feedback was positive. He noted his thanks to staff and managers on their continued commitment on providing support and engagement in achieving the high level of compliance.

Mr McCafferty noted the importance of the Trust of service user engagement when responding to service demands. He referenced the

significant and longstanding workforce problems and the challenge of recruiting and retaining staff. Mr McCafferty noted there was ongoing industrial action in relation to workforce challenges in social work services. He noted that the Trust now has the highest number of children in care to date and highlighted the implications of this increase on social work and social care workforce.

Mr McCafferty noted the success in appointing 42 new social work staff who will be in place over the next months, stating this put the Trust in a stronger position than it had been in the last 4-5 years. He advised of the expansion of a skills mix approach, not as a substitute for social workers, but to augment the service. He noted he was more confident that workforce was on a more stable trajectory though this will still take a number of years to rebalance in.

The Chair acknowledged the good work and progress included in the report. Mrs Corkey noted the report and the realities of service pressures across Northern Ireland. She stated that, as designated Non-Executive Director for the Trust Adoption Panel, she can speak in the highest possible terms of the work to support the children in their care. Mr McCafferty importantly reminded that the Board is the corporate parent for children in our care. Mr Johnston thanked Mr McCafferty and noted the Governance Committee would take on board the highlights from the report.

The Chair invited Mr Justin McNulty, MLA to address the Board. Mr McNulty advised of the concern of there being 700 children in care. He noted issues relating to retention and recruitment and the ongoing industrial action where staff felt they have no alternative to strike due to unsafe staffing levels.

Mr McCafferty noted that workforce planning is led by the Department of Health and that the requirement for a sustainable regional workforce strategy to be developed. He noted although some progress had been made in availability of training availability work needs to be done. Mr McCafferty stated the Trust was committed to safety service sustainability. He also noted that the current industrial action is a regional issue not solely relating to the SHSCT.

The Chief Executive thanked Mr McCafferty noting Trust successes in foster care placements and relative to other Trusts less reliance on private sector support in this area.

## ***The Board Approved Executive Director of Social Work Report including Directed Statutory Functions Report***

### **8. YEAR-END REPORT OF CAPITAL INVESTMENT 2024/2025**

Mrs Wilson noted the £36.5M capital investment was allocated to the following areas:

- £15.8M - Major Capital Schemes- which is for projects with a delegated limit >£1.5m, these are informed by the Trust Priorities within the Departments 10 Year Capital Plan. This year the investment funded the Rapid Diagnostic Centre, CAH & DHH LV and Encompass.
- £14.6M - Ringfenced Capital Funding - which is allocated by the DoH specifically to undertake spend in a certain area/project; which includes ICT, Backlog Maintenance, Diagnostic equipment and GP Practices.
- £6.04M - General Capital - is internally allocated by the Trust's Capital Allocations Group (CAG) who have responsibility for agreeing and allocating general capital funding, which is informed by Strategic and Directorate priorities which includes fleet, medical equipment, ICT and Estate schemes.
- £4.6M - Invest to Save - is allocated by DoH to support a range of Estates schemes driving efficiency savings and sustainability. These are informed by Estate priorities and cannot be utilised for other purposes.

Mrs Wilson noted that the report also highlights funds that were handed back year end. Mrs Wilson referenced regular monthly checks between CAG support, finance colleagues and service leads to review the on-going status of capital approvals allocated to provide early alerts if not on track to meet spend in year, and the good preparedness and ability to effect opportunities to secure slippage funding in year with close working relationships, and challenge, between Capital Planning, Finance and Estates. She also advised of the limited availability of capital funds for general capital allocations with a high number of competing demands and on-going challenging process to secure business case approvals delaying awards and ability to implement schemes within single year timelines.

Mrs Browne asked will staff be trained on the differences between capital and revenue. Mrs Wilson noted finance management training was in place. Mrs Teggart noted there is a monthly review of capital and revenue to ensure allocations are correct. Mr Stewart asked what the process is for securing business care approvals and where is the

bottleneck. Mrs Wilson stated there were regional attempts to streamline processes and a new group had been set up to consider how this is best achieved. She referenced that a recent engagement around a major capital plan that involved a round table meeting of all stakeholders was helpful in moving a business case forward which could serve as a useful model.

Mrs Corkey and Mrs Ensor both stated the report was reassuring. The Chair acknowledged the challenge of the business case process referring to the Newry Clinical Treatment and Care Centre emphasising the importance of expediting business cases where significant added value can be provided.

The Chief Executive thanked Mr Mark Bloomer, Assistant Director Estate Services on spending the in-year allocation well. He noted that allocations are not adequate for work required and ongoing investment is required. He thanked Mrs Wilson for the report and noted the importance of the visibility of Department of Health capital plan which he will raise directly with them at future engagement meetings.

## **9. COMMITTEE CHAIR REPORTS**

### **i) AUDIT AND RISK ASSURANCE COMMITTEE, 15.05.2025**

Mrs Ensor advised there were no escalations. She referred to communication from Department of Health sponsorship branch complementing the Trust and staff on fulfilment of 90% of the Internal Audit recommendations within the year.

## **10. TRUST BOARD MEETING DATES 2026 (ST1230/25)**

The Chair presented the Trust Board meeting dates for 2026 for approval.

***The Board Approved the Trust Board Meeting Dates for 2026***

## **11. TRUST BOARD ANNUAL CYCLE OF REPORTING 1ST SEPT 2025 31ST AUGUST 2026 (ST1231/25)**

The Chair presented the Trust Board Annual Cycle of Reporting for approval.

***The Board Approved Annual Cycle of Reporting 1<sup>st</sup> September 2025 –  
31<sup>st</sup> August 2026***

**12. STATEMENT OF LOSSES AND SPECIAL PAYMENTS (ST1232/25)**

Ms Teggart presented the Trust Annual Losses Report for approval in accordance with Standing Financial Instructions. She advised that the total losses in 2024/25 had shown a positive decrease on the previous year advising that the largest loss in 2024/25 was clinical negligence followed by employer liability. She noted losses reviewed by the Trust Audit and Risk Committee and NIAO for year end accounts.

***The Board Approved the Statement of Losses and Special Payments***

***MEETING ADJOURNED AT 11:40AM - MEETING RECOMMENCED  
12:15PM***

**13. FINAL DRAFT ANNUAL REPORT AND ACCOUNTS (INCLUDING GOVERNANCE STATEMENT) YEAR-END 31ST MARCH 2025 INCLUDING FINAL YEAR-END OUTTURN 2024/2025 (ST1233/25)**

Ms Teggart presented the Trust final annual reports and accounts seeking Board approval. She advised that the Trust Audit and Risk Committee has reviewed and approved the presented version. Ms Teggart gave a brief update on performance noting that in 2024/25 the Trust achieved financial balance in spite of significant pressures however stating that an additional £37.6m from Department of Health was required to achieve this via deficit funding. Ms Teggart noted that formally the Trust recorded a break-even position with a £106k underspend. She noted that within this the Trust met its savings target of £26m.

Ms Teggart noted the comprehensive financial expenditure of £1,073m in 2024/25 noting the impact of pay awards in year and tariff uplifts. She advised that non-pay costs had reduced compared to the previous year. She noted the Trust met its prompt payment target with 96% achieved. She also noted that patient and client monies remain the same at £13m, advising that those accounts are monitored by NIAO. Ms Teggart noted that NIAO are still reviewing and, subject to minor changes, confirmation was expected back today.

***The Board Approved the Final Annual Report and Accounts  
(Including Governance Statement) Year-End 31st March 2025  
Including Final Year-End Outturn 2024/2025***

**14. DRAFT ANNUAL REPORT AND CHARITABLE TRUST FUND ACCOUNTS FOR THE YEAR ENDED 31.03.2025 (ST1234/25)**

Ms Teggart presented the report which was endorsed by the Trust Audit and Risk Committee. She noted that there was a slight decrease in income and donations from £198k to £156k. Mrs Teggart thanked the public for their donations. Mrs Corkey noted disappointment in the loss of value in investments that was beyond the Trust's control, however had received assurance that mitigations are in place.

The Chair asked about Trust progress to charitable organisation status. Ms Teggart noted Belfast Trust has progressed and the Southern Trust has its paperwork complete and hope to be the next organisation to receive approval.

***The Board Approved the Annual Report and Charitable Trust Fund Accounts for the Year Ended 31.03.2025***

**15. DRAFT REPORT TO THOSE CHARGED WITH GOVERNANCE 2024/25**

Ms Teggart noted that the draft report to those charged with governance which is with NIAO still finalising some elements. NIAO have offered an unqualified audit opinion with four 4 findings which is a reduction from previous year as follows:

1. Number and timing of retrospective Direct Award Contracts. Ms Teggart noted that the Trust Audit and Risk Committee challenged the accuracy of this position.
2. Fixed Asset Register. NIAO recommends the Trust reviews their practice for capturing and recording capital expenditure on the fixed asset register
3. Amounts owed for untaken annual leave. Ms Teggart noted limits within the HRPTS system for recording this
4. Holiday provision. A sensitivity analysis for the key assumptions used in determining the provision should be prepared to determine how sensitive the total provision is to changes in each of the assumptions.

The Chair and Chief Executive commended the report noting no significant concerns noted by the auditor.

## **16. FINANCIAL PERFORMANCE REPORT - MONTH 2 AND FINANCIAL PLAN 2025/26**

### ***Financial Plan 2025/26***

Ms Teggart presented the current financial plan for 2025/26 stating the Trust is still basing planning on indicative budgets. She noted the predicted regional pressures which are expected to be in the region of £600m. She noted that there is a number of regional workstreams ongoing as part of the regional Systems Financial Management Group.

Ms Teggart advised that further to the Opening Financial Plan 2025-26 endorsed at Confidential Trust Board on 29th May 2025 the Trust has now been notified of the need to achieve as a minimum a further c£5m savings to bring the Trust back from the current forecast deficit of £43m to the reported deficit of £37.6m in 2024/25.

Following a meeting with SPPG on the 6th June this was subsequently notified in a letter sent by Brigitte Worth to Trust Directors of Finance on the 11th June 2025. The status of the letter is an update on Financial Planning Assumptions for 2025/26 as the proposals for financial planning for 2025/26 are still subject to agreement by the Minister.

Ms Teggart stated that the letter notifies that the 2025/26 savings delivery will be approached in 2 phases, Phase 1 of which is a focus on returning Trusts to the 2024/25 deficit levels. For SHSCT this results in an additional savings target of c£5m, expected to be achieved via low and medium impact proposals, the composition of which will be either an extension of existing savings targets, new savings proposals, or further cost reductions. She noted this will increase our existing savings plan for 2025/26 from £30m to £35m and proposals need to urgently be developed to achieve this further £5m saving. This work has commenced in earnest, and Directors have been asked to identify further potential areas for saving.

Ms Teggart stated that whilst revised savings plans will not be formally commissioned until final opening allocations have been issued, the Trust has been asked to work towards the production of a revised financial plan by the end of June 2025 that sets out the measures, we will deliver to achieve Phase 1 (the additional c£5m saving) together with our risk assessment as to its deliverability.

Ms Teggart noted phase 2 of the regional savings plan will focus on the delivery of a further £100m of savings from Trust baselines and will rely on the work of the recently established regional System Financial Management Group and that for the Trust the share of the further savings under Phase 2 is c£16m.

The Chief Executive emphasised the Trust does not officially know its control total and discussions are ongoing in the Northern Ireland Executive regarding HSC budgets. He stated that finding an additional £21m already one quarter into the year is a tough ask. He stated the Executive team will need to consider what is possible to do across the remaining 9 months of this year.

Mrs Browne agreed how difficult these savings will be and asked if we don't achieve this what does this mean for the Board. Ms Teggart stated if phase 1 savings are not achieved the Trust will be subject to consideration as part of the Support and Intervention framework, there is no clarification on what happens if phase 2 is not met.

Mrs Ensor stated that impact and risk assessments should be looked at concurrently. Ms Teggart advised this would be completed as in previous years. Mrs O'Hagan stated that the RISE programme had started in May 2025 which is earlier than last year.

The Chief Executive stated that there is an equity deficit in the region of £40m for the Southern Trust in relation to other regional organisations and it was important this was recognised. Mrs Corkey referred to Charitable Trust Funds presentations on service improvements that were extremely cost effective and highly impactful for service users and the importance of sharing this approach to both efficiency and increase in quality. Dr Austin noted a new Divisional Medical Director for Research and Development had been appointed and would welcome the opportunity to present to a future Trust Board.

***Action – Update on Trust Research and Development to be presented to the Trust Board***

***Month 2 Finance Report***

Ms Teggart advised the Trust is reporting a deficit of £6.6m at month 02 against the variance control total. She stated this is broadly in line with expected variance control totals however growth in spend is to be

anticipated particularly over the winter period and the current underachievement in savings needs to be closely managed and the Trust is forecasting an overall deficit of £43m. Ms Teggart advised the Trust has been requested to achieve a further £5m to bring the Trust back to last year's reported deficit of £37.6m for which plans have yet to be developed. She stated that the reported position this early in the financial year must be read with a level of caution and is caveated on that basis however confirmed this will be difficult and challenging year ahead. The Chair asked what the flexible spend was in relation to, Ms Teggart confirmed this relates to Encompass implementation.

### ***The Board Approved Month 2 Finance Report***

#### **17. DRAFT SHSCT STANDING FINANCIAL INSTRUCTIONS (ST1235/25)**

Ms Teggart presented the updated Trust Standing Financial Instructions. She noted that training and awareness sessions will take place over the next months.

### ***The Board Approved the SHSCT Standing Financial Instructions***

#### **18. SHSCT ANNUAL STRATEGIC PLAN 2025/26**

Mrs Wilson referred to the Trust Strategy launched 9<sup>th</sup> June 2025 which underpins the annual strategic plan presented. Ms Wilson noted the five priorities and the Trust will report against each of these via Strategy and Transformation committee.

### ***The Board Approved the SHSCT Annual Strategic Plan 2025/26***

#### **19. ANY OTHER NOTIFIED BUSINESS**

The Executive Directors of Medicine, Social Work, Nursing and Finance were asked if they had any other issues relating to their professional roles they wished to bring to the Board's attention. There were none noted.

There was no other notified business.

The Chair advised the next public meeting of the Trust Board would take place on Thursday 25<sup>th</sup> September 2025 at 10:30 am.

## **PAPERS FOR INFORMATION**

Members noted the following agenda items for information purposes.

**a. AUDIT & RISK ASSURANCE COMMITTEE**

- Minutes of meeting held on 15<sup>th</sup> May 2025

**b. GOVERNANCE COMMITTEE**

- Minutes of meeting held on 27<sup>th</sup> February 2025

**c. STRATEGY & TRANSFORMATION COMMITTEE**

- Minutes of meeting held 12<sup>th</sup> March 2025

**d. SOUTHERN HEALTH AND SOCIAL CARE TRUST HIGHLIGHTS**

**e. CHAIR AND NON-EXECUTIVE DIRECTOR ENGAGEMENTS**

**f. CHIEF EXECUTIVE ENGAGEMENTS**

*The meeting concluded at 1:20 p.m.*