



**MINUTES OF THE PEOPLE, CULTURE AND ORGANISATIONAL
DEVELOPMENT COMMITTEE HELD AT 9.30AM ON
THURSDAY 12 JUNE 2025 IN THE BOARDROOM, NIAS HQ**

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

IN

ATTENDANCE: Ms M Lemon Director of HROD
Ms S Beggs Manager of Chair and Chief
Executive Office
Mr N Sinclair Director of Operations (Interim)
Mr M Riddell Deputy Director of HROD
Mr N Henry Assistant Director of Governance,
Risk and Assurance
M J McPoland Comms and Media Manager
Mr S Mullen Director of Planning,
Performance and Corporate
Services
Mr R Sowney Senior Clinical Advisor
APOLOGIES: Ms L Turley Deputy Director HROD

1 Apologies & Opening Remarks

The Chair welcomed members to the meeting.

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 – 03/04/2025 (PC12/06/25/01)

The minutes of the previous meeting held on 3 April 2025 were **APPROVED** on a proposal from Mr Corrigan and seconded by Mr Quinn

4 Matters arising (PC12/06/25/02)

The Committee **NOTED** the update to the matters arising from the last meeting.

Updated Organisational Chart

There is still some fluidity in the structure including recent changes in Fleet and Estates, Clinical and Ops and the team will provide an update at the next meeting.

ACTION: Ms Lemon/Ms Turley

HROD Balance Scorecard

Suggested revisions to this report were discussed at the last meeting and Ms Lemon advised the new report is included at today's meeting. Mr Michael Riddell commences in July and she has discussed with him regarding a benchmarking and evolutionary update and is mindful of ongoing work and therefore a further updated reporting structure will be provided at the September meeting.

ACTION: Ms Lemon/Ms Turley

Comms Activities – HROD Balance Scorecard

The Committee asked to be sighted on the communication activities in the Trust and relevant strategies and proactive engagement with the public and independent sector and various issues i.e. clinician practicing despite their registration being lapsed. Ms Lemon advised that this is in progress with an update on today's agenda which includes an initial outline of the comms function and priorities with a more detailed plan at the next meeting.

ACTION: Ms Lemon/Ms Turley

At the last meeting, the Committee suggested that NIAS periodically liaise with other Organisations not affiliated with NIAS, to learn different things. Mr Sinclair said that engagement and benchmarking is ongoing and Ms Lemon advised in respect of the HROD Scorecard, this is under review, pending the new Deputy Director appointment.

Absence Management

The Committee requested that the Occupational Health Review should remain on the Strategic highlight review report and Ms Lemon advised that KPI's are in place for occupational health but are still a work in progress. They have been given an average performance across the HSC but not actual performance which is therefore not helpful, however, they are hoping to get better information in time for the next Committee.

At the meeting on 3 April, Ms Byrne agreed to seek clarity on whether resilience is captured/assessed as part of clinical supervision. Ms Lemon said she will continue to pick this up with Mr Sinclair and ensure it is built into mental health work but needs to be ongoing. Mr Quinn said it would be useful to understand what resilience looks like in terms of recruitment and ongoing progression as the roles within NIAS are particularly difficult and it is important to build this into the competency profile for people and queried if NIAS should be doing something more proactively to ensure staff are more resilient.

Ms Lemon advised that they inform staff and candidates about the reality of the job including occupational health work and they are trying to improve on this. She said the pre-employment assessment is a significant piece of work and agreed that she and Mr Sinclair would liaise with Ms Annmarie McStocker and report back to the Committee. Mr Sinclair added that NIAS need to ensure staff have a clear expectation of the role and said that he saw a presentation regarding psychometric training which could be considered.

HR were asked to consider how Committee members can get the level of information they need from graphs on the report which has been considered in the new reporting structure and Mr Michael Riddell has shared useful information and systems with Ms Lemon to facilitate this.

Staff Assaults

At the last Committee it was requested that staff assaults should be captured and reported to this Committee. Ms Lemon updated that these are on the agenda and that they are also reported to the Safety Committee and therefore they need to ensure this information is not being duplicated at different Committees.

Employee Relations

The Committee asked for further information regarding the total number and longest duration of cases reported. Ms Lemon confirmed this is referenced in the Scorecard Report.

5 **Management of Violence and Aggression Update**

PCOD requested a briefing on NIAS's activities to help manage the risks associated with violence and aggression and Mr Henry provided the report on today's agenda to advise the background to the level of threat faced by staff, the themes/contributory factors to incidents, NIAS's key control measures and gaps and priority areas for action.

Mr Mullen made the Committee aware that in terms of content, this subject is also reported at the Safety Committee but there have been a number of conversations about how this feeds into the wellbeing of staff. It was suggested that there should be an annual update on this subject at the Committee.

Ms Beggs/Mr Mullen

Violence and aggression have received quite a lot of attention from the health system in the last number of months and the Health Committee has sought data on violence and aggression in terms of the Aggression framework. On 26 June there will be a presentation from AACE on the national work to try and support and reduce the risks associated with violence and aggression. As well as this the Minister is visiting NIAS in July specifically regarding violence and aggression.

The report indicates there is on average 600-700 reports each financial year, however, this doesn't reflect the true total as there are such incidents not reported by staff. Mr Dennison queried why this happens and Mr Mullen said there are a few contributing factors including the consensus that it's part of the job, nothing can be done and there is an element of bureaucracy regarding the process and it

may be perceived that nothing will be done which requires education and encouragement.

It is noted in the report that there are common themes including many incidents involving alcohol or drug use by the perpetrator. There are incidents of damage to vehicles or equipment and there has been an increase in the number of incidents with weapons present, and the potential for them to be used.

The main strategies to address the risks include markers placed on addresses of previous incidents of violence and aggression and depending on the nature of assistance required, NIAS might seek assistance from the PSNI. There is resolution training provided upon induction and body worn cameras for all operational staff.

Mr Frankie Dillon, Violence and Reduction Officer has advised that they sign post staff to psychological support if required following incidents. Mr Dillon said that NIAS prosecute individuals via operational procedures along with the PSNI to ensure the appropriate action is taken.

There have been a few challenges with controls identified including Information Markers not being updated sufficiently and they are currently carrying out a data cleanse but will need to consider a recurrent process to review these routinely. There needs to be refresher training for staff as NIAS is the only service that hasn't supplied this. While NIAS have BWV cameras, some staff are more keen to use than others and this can be quite variable.

There are two immediate priorities which include doing a staff survey along with AACE, the Welsh Ambulance Service and Scottish Ambulance Service which should be rolled out in July. The other priority is to consider the resource implications if refresher training is carried out.

Mr Corrigan referred to the low uptake of staff using BWV despite the significant investment and programme of education and awareness. It is reported around 30% of staff are using it, which is higher in Belfast and Derry, and he queried how NIAS plan to improve this. Mr Henry advised there are quarterly meetings and they are improving the reporting and education in terms of why it's important for staff to use. Mr Mullen added that last year they put an action plan in place and the Violence and Aggression Group was

set up via AACE. He said that operational crews perceived that the cameras may be used to observe clinical practice and they have worked with Comms for targeted communication to address this. Mr Dillon engages with stations and staff to advise and get the message across that BWV are not used for clinical use, and since this there has been an increase in usage.

Altanagelivin currently has the highest sign out rates of any station and this has been assisted by the station officer encouraging their staff. Mr Sinclair added that each station may have their own culture and they intend to improve this alongside the ongoing culture and leadership work to set standards and expectations.

Mr Quinn enquired about collaboration with the PSNI and feedback regarding conviction rates of violence and aggression across the health and social care and asked if NIAS have any sense of conviction rates to act as a deterrent to ensure staff understand by the collection of evidence it is a deterrent and how is this is communicated with the public to act as a deterrent. Mr Henry advised that NIAS have a good relationship with stakeholders when it happens and as prosecutions are carried out by the PPS NIAS only receive the information via victims. When NIAS receive feedback the Comms Team have used that and advise the public of the prosecution. There is an aspiration to have a formal arrangement with PSNI and stakeholders to share this data.

The Committee suggested engagement with the Minister of health so there is political engagement not just for NIAS, as this is intolerable circumstances.

Mr John McPoland and his team have made a video that Mark Cochrane was involved in and there is a strategic plan to get more comms out to the external environment. Mr Henry and the team work closely with Comms in terms of social media but acknowledge it is critical to have a formalised plan for external/internal comms.

Mr Sowney welcomes the focus on information markers and enquired if these are still put on by control room staff as there are different ways this can be done and asked if there is a process of reviewing these within 24 hours.

Mr Henry said that these incidents are typically out of hours and if control staff can't place an immediate marker on an address, it will

be reviewed by a Senior Manager within 48 hours, which is being reviewed.

6 Sexual Safety Workstream

Ms Lemon welcomed Ms Bron Biddle, National Ambulance Sexual Safety Lead, to provide a high-level overview of the work she is undertaking within NIAS. This will be followed by a further update at a future meeting to outline the key recommendations to move the work forward. She said Ms Biddle's expertise is of huge value and beyond that review it is giving some steer on key cases. In the past, cases were looked at in a certain way and not from a sexual safety lense and Ms Biddle will be providing mentorship and coaching within the Organisation.

Ms Biddle introduced herself and said that she is working with AACE to represent the entire ambulance sector with the aim of improving misogyny and reducing sexual safety. There has been a focus for the last couple of years led by the Association to provide peer support, policy development and ongoing development for key activities in the workspace across the ambulance services, and both forums report to Chief executives and Chairs and remains a strategic priority for all ambulance services.

Ms Biddle has worked two days per week for NIAS, 14 days in total and will be back in July. She has spoken to nearly 100 colleagues on an individual basis, some of which have reached out and got in touch with her. She has taken an open approach to listening to understand staff experiences of working in the Organisation and produced a short report of findings and insight contextualised and unique for NI. She has considered the findings as a systemic risk and identified risk factors to offer solutions. There are 20 structured recommendations fitted into domains aligned in the national programme and are grounded in evidence, rationale, prioritised and are pragmatic to offer a way forward to draw on everything that hasn't gone well for the sector. The national programme offers learning of what has and hasn't worked, and should be supportive to NIAS moving forward.

Mr Mullen and Mr Henry have supported Ms Biddle and they need to spend time with Ms Lemon to go through the recommendations to furnish the Board with the answers as to how this can practically work for NIAS. Some additional resource has been identified which

overlaps with the wider culture piece and is explained that this isn't just an issue by itself but influenced by wider initiatives.

Ms Biddle referred to an Employee Voice Network, which is a model used by the Wales Ambulance Service connecting and amplifying voices about inclusiveness, not just sexual safety. Colleagues from AACE will be visiting NIAS in July and will share the work undertaken for oversight and understanding before their visit.

Ms Biddle is visiting NIAS in July and aims to table a recommendation paper at SMT in July to see what the implementation of recommendations will look like to bring an update to the Committee.

Mr Quinn sought clarity on the significance of the findings to understand if the Trust have the capacity, competencies and capability to deal with the outworkings of them.

Ms Biddle reassured the Committee that within each recommendation identified, based on learning from all of the sector, if additional resource or subject matter is needed, she has assigned herself to recommendations like building a trauma informed investigation service within the Organisation. NIAS will work with South West who are leading the way with trauma investigations and Ms Biddle will make sure the foundational staff is dealt with appropriately.

One of the key recommendations is to have a new role within the Organisation referred to as 'a speaking up safely lead', that currently isn't in place but has been in place in other parts of the UK. Ms Biddle will have oversight of the network building to identify who and how this is brought in practically.

Ms Lemon said they have had ongoing discussions whilst doing work in terms of key themes, for example, investigations take too long and NIAS don't have the skill set to deal with investigations and staff do not have faith or confidence that it will be dealt with. Therefore, some of the recommendations are to try and address that, in terms of what does leadership look like and how NIAS will equip and develop staff to deal with investigations.

Mr Corrigan appreciates the Committee doesn't have the experience or insight that Ms Biddle has from across the UK and

sought clarity on where NIAS sits within the spectrum of all ambulance services. Ms Biddle advised that there hasn't been a formal sector wide benchmarking exercise for sexual safety and there is limited sexual safety data within the organisation. There is violence and aggression data but not specific experience, unless that has gone through a formal process so it's difficult to answer.

Climate surveys have taken place in other organisations and if NIAS were to do one, it is expected to see a similar pattern emerge. About a quarter of the workforce have experienced or witnessed sexual matters in the workplace.

Loyalty is a theme within the Organisation and it has been observed that at times concerns are addressed more like a family rather than via a rigorous process. It is important that this will surface and the identified risk factors are prevalent and observed in NIAS as well.

The role of status is unexplored across uniformed services in terms of cultural challenges, examples are traits like traditions, ranks from hierarchy, military traditions and more traditional leadership styles. There are unhealthy coping strategies in teams described as banter and high exposure to trauma in roles likely to see normalisation to incidents and there is an education piece required across the sector for middle management.

Mr Quinn pointed out that when an initiative is opened like this the intended objective is looking at sexual safety but wondered if it has raised other issues i.e. racism or sectarianism. Ms Biddle agreed it provides a platform of disclosure and has opened up other incidents for the Organisation to deal with. Staff have been signposted for dedicated sexual safety if sensitive information has been divulged, however, it has been recognised that if there is no trust for staff it can compound harm for people to speak up and a trauma formed approach is a big priority.

7 Organisational Culture Update

The Organisational Culture Board will be chaired by Ms Paterson and are due to meet on 16 June. The intention of the first meeting is to discuss what NIAS intend to achieve, strategy mapping and the key priorities in the first year. Ms Lemon said the Organisation need to be real about what can be achieved and emphasised that it is a

cross-directorate responsibility with shared ownership. Ms Lemon has discussed with Directors to assist in building this into the delivery plan so staff know there is a vision for culture and what it will look like and mean for them. It will be based on an equality, diversity and rights-based approach, but also about how NIAS provide a good service to patients. On Monday they will agree what the highlight reports will look like to go to PCOD and then on to Trust Board.

There will be potentially 6-week intervals for meetings and Ms Lemon hopes by the next Committee the Culture Board should have had two or three meetings so should have a significant highlight report. Ms Lemon is grateful for Mr Quinn and Mr Sowney's time commitment regarding this.

Mr Quinn has spoken with the Chair and expressed his frustration regarding the momentum behind the work. What happened recently within the BHSCT may be a potential for contagion within the HSC to reach across other Trusts and links to some of the work Ms Biddle is doing, that may start to highlight things and prompt staff to speak out.

Ms Lemon spoke about the outline plan and that the Programme board needs to agree this but it would be good to share the plan with PCOD members when it is complete.

Ms Lemon referred to there being a year one activity as a diagnostic and then potentially conducting a survey. Culture is wider and is also about how NIAS are perceived by stakeholders and partners, which could be combined into strategies if asking stakeholders for opinions.

Ms Lemon referred to the BHSCT incident which has already led to some questions and ministerial questions and there has been reference to some work Peter McBride might do within that space.

Ms Lemon referred to how the Organisation gain the buy in and faith from staff and mainstream and make it real. She continued that it needs to be reflected at every layer of management and it is clear that the middle tier of management is really critical.

Mr Sowney agrees and concurs with Mr Quinns comments and also agreed it is important for this initiative to be cross directorate. It's

about a buy in at all levels particularly at senior level to set that tone and culture. Compassionate leadership is really important to build resilience from dealing with cumulative small incidents, in terms of compassionate leadership. Every Trust are now coming forward with issues, particularly BHSCT. This will be ongoing and NIAS need to make sure the right people and management are engaged and understand what NIAS are trying to do and that is where staff will see the difference.

Ms Lemon added that it is also about how NIAS live the values and what that means, in terms of leaders, which will be touched on in other agenda items such as absence management and the development of formal processes but there isn't always that leadership compassionate conversation to build resilience and support to staff.

Mr Dennison said NIAS need to support and develop managers to do this and ensure the communication is right and two way.

Mr Corrigan referred to reporting and that they need to manage the reporting element as this is quite new within the new Committee structure. This Committee may want to give some direction and input into the highlight report, but it's important that Trust Board will also want to be kept sighted. The Committee don't want replication but at the same time want to give each level their place.

Mr Corrigan referred to his experience within previous Organisations e.g. Royal mail and NHSCT when doing this work and that NIAS doesn't have one culture, HQ will have a culture, Altnagelvin will have a culture, other stations will have a culture and these are called 'micro cultures', which are not represented across every trust. He acknowledged there is an organisational culture but it should be recognised that behaviours and attitude could be different from station to station.

Ms Lemon agreed that this is an important level of diagnostic for NIAS to drill down to the applicable levels. They are looking at dashboards to see what disciplinary, absence etc. looks like in that area which will identify those micro cultures and themes.

Ms Dennison thanked Ms Lemon and the team for the update.

8 Monthly Workforce Information and Strategic HR Report

Ms Lemon referred to the monthly report which outlines the key activity undertaken since the last Committee meeting and highlights areas for focus going forwards including Workforce Information (April 2025 Data), Strategic HR Updates and Additionally Provided PCOD Specific Briefing Papers.

Ms Lemon has discussed Statutory mandatory training this week with SMT to find a way to get dedicated stand down time for staff to do the training. She hopes to provide the Committee with a more detailed report.

Ms Lemon said they hope to provide a more detailed report on employee relations to understand the reasons staff are raising grievances when they are not content with something. They have appointed a new employee relations and absence manager and Ms Turley, the new deputy director is looking at issues regarding complex cases, NIAS resource and suspensions. There have been instances of suspension matters going on for three years which is not acceptable as they should be reviewed on a monthly basis. .

Mr Sowney said that he has had experience of particularly difficult suspensions and investigations and they shouldn't be a long and drawn-out process.

Ms Lemon and Mr Sinclair are starting to meet regularly and address this at their meetings, they also intend to bring in a new team and strategy to approach this.

Grievances is an example of culture within the Organisation as historically, they had managers who didn't manage staff appropriately, if staff had a grievance they were told to submit it as a grievance, as opposed to it being dealt with outside of this procedure.

Ms Lemon said that ASOS still exists and they have asked TUs for further derogations and the Minister has offered to meet them on 23 June along with NIAS.

Ms Lemon referred to the introduction of new HR and finance systems across the HSC and the huge impact this will have on capacity which Mr Riddell will be involved in.

Mr Quinn welcomes the format of the report and thanked the team.

Mr Dennison noted that mandatory training is still not at a good level.

The Committee **NOTED** the Update.

9 Absence Management Update

The Committee **NOTED** the update and that in 2024-25 the Trust final cumulative absence figure at the year-end (following year end rerun) was 10.30%. This was a significant improvement from the 2023-24 year. However, the figure remains high and as such the Trust is continuing to prioritise the management of absence and ensuring the associated performance management and governance arrangements.

The in-month figure for absence in April was 8.53%. Although slightly up from the previous month figure of 8.48%, this represents a marked improvement from the previous year absence was at 10.25 in April and even more significantly from the April 2023 figure of 14.26%.

There is some key learning in terms of organisational culture which requires effort from all Directorates to make it work.

Some of the particular issues and themes are around leadership and middle management re: leadership conversations and the manner in which it is delivered. There has been an increase in disability related discrimination, however there has been good progress in relation to redeployment but the expectation is still high. NIAS have a legal obligation to consider reasonable adjustments but doesn't mean they can always accommodate them and leads to the space of litigation.

An important focus going forward is supporting leadership conversations for management focus and training which is going to be discussed at GARAC in terms of NIAS providing assurance that it is being addressed.

There have been reference previously to hotspots, particularly in the south division within PCS, which has displayed disproportionately high figures and have since closed some which should make a

difference. There are 17 redeployments on the register with some currently being considered, there is an 8-week process time which was previously longer.

Mr Dennison welcomes the improved figures and acknowledged the great work going on.

10 HROD Restructure and 2025-26 Planning

Ms Lemon has referred to HR being in the process of restructuring and reorganising.

The Committee **NOTED** the update and that there have been two new AD roles established and they are considering further capacity regarding Employee relations.

Workforce planning and resourcing hasn't sat within HR in a while, as it previously sat within Mr Mullen's remit but Ms Lemon and Mr Sinclair are working closely to consider this area and recruitment for dedicated support within HR.

The team are considering how to measure the impact and success going forward i.e. if they need to re-band or what the offering of the Organisation looks like. They have had a workshop with the team in the last few weeks about this and suggested potentially establishing a helpdesk to modernise the service and help free up capacity to make it more effective.

Mr Dennison asked to see timelines to see the chronology of this development and Ms Lemon said they are developing a plan to address these and will share with the Committee.

ACTION: Ms Lemon

Ms Lemon confirmed that Industrial relations and relationships with TU's falls under partnership working. Ms Lorraine Gardner has been redeployed to another role to focus on what a partnership framework looks like and the governance about release and management. Mr Riddell previously worked with the Labour Relations Agency and is going to support Ms Gardner within this space.

She continued that NIAS are trying to establish a function that will deliver a service but it requires appropriate functions, systems and processes to collaboratively work with other departments.

Mr Quinn sought clarity on building capacity around recruitment in terms of liaising with BSO and is conscious of the potential recruitment figures in the previous paper. He didn't want to labour the point any further but asked the team to get a sense of the recruitment performance with BSO and the level of satisfaction of that and any potential sticking points, in particular the timeliness regarding job evaluation as it affects planning. Ms Lemon agreed to provide a sense of that for another meeting.

ACTION: Ms Lemon

11 Ops Restructure Update

The Committee **NOTED** the update provided by Mr Sinclair. Mr Sinclair said there are a few areas they want to ensure there is focus and direction on and this is one of the key areas. There is a Gantt chart embedded and Mr Sinclair agreed to circulate it following the meeting.

ACTION: Mr Sinclair

Mr Sinclair is leading the cross-directorate meetings and Mr Mullen's team is supporting in terms of project and governance oversight. In terms of successes the AD scheduled care has been progressed and a Team leader appointed.

The key next steps will be the management of change discussions, which will be addressed in the next few weeks.

Mr Sinclair highlighted that some of the outlined risks are staff capacity as HR has released capacity for two days a week. There will be a Project manager released next week.

Mr Quinn is keen to see the Gantt chart to get a sense of where and how things will happen.

Mr Corrigan highlighted that one of the risks is recurrent funding as there is approval for allocated funding for year one but a question over subsequent funding.

Mr Sinclair elaborated that they have earmarked funds from the £13 million which will pay for some staff and then the balance will be made up by other factors such as managing absence to release funds, as in-month figures for absence in April was 8.53%. Although slightly up from the previous month figure of 8.48%, this represents a marked improvement from the previous year absence which was at 10.25 in April and even more significantly from the April 2023 figure of 14.26%. Mr Corrigan said that there may still not be enough for the entire focus.

Mr Sinclair confirmed they are hoping to have one team leader to 25 staff but intend to change to one to 40 staff.

12 Media and Communications Team Overview

Mr Mullen presented the Committee with an overview of the key activities of the Media and Communications team and the additional priorities to be included in 2025/26.

The Committee **NOTED** the Overview.

Mr McPoland advised the Committee that in recent years there was too much information going out in the daily bulletin and his team have adapted it so staff can easily look at the front page and see what they are interested in reading. The biggest step forward is the WhatsApp group set up for staff to access, which is particularly helpful in sending out urgent messages. NIAS employ around 1500-1600 and there is around 1000 on the WhatsApp group.

Mr McPoland has strong relationships with the external media and understands the importance of managing the reputation of the Trust. There were 400 press releases last year and 14 media broadcast interviews which were mostly about hospital turnaround times. Even though this has been caused by other matters outside of NIAS' control, NIAS put staff up which was received positively.

Mr McPoland elaborated that in terms of media relations they can't plan and the media are not interested in positive stories. However, the team control social media which they rely on teams providing information for. They are educating managers to get the flow of information to comms and Mr McPoland commended the wider team, Caitlyn Robin and Claudia Greene.

Going forward they have developed a six-month plan for social media and want to focus on social media to get the public talking about ambulance services. The team plan to move towards the Instagram platform.

Mr McPoland said they have trained a lot of staff, Directors and AD's on media but is keen to train more front line staff.

Mr Dennison fed back that there is a huge risk in terms of relationship with the media and sought clarity on who retains this if Mr McPoland is absent or leaves the Organisation. Mr Quinn agreed and recognises that this could be a single point of failure due to the knowledge Mr McPoland has and the size of the team, which is why the NEDs have taken a specific interest as well as other reasons.

Mr McPoland agreed and said that he needs to get everything out of his head and on paper but they also need to consider how the team is structured.

Mr Quinn was shocked at the banding for this role and from a succession planning perspective it is incredibly low and the Organisation would struggle to attract someone of that caliber.

Mr Mullen confirmed there has been a submission around this as it is a live risk and they aware it needs to be addressed urgently as it has been ongoing for a while. Mr Mullen is concerned regarding the permanency of that team and commended the team as their quality of work is very good.

Mr Mullen advised the Committee he has had external organisations ask who has been carrying out the Media and Comms work for NIAS as they were impressed, which is a huge acknowledgement to the team. Mr McPoland added that the team are taking on everything leaps and bounds and is pleased that another organisation has recognised that work.

Mr Corrigan referred to the issue of delayed ambulance handover and that it is the single biggest issue as a Trust. It had been referenced a couple of months ago when NIAO issued their report and NIAS put up a spokesperson when other Trusts didn't, and the public still perceive this as a NIAS issue and queried how this can be changed and suggested being more robust and call it out more that the issue of delayed handovers is down to other Trusts.

Mr McPoland said that NIAS do try to speak as one voice across the HSC and NIAS did try to change the terminology to hospital handover times. The proposal of W-45 would reduce this issue and Mr Mullen said that perhaps speaking with one voice may prevent NIAS getting the crucial messages across. Mr McPoland isn't sure that there would be a long-term benefit of doing this.

Mr Quinn has had a conversation with the Chair and Dr Graham and agreed that Dr Graham is the identified lead for Comms and Comms would fall within the remit of the GARAC Committee.

Mr Quinn referred to an earlier discussion about the Minister visiting NIAS and had heard at the last Safety Committee that Mr Philip McGuigan had visited. Mr Quinn queried if it is the Comms team that are responsible for liaising with politicians on matters and political engagement. Mr McPoland said this is an important priority and for many Trusts this is a Comms function and there is perhaps a mis communication within NIAS whether it is a corporate function or comms function.

Mr Dennison said it would be beneficial to have Mr McPoland attend PCOD periodically to get an update.

ACTION: Mr Mullen/Mr McPoland/Ms Beggs

13 PCOD Forward Work Plan

The Committee **NOTED** the items on the forward workplan and acknowledged it is a good start whilst adopting the new Committee structure.

14 AOB

Internal Audit Recommendations / GARAC (Michelle Lemon)

Ms Lemon said there was a discussion at GARAC which raised issues around terms and conditions and legacy arrangements in bargaining going forward including compensatory rest.

There was concern around assurances if someone is on leave or off sick to ensure recommendations are being picked up and being addressed and Mr Henry is reviewing the processes to ensure these assurances are in place.

The Committee discussed late finishes as there appears to be a legacy arrangement in place for many years. The working time directive says there should be 11 hours in between shifts and NIAS are providing 12 however, TUs have raised it as a Health and Safety risk as a breach of H&S Legislation.

Ms Lemon is concerned with the health and safety of the workforce and the impact of staff wellbeing. There has been a new health and safety manager appointed under Mr Henry's remit to help ensure NIAS are in line with terms and conditions, part of the bargaining conversations and context with health and safety.

Mr Corrigan referred to GARAC and that there was a limited finding by internal audit for rota management and resourcing. Clearly there are some issues highlighted and audit are concerned that it wasn't just Ops related and there were a number of HR elements and the GARAC Committee want to ensure HR are working on it.

The Committee discussed the basic processes for the management of bank, it's not a big resource for NIAS but there was a point about the management of that isn't where it should be.

Mr Quinn said it is useful to get an update on how NIAS are taking this forward and have this matter rehearsed at PCOD as well as GARAC.

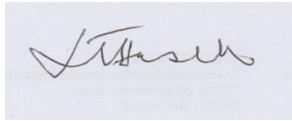
Ms Lemon referred to the current unrest in Ballymena and that this has had a significant impact on staff in many ways. There is a public order response team within HART and staff are being transported in police land rovers to provide support.

Ms Lemon put a staff notice out last night and today about culture alluding to workplace conversations and sensitives which are critical to ensure staff are safe. The notice is multilayered, asking staff to look after themselves, use cameras, report issues, and to remember the values and conduct for NIAS.

Next meeting:

25 September 2025, 9.30am NIAS Headquarters, Boardroom

THIS BEING ALL THE BUSINESS, THE CHAIR DECLARED THE MEETING CLOSED AT 11.45AM

A rectangular box containing a handwritten signature in black ink. The signature is cursive and appears to read "J. H. Smith".

SIGNED:

25/9/25

DATE:

FINAL