

## Minutes of a Trust Board meeting held in public on Thursday, 24<sup>th</sup> October 2019 at 11.30 a.m. in The Boardroom, Trust Headquarters, Craigavon

#### **PRESENT**

Mrs R Brownlee, Chair

Mr S Devlin, Chief Executive

Ms G Donaghy Non-Executive Director

Mrs P Leeson, Non-Executive Director

Mrs H McCartan, Non-Executive Director

Mrs S Rooney, Non-Executive Director

Mr J Wilkinson, Non-Executive Director

Mr P Morgan, Director of Children and Young People's Services / Executive Director of Social Work

Dr M O'Kane, Medical Director

Ms H O'Neill, Director of Finance, Procurement and Estates

Mrs H Trouton, Interim Executive Director of Nursing & Allied Health Professionals

#### IN ATTENDANCE

Mrs A Magwood, Director of Performance and Reform

Mrs M McClements, Interim Director of Acute Services

Mr B McNeany, Director of Mental Health and Disability Services

Mrs V Toal, Director of Human Resources and Organisational Development

Mr B Beattie, Acting Director of Older People and Primary Care

Mrs R Rogers, Head of Communications

Mrs P Keenan, Boardroom Apprentice

Mrs S Judt, Board Assurance Manager

Mrs S McCormick, Committee Secretary (Minutes)

#### **APOLOGIES**

Mr M McDonald, Non-Executive Director Ms E Mullan, Non-Executive Director Mrs E Gishkori, Director of Acute Services

#### 1. CHAIR'S WELCOME

The Chair welcomed everyone to the meeting and in particular Mrs Paula Keenan, Boardroom Apprentice. At this point members were reminded of the principles of Board meeting behaviours and asked that mobile phones are turned to silent and laptops / iPads are used for accessing Board papers only during the meeting. The Chair referred to the recent 'Learning from Compassion' Leadership Conference and commended Mrs Toal and Mrs Williamson for their input into the extremely successful event. She remarked on the learning available and emphasised the need to implement this into our caring for each other and those who come into our service. The Chair stated work is progressing around the patient experience aspect and bringing service users to the Boardroom to share their story.

At this point the Chair was pleased to welcome five members of Trust staff from the Mental Health and Disability Service Directorate and stated that she would welcome their feedback in terms of what they will learn at today's meeting and how they take this learning back to their colleagues.

#### 2. <u>DECLARATION OF INTERESTS</u>

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

## 3. <u>SERVICE IMPROVEMENT/LEARNING FROM SERVICE USER EXPERIENCE: OUTPATIENT PARENTERAL ANTIMICROBIAL THERAPY (OPAT) SERVICE</u>

The Chair welcomed Dr Sara Hedderwick, Consultant in Infection Medicine, Mr Peter McKee and Ms Geraldine Conlon Bingham, Trust Pharmacists to the meeting to present the important work being undertaken through the OPAT Service. At the outset, Dr Hedderwick explained that the service enables patients who have infections requiring treatment with intravenous antibiotics but who are otherwise well enough to go home, to get that care safely without hospital admission. Members welcomed the advantages and cost effectiveness of this way of working however recognised there were some aspects which need to be addressed.

Dr Hedderwick advised that through the use of Transformational money the Trust has recently enhanced the service with a focus on improved quality and this has already demonstrated a better patient experience. Members considered data for April-May 2018 and when compared to the same period in 2019 welcomed the success of the new service model evident through the 3 fold increase in patients moving from intravenous to oral therapy, the number of inpatient bed days saved along with the benefits of antimicrobial reviews carried out by Pharmacists as opposed to Consultants. The estimated annual budgetary saving of £365,102 was also welcomed. Dr Hedderwick referred to the important contribution made by the District Nursing Service, in particular around the reduction in frequency of antibiotic usage. In thinking about the future of this innovative service, Dr Hedderwick said the vision is to continue and expand the present model and work is already actively underway to identify compatible patients.

The Chair assured Dr Hedderwick of Trust Board's full support and thanked her for her informative presentation. The Chief Executive asked about the future potential of the service, to which Dr Hedderwick advised that with appropriate investment, the service has the scope to achieve additionality of 30-40 patients per day. Funding would also progress challenged elements within the service in terms of District Nursing, Pharmacy and IV Co-Ordinators, the latter of which are required immediately. Dr Hedderwick went on to highlight the need to strengthen the District Nursing input in terms of afterhours availability. At this point, Dr O'Kane asked a number of questions on the management of risks in terms of c-difficile and cross contamination and the challenges around antimicrobial prescribing to which Dr Hedderwick responded fully. Mrs Magwood highlighted the tremendous work undertaken by Pharmacists which has resulted in admission avoidance and emphasised the need to see practice based pharmacists developing further.

In drawing discussion to a conclusion the Chair commended the positive outcomes and said she looked forward to hearing how this innovate work progresses in the future. Mr Beattie acknowledged there was work to do with the District Nursing team in terms of ensuring evening shifts are covered. He welcomed the impact OPAT has had across the service and stated funding opportunities can be explored, to which Mrs Rooney flagged up the possible use of Trust Charitable Funds. Mrs Rooney also asked about links with the Acute Care at Home Team to which Dr Hedderwick advised the OPAT service are able to accept co morbidity patients and also cross referrals, however more formal links would be helpful.

### 4. CHAIR'S BUSINESS AND VISITS INCLUDING NON-EXECUTIVE DIRECTORS' BUSINESS AND VISITS

The Chair drew members' attention to her written report detailing events she had attended since the previous meeting, together with details of some good news stories and innovative work across the Trust. In particular, the Chair took time to pay tribute to staff who hosted the recent Positive Ageing Day, a celebratory event marking International Day of Older People and welcomed the wealth of information available at the high quality stands. A list of Non-Executive Directors' business and visits was noted.

#### 5. CHIEF EXECUTIVE'S BUSINESS AND VISITS

The Chief Executive presented his summary report and began by highlighting the area of Mental Health and Learning Disability. He stated that the service had performed well during 2018/19 despite facing increasing challenges. Members noted that whilst the Southern Trust had a higher occupancy level of available Mental Health inpatient and day case beds, length of stay performance was lower than the national average. The Chief Executive advised it was his intention to continue in this theme of reporting into the future and provide members with a flavour of performance across different service areas. Members welcomed this.

The Chief Executive updated members on the Newry Community Treatment and Care Centre. He advised an application for full planning permission was discussed at a meeting of the Newry Mourne and Down Council planning Committee the previous week and a number of issues around accessibility were raised. Once these have been addressed, it is envisaged a further planning application hearing will take place. A definitive timeframe has yet to be confirmed.

The Chief Executive referred to the current media coverage regarding the proposed changes to the law in Northern Ireland on Abortion. He pointed out immediate changes from 22 October 2019 would be in relation to the issue of decriminalisation. There will be no impact on the Trust regarding access to services prior to the establishment of a new legal framework for abortion services. A period of consultation across the region will take place in due course.

In conclusion members were asked to note a number of recent messages from the Permanent Secretary highlighting current challenges facing the health service. The Permanent Secretary acknowledged the fact that as budgets remain under intense pressure and at the same time, demand for care continues to grow, there are choices to be made on funding priorities in health and social care.

#### 6. MINUTES OF MEETING HELD ON 26<sup>th</sup> SEPTEMBER 2019

The minutes of the meeting held on 26<sup>th</sup> September 2019 were agreed as an accurate record and duly signed by the Chair.

The Board approved the minutes of the meeting held on 26<sup>th</sup> September 2019.

#### 7. MATTERS ARISING FROM PREVIOUS MEETINGS

Members noted the progress updates from the relevant Directors to issues raised at the previous meetings.

The Chair commented on the recently established Performance Committee and reminded members the performance dashboard will continue to be circulated to members via email on a monthly basis and discussed in detail at each Performance Committee meeting.

### 8i. <u>COMMUNITY EQUIPMENT SERVICE – BRIEFING ON HYBRID SERVICE MODEL</u>

At the outset, Mr Beattie set the item in context reminding members that at the meeting on 24<sup>th</sup> January 2019, Trust Board agreed to progress the implementation of a Hybrid Service Model by introducing a change to the existing Community Equipment Service (CES) voucher scheme for simple aids and equipment. Members were reminded regarding the finer detail of the new model, which had previously been agreed for implementation subject to an increase in the voucher redemption fee and further evaluation work undertaken within a 6 month period of implementation.

Reporting on progress to date, Mr Beattie advised that the service change was being introduced through a two phased approach. The first phase involving the existing 11 sub-stores plus the introduction of 5 new "emergency equipment" sub-stores (to allow staff to be able to access and issue essential equipment out of hours, to support hospital discharge and prevention of admission), along with BSO PALS providing equipment to retailers via voucher and a home delivery service. Members noted the detail regarding the required change to the Equipment Loans Management System (ELMS 2) configuration. The second phase involves the engagement process with retailers to confirm the definitive

position regarding the number of participating retailers, as well as the required work in terms of the logistical transitioning from the current model to the new hybrid service model.

Discussion ensued and Ms Donaghy asked about the software change timeframe for implementation and also highlighted that a number of the Key Performance Indicators (KPIs) relate to customer/stakeholder satisfaction. In responding, Mr Beattie acknowledged significant changes were required to the current ELMS 2 software, which is a regional system, however in the interim, work is progressing internally with the Trust IT department. Mr Beattie said it was envisaged sub stores will 'Go-live' using the new version from November 2019 onwards.

In response to a question from Mrs McClements, Mr Beattie stated that from January 2020 the system will 'Go-live' with Pharmacy/Retail partners. In terms of monitoring service delivery, Mr Beattie reassured members' that service users/carers and stakeholders will have opportunity to input into the process via feedback/surveys and he suggested it would be beneficial to update Board members on progress against KPIs in 6 months time.

The Chair raised concern at the delay in implementing the project. Mr Beattie acknowledged the position, however he pointed out a number of financial governance issues had impacted the project, which had not been built in as a risk. Discussion took place around the project KPIs. Mr Beattie pointed out these were in draft form and agreed to consider further. Mrs Rooney stated there would clearly be additional costs incurred if equipment was required over the weekend, to which Mr Beattie clarified that this would be the case if the BSO Home Delivery Service was used outside of normal hours and to avoid incurring additional costs the Trust had incorporated access to 11 sub stores plus 5 new "emergency equipment" sub stores.

In drawing discussions to a conclusion, the Chief Executive reminded members that the proposed service delivery changes had been part of the Trust Financial Savings, the challenge being could the Organisation avail of lower costs while returning savings and still deliver a high quality service. Mr Beattie agreed to provide an update to the Trust Board meeting scheduled for June 2020.

#### Action - Mr Beattie

#### 8ii. UNSCHEDULED CARE WINTER PLAN 2019/20

Mrs McClements advised members the 2019/20 Resilience Plan was set in the context of the regional focus on unscheduled care and the Southern Area Network Group. Members considered Table A within the plan, which highlighted specific ongoing initiatives funded recurrently and as a result of 2018/19 transformational monies. Mr Beattie advised these schemes had tested well in the last financial year and continued development was being progressed alongside lessons learned. In addition, Table B highlights 2019/20 schemes earmarked for progression within core funding and Mr Beattie advised a big focus to date has been on operational management to enable better system flow and create a positive impact from admission to discharge.

Members were advised the recurrent winter planning funding towards areas identified in the plan has been fully utilised, however coverage of costs arising from heightened unscheduled care pressures due to the sustained and prolonged winter period will require additional funds. Members noted Appendix 1, which sets out a range of other proposals which have been developed but are subject to additional funding.

In relation to pressures around bed capacity, the Chair asked about the potential for step down to the Nursing Home Sector, to which Mrs McClements advised that the Plan included those services the Trust has in place and she spoke of the placement challenges re patient choice.

Discussion ensued on the potential impact on discharges as a result of Pharmacy delays and preparation of ward documentation. McClements acknowledged the challenges and assured members the Trust was working to address the gaps. Dr O'Kane advised an audit of how every team carries out discharges was being progressed. The Chief Executive welcomed the content within the plan for 2019/20 and stated a focus this year will be to work closely with Clinicians on the frontline to address a small number of problematic areas well. In concluding discussion the Chair thanked Mrs McClements and Mr Beattie for providing a clear update on the winter resilience themes, however noted the disappointing performance in terms of Unscheduled Care. Rooney advised the Performance Committee have unscheduled care as one of the thematic areas for review at its next meeting in December 2019.

#### 9. DRAFT MID-YEAR ASSURANCE STATEMENT (ST967/19)

Ms O'Neill presented the draft Mid-Year Assurance Statement for retrospective approval and assured members the document had been reviewed in detail by Audit Committee, in advance of submission to the Department of Health on 18<sup>th</sup> October 2019. On behalf of the Audit Committee, Mrs McCartan welcomed the statement and in particular commended the constructive work undertaken by the Trust's Internal Audit Forum and the successful outcomes achieved in fully implementing a significant percentage of outstanding Priority 1 and Priority 2 Internal Audit recommendations. As Accounting Officer, the Chief Executive welcomed the detailed statement and stated that he was content that it was a good reflection of the current governance status within the Trust.

The Board approved the Draft Mid-Year Assurance Statement (ST967/19)

#### 10. REPORT TO THOSE CHARGED WITH GOVERNANCE 2018/19

Ms O'Neill presented the final report for information purposes and advised of an unqualified audit opinion on the Trust's 2018/19 accounts. The report had previously been presented in draft form to Trust Board at the meeting on 12<sup>th</sup> June 2019. Mrs O'Neill advised the final report was considered by Audit Committee on 10<sup>th</sup> October 2019.

#### 11. PATIENT/CLIENT SAFETY AND QUALITY OF CARE

#### i) Medical Director Report

Dr O'Kane spoke to this report which focuses on Medical Appraisal and Revalidation and wider support of the Medical Workforce. She pointed out that to date (2<sup>nd</sup> October 2019), for the January to December 2018 medical appraisal round, of the 346 eligible doctors 45% have completed and 21% are in the process of completing their medical appraisal. To date the remaining 34% have not completed the process. Members were advised the introduction of a regional electronic appraisal and revalidation system may be impacting on the speed of returns in 2019.

In terms of Medical Revalidation for the period April – September 2019, 60 doctors that have a GMC connection with the Trust have successfully revalidated during the first five year cycle. The second five year cycle is underway.

Mrs Rooney asked about the low compliance rate in regards to medical appraisals within Integrated Maternity and Women's Health division. Dr O'Kane acknowledged the disappointing compliance; however assured members a significant number of those eligible were in the process of completing. She stated reminder letters have been issued and an improved position is expected by December 2019. Mrs McCartan asked about the implications if Doctors fail to complete the appraisal process. Dr O'Kane outlined for members the direct correlation between the appraisal and revalidation processes and at what stage the General Medical Council (GMC) would be informed. In response to a question around 1:1 follow up on outstanding appraisals, Dr O'Kane stated the Trust has a good follow up process in place and risk assessments are conducted when necessary. She referred to the 360° appraisal system F3 doctors undertake which is also helpful.

#### ii) HCAI Report

Dr O'Kane presented the report and advised that current data shows there has been 36 C. difficile cases recorded in clinical areas within the Trust since the commencement of the financial year 2019/20 to date (24 October 2019) and acknowledged this to be concerning. In order to establish factors that may have attributed to the raise in infections, Dr O'Kane stated that work is progressing to review a number of patients in terms of looking at links to cross contamination and antimicrobial stewardship. She referred to challenges in the system, such as high levels of staff turnover, however advised that progress has been made in terms of diagnosis and improvements in antimicrobial prescribing. In order to assist in preventing further incidence Dr O'Kane spoke of the importance of ensuring a constant focus on hand hygiene and stated Mrs Trouton and herself continue to work with staff on the issue.

The Chair noted her concern at the low compliance levels in terms of bare below the elbow and hand hygiene, particularly the increasing use of gel nails. While welcoming a targeted approach to the matter, she emphasised continued observation and challenge by Ward managers was essential and ensuring gaps are addressed is paramount. Dr O'Kane referred to the Trust Uniform Policy and advised that staff have been reminded of their obligations to comply and directed to areas which require high attention.

Members noted for the period 1<sup>st</sup> April 2019 to 14<sup>th</sup> October 2019 there have been 2 cases of MRSA bacteraemia within the Trust, 1 of which has been identified as preventable and 33 MSSA bacteraemia, 4 of which have been identified as preventable.

#### 12. OPERATIONAL PERFORMANCE

#### i) Finance Report (ST968/19)

Ms O'Neill spoke to the report and advised the cumulative outturn at month 6 is a deficit of £1.7m. Factors attributing to the variance continue to include: transformation funding, ongoing unscheduled care pressures and increased agency expenditure to secure staff. She reminded members that Pay expenditure exceeds the budget by £3m and this is largely associated with medical and nursing. Ms O'Neill highlighted the flexible payroll arrangements costing £32.8m, an increase of £7.7m more than the same six month period last financial year.

Members noted an improvement in Prompt payment performance. The number of invoices presented for payment in the first six months of this financial year compared to prior year has increased by 15%. The increase which equates to 16,596 invoices has been paid in line with the 30 day target.

At this point, Ms O'Neill alluded to the challenges facing the Trust in achieving a break-even position at financial year end. Members welcomed the negotiations undertaken by Ms O'Neill with the HSCB and Department of Health to secure additional funding support. Ms O'Neill advised a mid-year hard close was in the process, which will inform the financial plan going forward. She pointed out the winter allocation has yet to be factored in and stated this was estimated at an additional £1.6m.

The Chair asked about the increased flexible payroll arrangements. Ms O'Neill acknowledged the challenges in this area; however emphasised the main priority for the Trust was ensuring patient safety.

The Board approved the Finance Report (ST968/19)

#### 13. BOARD REPORTS

#### i) Trust Annual Quality Report 2018/19 (ST969/19)

Mrs Magwood presented the Trust's 7<sup>th</sup> Annual Quality Report for approval and reminded members the report is published in response to the Quality 2020 agenda at the Department of Health. She pointed out the report contains a mixture of high level and softer data and

showcases some of the fantastic work which is underway across the Southern locality. Members were reminded that all Trust's publish their Annual Quality Report to coincide with World Quality Day on 14<sup>th</sup> November 2019.

Members welcomed the positive outcomes detailed within the report. Mr Wilkinson stated the Patient and Client Experience Committee would use the report to drill down deeper into a number of areas in regards to Patient Experience and Involvement.

### The Board approved the Trust Annual Quality Report 2018/19 (ST969/19)

### ii) Community Development and Health Improvement Annual Reports 2018/19 (ST970/19)

Mr Beattie presented the Community Development and Health Reports 2018/19 and advised that both Improvement Annual populated with live are examples of community development and health improvement activity led by the Promoting Wellbeing Division over the last year, contributing to the 'Making Life Better' themes. Mr Beattie pointed out that the challenge now is how the Organisation further embeds this work into everyday business and sets aside time for staff to facilitate engagement, empowerment and enablement and embed this into the way services are planned and delivered.

As Non-Executive Director with responsibility for Carers, Mrs McCartan welcomed the detail within the reports. She referred to the £6m per annum the Trust contributes through contracts and small grants with voluntary and community sector providers and indicated she would speak with Mr Beattie in more detail on this outside the meeting.

The Chief Executive commended the work around Community Development and Health Improvement as being fundamental to improving how we deliver health care into the future. He stated discussions are ongoing regionally and emphasised the need to see these themes incorporated into the Trust's Accountability Framework.

Ms Donaghy asked about partnership working through the Community Planning District Partnership. Mr Beattie advised he had recently attended a Community Planning meeting with Armagh City, Banbridge and Craigavon District Council and provided members with an update on progress and pointed out the importance of working in collaboration to tackle 'big issues'.

### The Board approved the Community Development and Health Improvement Annual Reports 2017/18 (ST970/19)

#### iii) IPC Annual Report 2018/19 (ST971/19)

Dr O'Kane presented the Annual Report which summarises the activities of the Trust relating to Infection Prevention and Control for the year April 2018 to March 2019. Members welcomed the detailed report which illustrated very effectively an extremely complex area. In terms of performance against Departmental Priorities for Action (PfA) targets the Chief Executive advised the Trust had performed well in 2018/19 and met the targets against both MRSA and C.difficile infections.

Mrs Rooney referred to page 12 of the report and asked if the Trust was allocating IPC resources into the community. In responding, Dr O'Kane referred to the ongoing challenges in this area and stated that effective IPC in community healthcare is becoming increasingly important and therefore for the future it is important that IPC aims to allocate resources into the community. The Trust continues to interface with nursing homes on areas including safe practices and patient safety. Mr Beattie advised regarding the need for some education on infection control within nursing homes and stated the PHA is providing support on this.

#### The Board approved the IPC Annual Report 2018/19 (ST971/19)

### iv) Emergency Planning/Business Continuity Annual Report 2018/19 (ST971/19)

Dr O'Kane presented the Emergency Planning & Business Continuity Annual Report for approval. The Chair welcomed the detail and said she was assured the report demonstrated the Organisation's preparedness in the event of a major incident. In response to a question on Business Continuity testing, Dr O'Kane advised a number of testing exercises will take place in January/February 2020. At this point, Dr O'Kane noted concern at the gap in regard to Ebola planning and advised the Trust is working towards finalising a Trust policy. The Chief Executive alluded to the challenges around Ebola planning in the absence of regional support.

Discussion continued and the Chair asked where Emergency preparedness is discussed at Senior Management level. The Chief Executive assured members the Trust SMT are regularly updated on and discuss the matter. Mr Morgan advised that at Directorate level CYP discussion takes place through their SMT Governance meeting and his Directorate undertake test exercises periodically. Mr McNeany and Mr Beattie also responded from their respective Directorates.

Mrs Rooney asked what learning had been identified following the EU Exit planning exercises. The Chief Executive acknowledged the exercises to have been helpful and stated the Trust will reflect on any learning post Brexit. Mrs McClements assured members the Director of Pharmacy is very actively involved with the associated preparations and the Trust has a robust system in place to respond to the impact of Brexit.

### The Board approved the Emergency Planning/Business Continuity Annual Report 2018/19 (ST971/19)

#### 14. BOARD COMMITTEES

By way of introduction, the Chair advised of the implementation of a new standardised format for how each sub-committee Chair communicates the work of their Committee to Trust Board. She stated each report will be taken as read, unless there is an urgent issue the Committee considers the Board should be taking action on.

#### i) Patient & Client Experience Committee

Committee Chair Report from meeting held on 19<sup>th</sup> September 2019

Mr Wilkinson presented the Committee Chair Report which demonstrated the key issues raised at the meeting held on 19<sup>th</sup> September 2019.

Annual Report 2018/19 (ST973/19)

Mr Wilkinson presented the Annual Report 2018/19 for approval.

The Board approved the Annual Report 2018/19 (ST973/19)

Minutes of meeting held on 13<sup>th</sup> June 2019 (ST974/19)
Mr Wilkinson presented the minutes for approval and highlighted the key discussion points.

The Board approved the minutes of the meeting held on 13<sup>th</sup> June 2019 (ST974/19)

#### ii) Endowments & Gifts Committee

Committee Chair Report from meeting held on 7<sup>th</sup> October 2019 Mrs Rooney presented the Committee Chair Report which demonstrated the key issues raised at the meeting held on 7<sup>th</sup> October 2019. She emphasized the importance of the four Directorate wide fund managers aggressively depleting funds with balances of less than £1,000 or which are aligned to staff benefits/comforts prior to financial year end in order to assist CCNI registration and the associated Cypress scheme. This will ensure the Trust does not incur significant financial penalties.

### Committee Work Programme 2020 (ST975/19) Mrs Rooney presented the Committee Work Programme 2020 for

approval.

The Board approved the Committee Work Programme 2020

Minutes of meeting held on 4<sup>th</sup> June 2019 (ST976/19)
Mrs Rooney presented the minutes for approval and highlighted the key discussion points.

The Board approved the minutes of the meeting held on 4<sup>th</sup> June 2019 (ST976/19)

#### iii) Audit Committee

(ST975/19)

Committee Chair Report from meeting held on 10<sup>th</sup> October 2019 Mrs McCartan presented the Committee Chair Report which demonstrated the key issues raised at the meeting held on 10<sup>th</sup> October 2019. She also advised that she would be attending the DoH Departmental Audit and Risk Assurance Committee (DARAC) meeting on 18<sup>th</sup> December 2019.

# Committee Work Programme 2020 (ST977/19) Mrs McCartan presented the Committee Work Programme 2020 for approval.

The Board approved the Committee Work Programme 2020 (ST977/19)

Minutes of meeting held on 4<sup>th</sup> June 2019 (ST978/19)
Mrs McCartan presented the minutes for approval and highlighted the key discussion points.

The Board approved the minutes of the meeting held on 4<sup>th</sup> June 2019 (ST978/19)

#### 15. APPLICATION OF TRUST SEAL (ST979/19)

Ms O'Neill 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 (ST979/19)

#### 16. ANY OTHER BUSINESS

The Chair asked each of the Professional Lead Directors if they wished to bring any issues to the Board's attention in respect of their roles. There were none noted.

In conclusion, the Chair reminded Trust Board members to remain at the end of the meeting for a time of reflection on the proceedings of the day.

The meeting concluded at 2.55 p.m.