

**Minutes of Trust Board meeting held on Thursday, 29<sup>th</sup> January 2026  
at 11.00 a.m. in the Boardroom, Trust Headquarters, Craigavon**

**PRESENT**

Ms E Mullan, Chair  
Mr S Spoerry, Interim Chief Executive  
Mrs G Browne, 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  
Mr C McCafferty, Deputy Chief Executive, Executive Director of Social Work /  
Director of Children, Young People and Women's Services  
Dr S Austin, Executive Medical Director  
Mrs C Marks, Executive Director of Finance, Procurement and Estates  
Mrs G Hamilton, 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  
Mrs J McGall, Director Mental Health and Disability Services  
Mr B Beattie, Director of Adult Community Services  
Mrs T Reid, Director of Medicine and Unscheduled Care  
Mrs V Toal, Director of Human Resources and Organisational Development  
Mrs R Rogers, Head of Communications  
Mr D McClements, Interim Director of Surgery and Clinical Services  
Dr Sinead Hannan and with representatives from the Seasons of Life Project  
(Attendance for Item 7)  
Mrs Christine Larmour, Chair NIAS (Attendance for Item 8)  
Mrs Maxine Paterson, Chief Executive NIAS (Attendance for Item 8)  
Dr Gareth Hampton (Attendance for Item 8)  
Dr Raymond McKee (Attendance for Item 9)  
Mrs B Hughes, Interim Assistant Director of Surgery (Attendance for Item 9)  
Professor G Evans, Subject Matter Expert, Information Technology  
(Attendance for Item 12 via MS Teams)  
Mr S Wallace, Head of Office (Minutes)

## **APOLOGIES**

Mrs M Corkey, Non-Executive Director

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

The Chair welcomed everyone to the meeting and noted apologies. The Chair formally expressed Board members condolences to their friend and Colleague Mrs Michele Corkey on the passing of Mrs Corkey's husband Gavin on 3<sup>rd</sup> January 2026.

The Chair acknowledged current pressures faced by the Trust and the excellent work that staff are doing to maintain services. The Chair noted her interactions with staff on visits and took the opportunity to state that their voices were heard and understood by the Board. She stated the Board members thanks for their extraordinary efforts.

### **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. CHAIR UPDATE**

The Chair's update was noted as read by members and those in attendance. No comments or questions were noted.

### **4. CHIEF EXECUTIVE UPDATE**

The Chief Executive's update was taken as read by members and those in attendance. The Chief Executive endorsed the Chair's remarks and thanks to staff regarding current service pressures and all going above and beyond to deliver safe services. He stated that this morning the Southern Trust was recorded as being the best performing Northern Ireland Trust regarding medically optimised patients who are awaiting complex discharge however cautioned there is much more work to do regarding this.

The Chief Executive announced and congratulated Mr McCafferty on his appointment as Deputy Chief Executive. He also announced the appointment of Mrs Debbie Burns as Director of Operations who will commence her role on 9<sup>th</sup> February 2026.

The Chief Executive committed to purposeful collaboration to address constraints affecting patient flow, emphasising the need to manage present challenges and prevent recurrence by strengthening operational

management and reviewing service portfolios across acute and community services. He also noted progress in appointing doctors to clinical lead roles which will reinforce medical leadership which in turn will benefit both patients and staff.

The Chief Executive noted the regional centralisation of breast symptomatic service waiting lists across Northern Ireland which has been implemented to optimise resource use. He stated the Southern Trust area previously had the worst waiting times but is now benefiting from this change. Specifically, he noted that the Trust has improved utilisation of breast clinics, meeting commissioned capacity, and is collaborating regionally to assess demand and capacity, including reviewing clinic templates and appropriate patient numbers.

The Chief Executive also noted that following the departure of a consultant surgeon, a successful recruitment process resulted in a new consultant set to start in April, with interim locum arrangements being scoped to maintain service levels. In terms of outcomes he noted that since May 2025, overall waiting times for breast cancer assessment have decreased from approximately 12 weeks to 7 weeks, with ongoing efforts to further reduce delays.

Mr Stewart referred to the winter pressures and asked can any of the successful interventions be mainstreamed into how the Trust provides its services. The Chief Executive stated this was a key objective, however, noted that service interfaces operate and changes in resource requirements will be required for long-term sustainability of mainstreaming change.

In conclusion the Chief Executive noted the appointment of four Consultant Radiologists, he gave his thanks to Dr Imran Yousaf who has worked with international doctors in terms of their personal development enabling them to be ready for applying for Consultant level posts.

**5. MINUTES OF PREVIOUS MEETING HELD ON 27<sup>th</sup> NOVEMBER 2025**  
Minutes of the meeting held on 27<sup>th</sup> November 2025 were approved.

***Minutes of 27<sup>th</sup> November 2025 were approved***

## **6. MATTERS ARISING**

Matters arising from the 27<sup>th</sup> November 2025 were referred to and completed actions noted.

## **7. PRESENTATION – LEARNING FROM STAFF AND SERVICE USER EXPERIENCE - PRESENTATION: SEASONS OF LIFE PROJECT**

The Chair welcomed Dr Hannan and St Patrick's High School to present on the Seasons for Life Project.

Dr Hannan, staff and service users presented the outcomes of a school-based bereavement support pilot at St. Patrick's High School, detailing its design, implementation, outcomes, and future plans, with board members expressing strong support for its continuation and expansion. Dr Hannan explained the pilot, funded by Q Exchange, was co-produced with young people, staff, and voluntary sector partners, embedding QI methodology and delivering the 'Seasons of Life' workshop in schools, targeting bereavement, loss and trauma.

The group noted the intervention included narrative therapy, peer support, and staff training, reaching 96 young people and achieving a 60% improvement in confidence and coping, with staff confidence rising from 21% to 79% post-training. In terms of feedback, it was highlighted that the programme reduced isolation, improved peer connection, and unexpected positive system effects, such as increased support-seeking by staff and families and re-engagement of previously disengaged students.

It was announced that the project was recognised with a Picker Award for partnership working, and next steps include creating a memorial art piece, preparing research publication, presenting at conferences, and exploring replication in other settings and further funding.

Mr McCafferty stated the importance of this area of work and stated this was a key area for potential development moving forward, however the initiative requires funding from the commissioner. The Chair thanked all who presented and stated their willingness to share and speak was to be commended, this was echoed by Mrs Browne and Mr Lynas.

The Chief Executive noted the extraordinary achievement of winning the Picker Award and noted it was well deserved recognition of the incredible work.

**8. RESET PLAN – NORTHERN IRELAND AMBULANCE SERVICE**  
***Item moved to later in agenda and presented at 1:30pm***

The Chair welcomed Mrs Michele Larmour, Chair NIAS, Mrs Maxine Paterson, Interim Chief Executive NAIS and Dr Gareth Hampton, Divisional Medical Director, Emergency Medicine and Unscheduled Care, Southern Health and Social Care Trust.

Mrs Larmour and Mrs Paterson discussed the impact of ambulance handover delays on patient safety, workforce, and system resilience, reviewed collaborative efforts to reduce ED conveyance, and emphasised the need for whole-system solutions and continued partnership.

Mrs Paterson referred to ambulance handover delays exceeding 60 minutes associated with expected patient harm, including unmanaged pain and deconditioning, and result in lost ambulance hours, delayed response times, and increased risk for the community. She noted that delays contribute to staff fatigue with significant financial costs due to lost operational capacity

Mrs Paterson noted that the equivalent of 30 ambulance shifts per day were lost to handover delays regionally which equates to 26% of planned emergency capacity lost. She noted that NIAS has reduced the proportion of patients conveyed to ED through expanded clinical pathways, advanced paramedic roles, and increased 'hear and treat' and 'see and treat' interventions, with ongoing monitoring for safety. Mrs Paterson explained that the Trust and NIAS are collaborating on alternatives to ED admission, such as hospital at home pilots, direct assessment units, and mental health crisis response pathways, with the Southern Trust recognized as a regional exemplar.

The Chair thanked Mrs Larmour and Mrs Paterson for their presentation. Board members acknowledged the systemic nature of the problem, the need for whole-hospital and community engagement, and committed to ongoing improvement, education, and partnership to address flow and discharge challenges.

Dr Hampton, Dr Austin and Mrs Reid discussed the challenges of managing risk in emergency care, particularly regarding Category 2 response times,

the need for a shared understanding of risk across the Southern Trust, and commitments to improve ambulance handover and patient safety.

Dr Hampton referred to challenges that exist in relation to patients who arrive by their own transport and the need to ensure that all patients receive appropriate clinical attention.

The Board collectively emphasised the importance of collaborative leadership, ongoing dialogue, and partnership between the Trust and other stakeholders to address system-wide challenges and improve patient outcomes.

Participants expressed appreciation for the collaborative approach and mutual understanding between the Trust and its partners, noting that this spirit is essential for tackling the profound challenges faced by the health system.

## **9. SOUTHERN TRUST THEATRE UTILISATION AND ELECTIVE CARE PRESENTATION**

The Chair welcomed Dr Raymond McKee and Mrs Blaitheid Hughes to the meeting. Mrs Hughes, Dr McKee and Mr McClements presented a comprehensive update on elective theatre utilisation, workforce challenges, recruitment efforts, and improvement plans, with board members discussing audit practices, workforce planning, and the impact of system constraints.

Mrs Hughes noted the Trust operates seven elective theatres at Craigavon Area Hospital and five at Daisy Hill Hospital including one bespoke paediatric theatre. Mrs Hughes noted recent improvements in scheduled sessions and a focus on sustaining high utilisation rates, despite peaks and troughs due to factors like audits and staff availability.

Mrs Hughes referred to recent recruitment drives for theatre nurses yielded positive results, though high maternity rates and training requirements pose ongoing challenges; operator shortages remain key constraints. She referred to clinical governance stating monthly clinical governance meetings are required for robust oversight, impacting theatre scheduling but considered essential for quality and safety, with efforts to balance their frequency and timing to minimise disruption.

Mrs Hughes referred to recent pre-operative assessment investment which aims to optimise patient pathways and reduce unnecessary pre-

operative appointments with plans to allocate resources efficiently and improve throughput. Mrs Hughes also noted the Trust aims to remove Daisy Hill and Craigavon Area Hospitals from enhanced SPPG Support and Intervention Framework monitoring by the end of the financial year noting increases in performance over the previous 12 month period. She acknowledged the impact Encompass implementation had, however, and noted theatres activity recovered in the following months. Mrs Hughes confirmed that theatre activity is similar to other comparable regional units in terms of productivity.

The Chair thanked the team for their presentation. Mr Johnston asked are there medium to long term workforce plans for this area. Mrs Hughes and Mr McClements advised that each service has workforce plans and a recently established clinical reference group will oversee this work. Mr Lynas asked are there opportunities to better balance audit work and productivity time. Dr McKee advised that time allocated for audits covers aspects of wider clinical governance and safety, Dr Austin concurred noting that various safety metrics were considered as part of this to provide assurance regarding the service delivered.

The Chief Executive thanked the team for the update on progress and commended the improvement work to date. The Chief Executive noted potential for a tariff-based funding model for surgical services in the future that would be highly effective for improving the overall position.

The Chair thanked the team for the presentation. She noted that any regional solutions to supporting operators to input into Southern Trust theatre activity is a useful and appropriate area to explore. The Chair also noted that reducing the Support and Intervention Framework level for Trust theatres is important, however outcomes in terms of reducing waiting lists to give service users the most effective and efficient care is paramount.

## **10. SOUTHERN TRUST INTEGRATED MATERNITY AND WOMEN'S HEALTH UPDATE**

Mr McCafferty presented the Infant Maternal and Women's Health Services update. He referenced the outcomes of a multidisciplinary workshop on maternity services held in September 2025, noting improvements in midwifery staffing, ongoing challenges in obstetric recruitment to Daisy Hill Hospital in particular and ongoing development work in respect of Governance and mitigations. .

He referred to the recent and incremental reduction in the SPPG Support and Intervention Framework level from level four to level one in December 2025. He stated that this is not to be taken as an indication of a wholly stable service, rather that the SPPG acknowledging that the Trust has a strong overview of the challenges and required escalation pathways in place. He noted that the medical element of the service in Daisy Hill Hospital is still overly reliant on locum consultants which can lead to fragility due to the absence of long term commitment. There are currently effective mitigation in place including a business continuity plan incorporating a whole service approach concerning both sites. He noted that the Craigavon Area Hospital service also has localised challenges.

The Chair thanked Mr McCafferty for his update and welcomed the inclusion of staff in contributing to discussions. Regarding the future service design.

The Chief Executive commended the work to date to maintain safe services for both Trust sites.

## **11. TRUST ESTATES STRATEGY**

Mrs Marks presented the Trust Estate Strategy to 2030, outlining strategic aims for maintenance, sustainability, capital development, space utilisation, and digital capability noted the funding constraints that exist and the need for rational estate management.

Mrs Marks noted the Estates Strategy focuses on reducing backlog maintenance, implementing sustainability initiatives, facilitating clinical and corporate requirements through capital projects, maximizing estate efficiency, and enhancing digital and technological capabilities. She noted that significant challenges exist due to limited capital investment, with a current maintenance liability of £184 million and reliance on annual plans and departmental allocations to prioritise high-impact projects. Mrs Marks described the efforts are underway to co-locate teams, promote agile working, and rationalise underutilised or vacant properties, with an emphasis on data-driven decision-making and stakeholder consultation.

The Chair congratulated Mrs Marks and the Estates team on the ambition in the strategy while being conscious that capital allocations may make the delivery of some elements challenging. Mr Lynas also welcomed the strategy and commented on the low level of capital investment and the challenges this may introduce to achievement of the strategy.

The Chair advised that the Trust capital position has been and will continue to be consistently raised with the Department of Health.

### ***The Board approved the Estates Strategy***

#### **12. SOUTHERN TRUST MAJOR INCIDENT OUTAGE**

The Chair welcomed Professor Graham Evans to the meeting to present the findings of the Major Incident Outage review group findings relating to the IT outage in September 2025. Mrs Wilson prefaced the report presentation confirming that the Trust had rescheduled all the lost activity and are not aware of any direct patient harm that occurred because of the outage.

Professor Evans noted that the adoption of digital data systems drives improvement, however, can bring a secondary area of challenge. He noted that digital transformation is not limited to technology updates, it's a people process as well. Professor Evans stated that following event analysis it was found that the September 2025 outage was caused by a human process error during critical infrastructure maintenance by a third-party supplier. He noted that rapid recovery was achieved within one business day through coordinated efforts focused on patient safety. He stated that the incident report contained 18 key recommendations including implementing a second-stage review (second pair of eyes) for critical changes, proactive vendor engagement, and strengthened change control processes, with several actions already in place.

Mrs Wilson stated an action plan is being developed to track progress on all recommendations, with ongoing communication to staff about maintenance windows and business continuity arrangements. She stated that as learning was identified as part of the review process strengthening actions have been taken. She noted not all recommendations are complete but work is underway to meet the requirements of each.

Ms Wilson referred to a recently planned maintenance window on Tuesday 27<sup>th</sup> January 2026 during which systems performed a little slower. She stated some slowdown may occur during these maintenance periods and the higher reliance on digital solutions make the impact more visible. She emphasised that services are required to maintain business continuity plans in case of any significant issues with digital service access.

The Board approved the report, commending the professionalism of the response and the effectiveness of communications during and after the incident.

The Chair thanked Professor Evans for his work as part of the review and production of the final report.

### **The Board approved the Incident Review Report**

#### **13. CORPORATE PARENTING REPORT**

Mr McCafferty presented the Trust's corporate parenting report, highlighting improvements in social work staffing, increased kinship care placements, remaining workforce challenges, and the rising number of children in care. He noted the Trust has made incremental gains in stabilising social work staffing, with 29 new qualified staff joining children's services and reduced staff turnover, though significant vacancies remain. Mr McCafferty noted that approximately 45% of children entering care are placed with extended family, and the trust performs well in recruiting foster carers, minimising reliance on independent sector foster care provision.

Mr McCafferty stated that the Trust provided around 2,100 overnight short breaks away from home for children with disabilities in the past year, supporting families, and with a continued focus on enhancing service provision.

He noted however despite social work staff recruitment improvements, 25-30% of vacancies persist in some frontline teams, resulting in a small number of Looked after children, approximately 35 (from a LAC population of circa 700) not having an allocated social worker. These children are cared for in stable foster placements and regularly reviewed by the service. He also noted that the number of children in full-time care has exceeded 700, an unprecedented level for the Trust, highlighting the need for continued focus on early intervention and prevention and workforce and placement capacity.

Mr McCafferty specifically thanks the foster carers in this Trust who make such a significant contribution to caring for and supporting Looked after children. m.

Both the Chair and Chief Executive thanked Mr Cafferty for his report.

#### **14. SOUTHERN TRUST FINANCIAL PERFORMANCE – MONTH 9**

Mrs Marks provided an update on the trust's financial position at month 9. She noted the Trust is reporting a break-even position against the control total, with an underlying surplus of £2.4 million at month 9 and overachievement of the £43 million savings target by £700,000 with some minor increases in discretionary spend. She stated that medical locum agency spend is forecast at £28 million which although it has not increased on last year's spend also has not been reduced as planned. She noted successes in efficiencies with nursing agency spend on target due to successful workforce reforms, though winter pressures may increase agency usage.

Mrs Marks noted that the capital program of £21.6 million is on track, with £18.8 million committed, and prompt payment targets are being met. She advised that improved budgetary control and precise budgeting are priorities for the next year, with ongoing efforts to monitor pressures and maintain financial stability. She also noted that the Trust's prompt payment target of 95% has been met for month 9.

**The Board approved Trust Financial Performance Month 9 Report**

#### **15. DRAFT BOARD ASSURANCE FRAMEWORK**

Dr Austin presented the updated board assurance framework, which incorporates previous risk appetite exercises and provides a comprehensive review of risk management. The Board approved the document.

**The Board Approved the Board Assurance Framework**

#### **16. COMMITTEE CHAIR REPORTS**

***i) Finance and Performance Committee – 4<sup>th</sup> December 2025***

Mrs Ensor noted her chair report and minutes from the 4<sup>th</sup> December 2025 meeting stating there were no items for escalation.

***ii) Governance Committee, 11<sup>th</sup> December 2025***

Mr Johnston noted his chair report and minutes from the 11<sup>th</sup> December 2025 meeting stating there were no items for escalation.

**17. APPLICATION OF TRUST SEAL (ST1248/25)**

Mrs Marks sought approval for the Application of the Trust Seal to contract documentation as outlined in members papers.

***The Board approved the application of the Trust Seal***

**18. BOARD GOVERNANCE SELF ASSESSMENT**

The Chair stated the Trust, as a Department of Health Arm's Length Bodies Boards, are required to complete a Board Governance Self-Assessment on an annual basis. She noted the completed self-assessment is intended to help Arm's Length Bodies improve the effectiveness of their Board and provide the Board members with assurance that it is conducting its business in accordance with best practice.

The Trust Board to date has used the Department's self-assessment tool. In 2025/26, however, the Trust piloted the Public Health Agency Board Self-Assessment approach which was kindly shared by their Board Chair. She also noted that agreement was sought and obtained from the Department of Health to conduct the self-assessment using this tool. She stated that the aim of the self-assessment is to strengthen Board Effectiveness, encourage personal reflection and support our continued development as a Board.

She advised outcome of this Self-Assessment will be shared with the Department of Health as part of the Annual Department of Health and Trust Annual Engagement Plan. At a Trust level the outcomes of the assessment will inform Board Development activities in 2026.

***The Board approved the Board Self-Assessment Document***

**19. ANY OTHER NOTIFIED BUSINESS**

No other business was noted.

The Chair asked the Executive Directors of Finance, Procurement and Estates, Medicine, Social Work and Nursing if they had any other issues relating to their professional roles that they wished to bring to the Board's attention.

- Dr Austin noted no issues

- Mrs Hamilton noted no issues
- Mr McCafferty noted no issues
- Mrs Marks noted no issues

***The date of the next meeting will be Thursday, 26th March 2026 at 10.30 a.m.***

### **PAPERS FOR INFORMATION**

Members noted the following agenda items for information purposes.

**a. Finance and Performance Committee**

- Minutes of meeting held on 4<sup>th</sup> December 2025
- Committee Work Programme 2026
- Terms of Reference

**b. Governance Committee**

- Minutes of meeting held on 11<sup>th</sup> December 2025
- Committee Work Programme 2026
- Terms of Reference

**c. Southern Health and Social Care Trust Highlights**

**d. Chair and Non-Executive Directors Engagements**

**e. Chief Executive's Engagement for Trust Board**