

**Minutes of a Meeting of the Governance Committee held on
Monday 7th July at 3.p.m. in the Boardroom,
Trust Headquarters, Craigavon**

PRESENT:

Mr J Johnston, Non-Executive Director (*Chair*)
Mrs G Browne, Non-Executive Director
Mr C Stewart, Non-Executive Director
Mr S Spoerry, Interim Chief Executive
Dr S Austin, Medical Director
Ms C Teggart, Director of Finance, Procurement and Estates

IN ATTENDANCE:

Ms R O'Hare, Assistant Director of Disability Services (for Ms McGall)
Ms L Houlihan, Interim Assistant Director of Nursing, Patient Safety, Quality & Experience. (for Mrs Ferguson)
Mrs M Magennis, Assistant Director Social Work, Governance, Workforce (for Mr McCafferty)
Mrs V Toal, Director HROD (item 8 only)
Mr S Wallace, Head of Office
Mrs R Vennard, Committee Secretary (*Minute taker*)

APOLOGIES:

Mrs D Ferguson, Interim Executive Director of Nursing, Midwives and Allied Health Professions, Functional Support Services and Infection Control
Mr C McCafferty, Director of Children and Young People's Services/
Executive Director of Social Work
Ms J McGall, Director of Mental Health and Disability
Mrs S Judt, Board Assurance Manager

1. WELCOME AND APOLOGIES

The Chair welcomed everyone to the meeting, particularly Mr Steve Spoerry to his first Governance Committee meeting and those who were deputising for Directors. The Chair also noted the apologies above.

2. DECLARATION OF INTERESTS

The Chair asked members to declare any interests in relation to items on the agenda. There were none noted.

3. CHAIR'S BUSINESS

Mr Johnston advised that Mrs Ferguson is retiring from the Trust and will be replaced by Mrs Grace Hamilton. He asked that Mrs Hamilton is invited to attend the next Committee meeting in September along with Mrs Ferguson for handover purposes.

ACTION – Mrs Grace Hamilton to be invited to the September Committee meeting.

4. MINUTES OF MEETING HELD ON 27th February 2025

The Minutes of the meeting held on 27th February 2025 were agreed as an accurate record.

5. MATTERS ARISING FROM PREVIOUS MEETING

Members noted the updates from relevant Directors.

Regarding the requirements governing Access NI checks, it was agreed to await the outcome of discussions before considering escalation. Mr Johnston asked for this action to be kept on matters arising.

A detailed paper which provided an update on domiciliary care in Armagh and Dungannon was included in members' papers. Mr Johnston asked for discussion on this item to be deferred until the September 2025 meeting when Mr Beattie would be in attendance.

Action – Item to be deferred to September meeting

As requested at the previous meeting, Ms McGall provided a paper for information entitled “Programme for Government ‘Doing What Matters Most’, 2024-2027 and alignment with Mental Health Division priorities.” Mr Johnston welcomed the paper.

In relation to Cyber security, members were advised that the business case for the Regional Security Operations Centre was still awaiting approval from BSO. Mr Stewart stated that he felt this remains a significant risk. Mr Johnston concurred with Mr Stewart and agreed to escalate to Trust Board. Mr Spoerry stated that as Trust Board is not meeting until September 2025, he will ensure there is a continued operational focus on this in the meantime. Ms Teggart assured members that this risk is on the Corporate Risk Register and being actively monitored.

Action – Mr Johnston to escalate cyber security risk to Trust Board

At the previous meeting, members had requested that consideration be given to additional information regarding key governance escalations be included in the Chief Executive’s briefing. Mr Wallace confirmed that an escalation framework has been developed, and a workshop has been scheduled for September 2025.

In relation to complaints and compliments, members noted that the report summary page has been updated to reflect specific issues for consideration by the Committee. Discussion ensued in which the inclusion of Care Opinion was raised. Mr Spoerry stated that he would be keen to have Care Opinion feedback included. Mr Johnston asked that this is considered going forward.

ACTION – Dr Austin to consider incorporation of care opinion data in service user feedback report

Mortality reporting – Mr Johnston asked for further discussion on this to include a suggestion by Ms Houlihan that the report would include out of hours mortality.

Action – Dr Austin to consider inclusion of specific data with regards to out of hours mortality

Mr Johnston advised that he met with the Governance Steering Groups Chairs after the last Governance Committee meeting to discuss a structure/process for producing stabilisation/recovery proposals in relation to specific corporate service delivery areas within the ambit of the Committee. Following this discussion, he was content that the issues are being progressed in relation. A new structure for this focused reporting has been developed and will be piloted in September 2025. Reports relating to Fire Safety, Laboratory Services and Service User Feedback are the first to be piloted and are to be included on the Committee's agenda for the September meeting.

Mr Johnston asked members to pass on his thanks for the work that teams have undertaken to produce the reports.

6. Corporate Risk Register

Mr Spoerry gave an overview of the corporate risk register and stated that the shortage of Consultant Psychiatrists continues to be a significant risk. He referred to the mitigating actions in place. Mr Spoerry stated that he was pleased to report that the Permanent Secretary has promised more oversight and accountability of the training places for the healthcare professions. Mr Johnston asked for clarification if funding is in place and the post is vacant, therefore a supply issue. Mr Johnston asked can the funding for the post be used to fund training, Ms Teggart explained the funding would be used to consider the most appropriate options. Discussion ensued in which Ms Browne asked what the recruitment strategy was, what is being done to attract consultants to apply. Dr Austin spoke about the challenges and advised that there is work on going to attract candidates. At this point, Mr Wallace advised that a workshop on risk appetite has been arranged for the Autumn. In terms of movements on the CRR, Mr Stewart suggested that the inclusion of timescales or an indication of any movement in the risk would be helpful. Mr Stewart asked about the finance risk and the risk of destabilisation in the absence of deficit funding?

Ms Teggart noted that whilst the risk is currently green due to the benefit of non recurrent deficit funding in 2024/25, the risk rating continues to be reported as red as the Trust is predicting a recurrent deficit in 2025-26. She acknowledged this could change, as funding is received and the deficit decreases. She spoke of the importance of making decisions financially and economically to achieve financial breakeven. Mr Stewart noted that if that is the rationale for the risk then the description of the risk would need to be looked at. Ms Teggart agreed it can be looked at.

ACTION- Request for more detailed information on timescales for actions to be included on the Corporate Risk Register - All

ACTION – Finance risk descriptor to be re-visited – Ms Teggart

7. FEEDBACK FROM STEERING GROUP CHAIRS

Ms Teggart gave an overview of the combined governance steering group meeting held on 29th April 2025 and highlighted areas of concern.

Mr Johnston raised the fact that 71% of internal clinical guidelines are overdue and he asked about the system for capturing these standards and guidelines electronically. Mrs Browne asked how the Trust ensures the guidelines that have expired are being updated in a timely manner. Mr Wallace stated there is a system in place to track guidelines, with reminders and a database, however significant work will be required to bring guidelines to an up-to-date position. Mr Johnston asked this to be an action point and an area of focus for the Committee.

Ms Browne wanted to acknowledge and congratulate the SHSCT as its the first acute mental health Hospital to receive The Royal College of Psychiatry accreditation (QNWA) on the island of Ireland, and also on Q3 internal audit no findings found.

ACTION Progress updates on clinical guidelines that are overdue to be provided to the Committee

Ms Teggart gave an overview on Blood transfusion, Laboratory services and Paying and Private Practice which were subject to Internal audit.

Mr Johnston asked about food wastage and if this is reported through Finance, Performance and Workforce committee? Ms Teggart stated there is a savings target in 25-26 to reduce food waste and the Food Waste Group reports to the Steering Group which then reports through to Governance committee.

In relation to community equipment, Mr Johnston asked about Community equipment and if the 27 beds provided per month, are meeting the demand?

Action Mr B Beattie to clarify whether the supply of beds is meeting the demand of the service.

Mr Johnston thanked Ms Teggart for the comprehensive reports and the assurance provided.

8. RAISING CONCERN REPORT (WHISTLEBLOWING)

Mrs Toal gave an overview of the Raising Concern Report and highlighted a few key points as follows:-

- In 2024/25, the number of concerns raised via the formal whistleblowing process was lower than the previous year and the lowest level since the 2017/18 year.

A targeted approach to release of Managers and Staff will be progressed for remainder of 2025/26 to increase the uptake of these awareness sessions. The Board will require training on raising concerns now that all new NEDs have commenced. 'Protect' a whistleblowing Charity in England has been contacted again as had previously provided Board level training in the past, to provide the training again.

- DOH consultation on the Being Open Framework has closed and Dr Peter McBride is leading a regional group to review the responses. A year one action aligned to the Trust's Strategy 2030 involves mapping the Trust's approach to culture development work – open, just and learning culture across the Trust. Work will begin on this in August. This will form the overarching framework under which raising concerns will sit.
- It is anticipated that regional workstreams relating to raising concerns will also arise given the ongoing cultural issues in the media relating to cardiothoracic surgery.

Ms Browne asked for the percentage number of managers trained to which Mrs Toal advised that it is around 15% of managers - about 1100 Managers. Mrs Toal mentioned the training had to be stopped due to resource, so the figures are rather low. Ms Browne agreed there needs to be a real focus on Whistleblowing awareness. Mrs Toal stated that when there is focus, there then is an increase in cases. Mr Johnston suggested a more targeted approach and stated that he would be interested in exploring this at a patient population group level, Mrs Toal referred to cases which are raised anonymously, and the challenge of providing feedback and how concerns are being addressed. Mr Johnston believes that as there are concerns around under performance, he would like to escalate this matter to the Board. Ms Houlihan mentioned she attended a good practice presentation, and she intended to introduce a 'learn on the go' concept giving 3 key messages which she believed would be an effective way forward of engaging with staff enabling to reach over 200 staff at a time. Ms Toal thanked Ms Houlihan for her suggestion. Ms Browne suggested when new staff join the Trust, as part of their induction, whistleblowing is highlighted at that stage to advise that there are steps in place to support staff.

ACTION – Mr Johnston to escalate concerns on the underperformance of whistleblowing to the Trust Board

9. DRAFT GOVERNANCE STATEMENT

Mr Spoerry thanked the team for producing the Governance Statement. Ms Teggart confirmed that the annual report and accounts have now been signed off.

10. DRAFT GOVERNANCE COMMITTEE ANNUAL REPORT

Mr Johnston presented the Governance Committee Annual report for approval. Members were content to approve the report for onward submission to Trust Board.

11. ANY OTHER BUSINESS

- i) The minutes of the Trust's Mid-year ground clearing meeting were noted. Ms Teggart advised that the End Year meeting due to take place on 3rd June 2025 was cancelled and rescheduled for 24th July 2025.
- ii) Mr Johnston noted that the Governance Committee Terms of Reference were agreed via email and noted formally today.

Mr Johnston thanked everyone for their contribution to the meeting.

The meeting concluded at 4.30 p.m.

SIGNED: _____ **DATED:** _____