



**MINUTES OF THE PEOPLE, FINANCE AND ORGANISATIONAL  
DEVELOPMENT COMMITTEE HELD AT 9.30AM ON  
THURSDAY 29 FEBRUARY 2024 IN THE BOARDROOM, NIAS HQ**

**PRESENT:** Mr J Dennison Committee Chair  
Mr P Quinn Non-Executive Director  
Mr P Corrigan Non-Executive Director

**IN**

**ATTENDANCE:** Ms R Byrne Director of Operations  
Ms M Lemon Director of Human Resources &  
Organisational Development (HR  
& OD)  
Mr P Nicholson Director of Finance, Procurement,  
Fleet & Estates  
Ms L Gardner Asst Director HR  
Ms V Cochrane Asst Director HR  
Mr A Arandia Asst Director Planning,  
Performance & Corporate  
Services (left the meeting at  
11.30am)  
Mrs C Mooney Board Secretary

**APOLOGIES:** Mr M Bloomfield Chief Executive  
Ms M Paterson Director of Planning,  
Performance & Corporate  
Services

**1 Apologies & Opening Remarks**

The Chair welcomed Mr Quinn and Mr Corrigan to their first meeting of the Committee and said he looked forward to working with them.

## 2 **Procedure**

### 2.1 **Declaration of Potential Conflicts of Interest**

The Chair asked those present to declare any potential conflicts of interest now or as the meeting progressed.

No declarations of conflict of interest were made.

### 2.2 **Quorum**

The Chair confirmed the Committee as quorate.

### 2.3 **Confidentiality of Information**

The Chair emphasised the confidentiality of information.

## 3 **Previous Minutes (PC29/02/24/01)**

Approval of the minutes of the previous meeting held on 6 December 2023 was proposed by the Chair. However, in view of the fact that the Trust Chair had attended Committee in December, it was agreed that Mrs Mooney would seek her agreement to the minutes as seconder.

## 4 **Matters Arising (PC29/02/23/02)**

Ms Lemon explained that, in prioritising items for today's agenda, it had been agreed that the focus would be on absence and culture and advised that the rebaselined HR Plan would be deferred to the April meeting. She noted that it had been previously presented to the Committee and focused on the transformational elements of work. However, Ms Lemon said that this work had been impacted by the context of Action Short of Strike (ASOS) as well as Trade Union (TU) unwillingness to engage with the Trust on employment processes. She said that, despite this, efforts continued, where possible, to progress transformational work and any Internal Audit recommendations.

The Matters Arising were **NOTED** by the Committee.

## 5 **Finance Update (PC29/02/24/03)**

Mr Nicholson said he would be happy to revisit the format of the finance report to the Committee if members would find that helpful. He advised that, in the context of resource optimisation, the Trust had been focusing on variable elements of expenditure, particularly overtime and the use of Independent Ambulance Services (IAS). He referred to the Trust savings plan and said members would be aware of the need to achieve savings of £1.975 million in the 2023-24 year. He pointed out that the same extent of savings would be required in the 2024-25 year. Mr Nicholson reminded the meeting that many of the savings in the current year were of a non-recurrent nature and non-repeatable and said the Trust would have to revisit these in the 2024-25 year.

Mr Nicholson said it was now possible to produce management information in a more timely manner. He explained that the information could be produced in granular detail which would allow managers to drill down into the detail. He added that this was the first time that financial information had been made available outside the normal financial systems. Mr Nicholson acknowledged that this was not without risk and work was ongoing to ensure robust controls were in place.

Mr Nicholson drew the Committee's attention to pages 5-6 of the report which set out the management information provided and said Finance and Informatic colleagues were continually working to refine this to ensure it reconciled with information on the Trust's finance systems.

Alluding to overtime expenditure, Mr Corrigan stressed the importance of comparing like with like and noted that there had been downturn in overtime expenditure. He sought further detail on this.

Mr Nicholson explained that multiple factors were at play. He advised that Operations now targeted overtime much more effectively and staff were informed when overtime was available on particular shifts. He said that the Trust was not seeing the same uptake on overtime towards the end of the year and suggested that Action Short of Strike may also have had an impact in that staff did not wish to work overtime. However, Mr Nicholson said he believed one of the major factors was that operational staff were being

encouraged to take annual leave and when on leave, staff were not permitted to work overtime.

Mr Corrigan asked whether the core staffing complement remained consistent

Mr Nicholson advised that the Trust had filled a large number of vacancies in early 2023 and said that more staff would be recruited this year which should reduce the requirement for overtime if the Trust maintained its planned hours of cover.

Ms Byrne explained that, at the peak of the pandemic and with the uncertainty of available staff, the Trust offered overtime to staff. However, as Mr Nicholson had alluded to earlier, Operations had adopted a much more focused approach and targeted overtime.

Mr Nicholson drew the Committee's attention to page 6 of the report which provided a breakdown between Directorates and cost centres.

Mr Corrigan asked if that detailed breakdown was available to Area Managers and Station officers so they had that level of analysis to hand. He sought clarification on whether individual Divisions would be responsible for managing their respective budgets including overtime and absence management and accountability would lie with Area Managers.

Ms Byrne explained that when Assistant Directors met with the Area Managers on a 1:1 basis this information would be a standing item on their agenda to discuss any anomalies.

Mr Nicholson confirmed that accountability had been delegated to Area Managers.

Continuing his report, Mr Nicholson advised that pages 7-8 of the report provided an analysis of the use of Voluntary and Private Ambulance Services (VAS/PAS), including taxis. He advised that a new Non-Emergency Patient Transport contract had been introduced towards the end of the last calendar year which had increased providers from seven to sixteen. Mr Nicholson said that variation in expenditure between months and providers was particularly marked in the last few months as well as the use of taxis. He noted that there would be a £10 million reliance on these

two services which was only affordable through the additional allocations from the DoH linked to Covid-19. He said there was a need to pivot away from reliance on the private sector to internal service provision. Mr Nicholson noted that with the new contract providers, there was a need to ensure that the Trust received invoices and that these were appropriately validated. He added that it would take some time for the new suppliers to bed in.

Mr Quinn noted that, while there had been an increase in contractors, there had been a reduction in expenditure.

Responding, Mr Nicholson noted that an element of this was thought to be in relation to the new contract but also the fact that the focus of the Trust's financial planning in-year had been to reduce reliance on IAS. He noted the significant expenditure of £10 million.

Mr Corrigan asked whether a holistic overview was being taken of VAS/PAS across the HSC and noted that other Trusts also spent funding on PAS and taxis. He said he would be interested in seeing the trajectory of that and suggested that it would have increased over recent years.

Mr Nicholson acknowledged that this had been a particular issue in the current year and said that the system had been looking at the issue as a whole in terms of total expenditure. He said that the HSC had been engaging with the DoH to look at how transport was commissioned in that area. Mr Nicholson noted that there was often a growth in other Trusts which in turn created a demand for NIAS that was not necessarily commissioned.

Mr Corrigan expressed concern that, because NIAS' focus was on controlling spend and reducing reliance on IAS, there was potential for other Trusts to find themselves reducing services in another area in order to compensate.

Responding, Mr Nicholson acknowledged that there was potential to increase demand between Trusts if the position was not managed effectively. However, he pointed out that there were opportunities wider than the HSC to look at how transport operated across NI.

Ms Lemon alluded to the equality and human rights perspective in terms of patients' access to services across the HSC and clarified that the strategy and policy for transport was governed regionally by

the DoH's Transport Strategy. She pointed out that access to ambulance transport had to be determined by a clinician and acknowledged that this was not always necessarily the case. Ms Lemon believed there was a need for clarity at a wider level and a need for a clear strategy. She suggested that this could potentially involve public consultation as there were significant equality and human rights implications.

Mr Nicholson referred to the use of staff substitution which was covered on page 9 of the report and advised that this had markedly reduced from 2019-20 in respect of Trust expenditure on support from the Association of Ambulance Chief Executives (AAACE). He pointed out that an Internal Audit recommendation had been to provide this granular level of detail to the Committee due to the levels of expenditure.

Mr Nicholson highlighted the expenditure in relation to the Regional Co-ordination Centre and reminded members that the costs associated with the staffing of the Centre from the HSC Leadership Centre would be matched by other Trusts. He said that the estimate would be in the region of £1.3 million full-year effect (FYE) with costs in the current year estimated to be in the order of £0.3 million.

Mr Nicholson noted that the Trust's Capital Resource Limit (CRL) remained largely unchanged with the vast majority of funding within Fleet & Estate. He said the report also provided some detail on the schemes currently being delivered within the Trust. He pointed out that traditionally expenditure was profiled towards the end of the year and said this was particularly challenging.

Mr Quinn acknowledged the profiling of expenditure towards the end of the year and asked whether consideration had been given to incrementally profiling the budget earlier in the year.

Responding, Mr Nicholson explained that the Trust replaced its fleet every five years. He acknowledged that the Trust was placing orders with suppliers much earlier to be assured around slots in production. He alluded to the global supply issues and said that these were impacting on the Trust with delivery times and costs being extended on several occasions. Mr Nicholson referred to the significant amount of work involved in the fleet replacement programme.

Mr Nicholson alluded to the increased requirements for business cases and said that this had had an impact. He referred to the complexity of business cases, noting that they could have both capital and revenue elements, and acknowledged the work involved in producing a summary capital plan. Mr Nicholson said the Trust's capital plan reflected the Trust's strategic direction. He reminded the meeting that the DoH would periodically request business cases as part of their annual test drilling programme.

Mr Corrigan acknowledged the time and energy invested in writing business cases and highlighted the importance of ensuring post-project evaluations (PPE) were carried out in a timely manner. He sought clarification around the assurance framework for PPE monitoring arrangements within the Trust. He asked whether the Committee received a PPE report.

Mr Nicholson acknowledged that the focus was not always on ensuring PPEs were carried out and said, while some progress had been made, it was clear that further improvement was needed. He explained that, within the Trust's Standing Orders, the Trust Board would approve capital business cases and said assurance needed to be provided to the Committee that business cases had been completed.

Mr Quinn suggested the inclusion of additional data fields to include an indication of whether a PPE had been carried out.

Mr Corrigan said that, in his previous position, the relevant Committee would have received a PPE report to provide the required level of assurance.

Mr Nicholson said that the Trust would be working towards this over the next year.

Responding to a question from the Chair as to whether such a report would be considered by the Trust's ARAC or the PFOD Committee, Mr Nicholson was of the view that the level of detail should be reported to the PFOD Committee. He reminded the meeting of the assurances provided by the test-drilling of business cases undertaken by the DoH.

Mr Corrigan suggested that Internal Audit could potentially look for evidence of PPEs having been undertaken.

Mr Nicholson agreed and noted that several Internal Audit recommendations related to the need for business cases to be developed and therefore the associated PPEs.

Concluding his report, Mr Nicholson reported that the Trust was forecasting a breakeven position within its CRL and he acknowledged the significant level of work to be taken forward between now and the end of the financial year.

Mr Corrigan welcomed the level of detail within the Finance Report presented to the Committee. He noted that the Trust was now a few weeks away from the start of a new financial year and said he expected to have had some indication of how the 2024-25 year might look.

Mr Nicholson said he intended to cover this at the March Trust Board meeting.

The Committee **NOTED** the Financial Report as presented by Mr Nicholson.

## 6 **HR & OD Balance Scorecard (PC29/02/24/04)**

Ms Lemon suggested there was an opportunity with new Committee members to revisit what should be included in the Scorecard. She noted that this was a work in progress and some of the reporting indicators were aspirational in nature. She thanked Mr Arandia and his team for their support in the development of the Scorecard to date.

Ms Lemon clarified that the information within the Scorecard was in-month and she acknowledged there was a slight duplication of overtime information in the context of the earlier report given by Mr Nicholson. She suggested that members may wish to consider this information remaining within the Finance report and being removed from the Scorecard.

Referring to the agency costs, Ms Lemon explained that there was an improvement trajectory in term of the use of agency staff and work was being progressed on a regional basis to reduce the overall use of agency staff. She added that this work focused largely on



reducing the use of agency nursing and said that agency usage within NIAS tended to be within A&C roles.

Ms Cochrane advised that regular meetings were held with budget holders to discuss their respective staffing positions and review any agency, acting, seconded posts with a view to reducing any reliance on this element of the workforce in the longer-term.

Ms Cochrane alluded to Key Performance Indicator (KPI) 6 'Staff Count' and explained that a significant proportion of these posts were temporary pending the outcome of restructuring, for example the Operations management structure review. She added that the Committee would not see substantive changes on a month to month basis.

Ms Lemon welcomed suggestions from members as to any narrative they would wish to see included by way of explanation around the KPIs.

Mr Corrigan asked if there were systems in place to use bank staff before overtime would be offered to staff.

Responding, Ms Byrne confirmed that bank staff would be paid at single rate and explained that the Trust's Resource Management Centre (RMC) would oversee the allocation of shifts to bank staff.

Ms Cochrane said the Trust was looking to cleanse its bank staff pool and was in the process of reviewing policies and procedures around the use of bank staff to improve governance and assurance in terms of ensuring bank staff are safe to work and maintained their clinical practice as appropriate. She added that the Committee may see a reduction in bank numbers over the coming months.

Ms Lemon alluded to the use of the term 'Whistleblowing' and said terminology such as 'Freedom to Speak Up' and 'Raising Concerns' was being used increasingly. She acknowledged that it was not necessarily a good indicator to have zero cases. Ms Lemon stressed the importance of creating a culture whereby staff felt comfortable to speak up and raise concerns. She advised that work was taking place regionally around the introduction of new policies and procedures in relation to 'Freedom to Speak Up' and 'Raising Concerns'.

Ms Gardner explained that the fact no ER cases had been closed was not an indicator that issues were not being moved forward and she confirmed that cases were being progressed as much as possible in the context of ASOS which was impacting significantly on the Trust's ability to conclude cases. She advised that she was currently reviewing the strategy to close several disciplinary cases using a more pragmatic approach. Ms Gardner said that, with the Committee's agreement, she would bring an update on ER cases to the April meeting.

Ms Lemon agreed and suggested the Committee would find it helpful to have further detail on any emerging themes and issues within the organisation.

Mr Quinn said he would find such a report helpful as the KPI did not reflect a positive position when reading the papers.

Ms Lemon said that members should not underestimate the impact ASOS had had on the Trust's ability to progress various pieces of work, internal to NIAS and also some regional work. She explained that TU representatives would only engage on those aspects of work which they considered to be concerned with the health and wellbeing of their members and said it had proved difficult on occasions to strike a balance and manage industrial relations.

Ms Lemon alluded to the regional context and pointed out that, in normal circumstances, the Trust and TU representatives would attend Joint Consultative meetings and meetings around terms and conditions. However, these had been stood down due to ASOS as TU representatives would not attend other than on issues related to pay or workforce wellbeing by exception. She said the Trust was very much committed to working in partnership with TUs and suggested it might be helpful for the Committee to receive a briefing paper around partnership working in a TU context.

Mr Corrigan said he too would welcome a more detailed position report in relation to ER cases and said he was unsure whether the numbers quoted within the Scorecard represented a positive reflection of the current position.

Ms Gardner explained that a number of the ER cases had been linked to holiday pay and pension. She advised that a further three cases had been received over the last several months and

suggested that, as the Trust was now making more difficult decisions around absence management, it was likely that there would be an increase in cases received.

Mr Corrigan acknowledged that that was an acceptable consequence of the actions required.

Ms Lemon reported that staff turnover remained static with very little change in terms of frontline staffing. She referred to the lean infrastructure with regard to support functions and said the Trust had significant reliance on several individual postholders. Ms Lemon said that, as already mentioned, a few KPIs were aspirational in nature. She said that work continued to transition the Directorate from 'process heavy' to a more customer focused function and ultimately adopt a business-partner approach in terms of working with managers and providing a service to them.

Mr Quinn queried whether staff vaccination should become a KPI and hopefully help in having an impact on short-term absence. He queried whether exit interviews would provide helpful narrative in the context of emerging themes.

Ms Lemon welcomed any suggestions and sought members' views on whether they would find it helpful to have a brief narrative included.

The Chair suggested that the narrative should be included in the cover paper by way of an executive summary which would highlight, for example, the key risks, key challenges, emerging issues and potential impact.

Responding to a question from the Chair, Ms Cochrane confirmed that the in-month absence was currently 13.60% and noted that there had been a 2% reduction in-month from December to January. She added that the cumulative figure was now 14.76% down from 14.90%.

Ms Lemon commended the huge amount of work which had been carried out across Directorates to achieve this. She said that central to this work was the recognition of the role of the manager and the fact that attendance management was an important element of that role.

Mr Quinn asked whether this information was made widely available.

Responding, Ms Lemon acknowledged that the Trust had not been proactive in terms of sharing information and said that further work was needed in this regard. She advised that she had written to every member of staff sharing the process for reporting absence due to sickness.

Mr Arandia believed that it was a journey of changing perception. He alluded to the Delivering Value programme which had been in place within the Trust over the last 8-9 months. He said that previously absence and attendance management would have been perceived as an Operations and HR issue. However, he said that staff had come together as a group of Assistant Directors, meeting on a weekly basis, and worked to develop a solution.

Ms Lemon reminded the meeting that the Chair and Chief Executive had met with her and Ms Byrne to discuss the Board's concerns around attendance management. She said that, following that meeting, enhanced accountability arrangements had been put in place and the Trust Chief Executive held each Director accountable for absence within their respective Directorates. Ms Lemon added that she and Ms Byrne met on a weekly basis while the Chief Executive met with her and Ms Byrne on a monthly basis and said that Ms Charlton now attended these meetings in the context of Patient Care Services.

The Committee **NOTED** the HR&OD Balance Scorecard as had been presented by Ms Lemon and colleagues.

7 **Maximising Attendance:**  
**- Progress Report**  
**- Delivery Plan Update (PC29/02/24/05)**

Ms Lemon and Ms Byrne described the nature of their weekly meetings and said these focused on identifying particular outliers with a view to determining the most appropriate performance management approach.

Ms Byrne said that the level of granular detail and identifying hotspots had been key to making progress.

Ms Lemon commented that the culture which the Trust aspired to was to have managers engaging with individuals on a regional basis. She acknowledged the importance of assurance but was of the view that further work required to ensure robust arrangements were in place.

Ms Byrne noted that the highest priority for her was the Operations restructure and the need for a 24/7 robust operational management cover. She explained that, having this in place, would support the attendance management process.

Ms Lemon acknowledged that, while the initial priority had been a focus on long-term absence, the importance of the management of short-term absence remained critical, in particular where a pattern might exist.

Referring to the medical redeployment process, Ms Cochrane said that previously the Trust had approximately ten redeployments each year. However, in 2023, the Trust had between 30-40 members of staff to be redeployed. She said there was an expectation amongst staff that it would be possible to redeploy to another role as they have seen roles being created across Directorates. Ms Cochrane pointed out that the majority of staff awaiting redeployment were Emergency Medical Technicians (EMTs) and paramedics and she acknowledged the challenges in identifying suitable redeployment opportunities for staff within the Trust.

Ms Gardner pointed out that the Trust had engaged with Trade Unions around applying a more timebound process for the management of employees who had been determined to be suitable for medical redeployment. This would include application of communication of an 8-week window for consideration of potential redeployment options.

Mr Quinn queried whether there had been an increase in Industrial Tribunal cases as a result of redeployment decisions.

Ms Lemon explained that there were a number of grievance cases around disability discrimination and some of these were translating into Labour Relations Agency/Tribunal processes.

Ms Byrne referred to the impact on service delivery. She explained that, historically, EMTs and paramedics would have been

redeployed to the Clinical Support Desk but on some occasions, individuals were unable to work nights.

Ms Lemon acknowledged the challenging circumstances in which staff worked and highlighted the Trust's duty of care to them. She suggested it might be helpful to bring to a future meeting of the Committee an update in relation to the provision of peer support services. She said it would be important when discussing redeployment to be mindful that, in many cases, these staff had had exposure to extreme trauma.

Mr Corrigan said that his overall observation around attendance management was that positive steps were being taken and he hoped the Trust was now starting to see the benefits of that work. He said he remained to be convinced that the Trust had seen the start of a cultural shift and believed that further work was needed to ensure absence was 'front and central' throughout the Trust. Mr Corrigan stressed the importance of ensuring a shift in culture at every level to the point that managing absence became everyone's responsibility.

Mr Quinn believed it was important to bear in mind that there were other cultural issues to be addressed. He alluded in particular to the fact that there was no specific reference within the HR Delivery Plan to the vaccination programme and queried whether it should be included as the paper focused on a health and wellbeing approach. Mr Quinn also asked if the Trust had evaluated the mental health services it commissioned.

Ms Lemon agreed that it would be provide an update to a future meeting addressing these points.

The Chair welcomed the RAG rating of the Delivery Plan, in particular the number of amber ratings and noted that the due dates against many objectives were imminent. He sought clarification on whether those objectives which had been RAG rated as red would impact more significantly on the Trust's managing attendance plans.

In response, Ms Lemon said that the intention was for the Committee to see more green RAG ratings and she cited the example of an analysis of mental-health related absence. She said she hoped that the work being undertaken around redeployments would result in an improved position. Ms Lemon explained that

some of the work required was similar to that of Internal Audit in that evidence was required to support the work. She added that this would be key in achieving the objectives by the end of March.

The Chair thanked Ms Lemon for the update which was **NOTED** by the Committee.

## 8 **HR Assurance Framework – working draft (PC29/02/24/06)**

Ms Lemon drew the Committee's attention to the working draft of the HR Assurance Framework which aimed to provide members with a sense of the direction of travel. She explained that this had been very much based on the Board Assurance Framework and said the intention was for each Directorate to have an Assurance Framework.

Ms Cochrane advised that the document focused on the Directorate's core business as usual objectives across key functions which were key to the delivery of HR&OD but also setting out how these would be proactively evidenced and assurance provided. She explained that further development of the Framework would inform a refresh of the Directorate's Risk Register to ensure a comprehensive overview of risks throughout the Directorate.

The Chair welcomed the linkages to the Corporate Risk Register and said he was aware of the intention to undertake a review of the Corporate Risk Register. He acknowledged the working draft nature of the document and asked how the Committee could assist in progressing this work.

Ms Lemon said she would welcome a steer from the Committee as to whether the document reflected an appropriate direction of travel, approach and methodology. She said that she was seeking to be transparent and recognised that some of the work would need to be progressed within an improvement space.

Mr Quinn commended how the Assurance Framework had been set out and said he would be minded not to include culture on the Framework. He suggested that there could also be 'softer' elements which should be included.

Ms Cochrane, agreeing, said that there would also be elements which were more strategic in nature, for example, culture, OD and health and wellbeing.

Mr Corrigan believed that the document was a helpful starting point and would assist the Committee in identifying those issues which required closer attention.

Ms Lemon said the document would also help in identifying those issues to be presented to the Committee to provide assurance.

The Chair acknowledged that the document was work in progress and highlighted the need for high level points, identifying the risks and challenges to delivery and ensuring its purpose was not lost in the detail.

The Committee **NOTED** the HR Assurance Framework (working draft).

## 9 **Organisational Culture**

Ms Lemon undertook to share with members the 'Culture Review of Ambulance Trusts'.

Mr Corrigan asked whether a Personal Development Review (PDR) process was in place for clinical staff.

Responding, Ms Lemon explained that this had been within a project space and related initial testing of a new model had been undertaken within a small staff group.

Ms Byrne advised that the development of clinical staff was supported by the Clinical Training Team and staff were required to develop portfolios as part of their ongoing clinical supervision.

Ms Lemon was of the view that the work being taken forward in relation to culture provided an opportunity to redesign roles and expectations of managers and ensure value-based recruitment.

Mr Corrigan acknowledged that the Trust was on a journey and said that the Committee would be keen to support this work. He sought an update in relation to the Operations restructure.



Ms Byrne said it would be helpful to provide an update to the Committee on this work and undertook to confirm arrangements for doing so.

Mr Quinn suggested that Non-Executive Directors had a key role to play in the delivery of an improved culture within the organisation. He acknowledged the work which had been done to date and highlighted the need to take account of external stakeholders as well as internal stakeholders. Mr Quinn said that, since his appointment as a Non-Executive Director, he had been aware of the central role NIAS played in the HSC system. He alluded to NIAS culture in terms of the wider HSC but also how the Trust was perceived and how culture inevitably impacted that particular narrative. Mr Quinn suggested that the Trust was at risk of losing how service users perceived the organisation as a result of the delayed handovers. He added that the other stakeholders were Trade Unions. He referred to the results of the wider HSC staff survey but suggested that a more bespoke survey should be undertaken with NIAS staff, looking at NIAS values and how aligned they were.

Mr Quinn alluded to FREDA – freedom, respect, equality, dignity and autonomy – and said that, while the Trust worked to treat patients like this, it would also be important to treat staff similarly. He commended the QI approach within the Trust and the approach to just culture, encouraging staff to speak up.

Mr Quinn believed that the Review of Clinical Education had the potential to act as a capacity framework as well as overseeing the development of an appraisal process.

In terms of leadership visibility, Mr Quinn suggested that there needed to be a clear internal communications strategy around this and acknowledged the benefits of technology to assist with this.

Ms Lemon said she was hoping to establish a cross-Directorate group to consider matters of culture and invited Mr Quinn to be involved in this work.

Mr Quinn confirmed that he would be happy to participate.

The Chair thanked members for the comments and the update on culture was **NOTED** by the Committee.

10 **Reflection on away day – OD aspects**

It was noted that this item had been covered in earlier discussion.

Ms Lemon noted that the report from the Strategic Planning away day would be shared with members in due course.

11 **Date of next meeting**

The next meeting of the Committee is scheduled to take place on Thursday 18 April 2024 at 9.30am in the Boardroom, NIAS HQ.

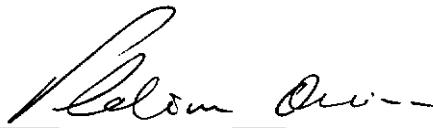
12 **Any Other Business**

(i) **HR&OD Structure**

Ms Lemon provided an update in relation to the HR&OD structure.

**THIS BEING ALL THE BUSINESS, THE CHAIR DECLARED THE MEETING CLOSED AT 12.30PM.**

SIGNED:



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DATE: 18 April 2024