



NIAS Trust Board Public Meeting

Date: 19 February 2026
Time: 10.30 am
Location: Board Room, NIAS HQ

Attendance		
Chair:	Dale Ashford	Non-Executive Director
Attendees:	Mr P Corrigan Ms M Paterson Mr N Sinclair Ms L Donnelly Dr N Ruddell Mr J Dennison Mr P Quinn Dr P Graham	Non-Executive Director Chief Executive (Interim) Director of Operations (Interim) Director of Finance (Interim) Medical Director Non-Executive Director Non-Executive Director (left at 12.50) Non-Executive Director (left at 1.00pm)
In Attendance:	Ms L Charlton Mr S Mullen Mr J McPoland Ms S Beggs Ms L Turley Ms R Sutherland Ms A McQueen (Observer)	Director of Quality, Safety QSI Director of PPCS (Interim) Comms Manager Board Secretary (Temporary) Assistant Director of HR & OD PCC Quality and Service Improvement Lead
Apologies:	Ms M Larmour Ms M Lemon	Chair Director of HR & OD

Minutes of Meeting		
Agenda Item	Summary of the discussion	Actions Agreed
1.	<p><u>Welcome, Introduction & Apologies</u></p> <p>Mr Ashford chaired the meeting in the absence of Ms Larmour and welcomed members.</p> <p>Members noted with sadness the recent bereavements of the Chair and Ms Mooney and asked that their condolences be formally recorded.</p>	
2.	<p><u>Previous Notes</u></p>	



	<p>The minutes of the previous Public Trust Board meeting on 11 December 2025 were APPROVED on a proposal from Mr Paterson and seconded by Mr Quinn.</p>	
3.	<p><u>Matters Arising</u></p> <p>The Board NOTED the updates provided in relation to matters arising.</p>	
4.	<p><u>Chairs Update</u></p> <p>In the absence of Ms Larmour, no Chair’s update was provided.</p> <p>Members noted that this was Mr Ashford’s final Trust Board meeting and recorded their appreciation for his contribution, support and leadership.</p>	
5.	<p><u>Chief Executive’s Update</u></p> <p>The Board received an update from the Chief Executive on key developments since the previous meeting. Members noted:</p> <ul style="list-style-type: none"> • sustained system pressure during January, including some of the longest ambulance response times recorded, associated with prolonged hospital handover delays; • progress toward regional implementation of the Ambulance Handover and Withdrawal SOP, with a planned go-live of 27 April 2026 for the two-hour withdrawal protocol; • engagement with the Department of Health and PSNI on the Mental Capacity Act and Right Care Right Person (RCRP) programme, with a phased and collaborative implementation approach now agreed; • early planning for 2026/27, including development of a minimum viable investment breakeven plan, in the context of emerging 6%–12% savings scenarios across the system; • ongoing NIAS engagement across regional and cross-system initiatives, including demand management, neighbourhood reform, RCC governance, all-island collaboration and leadership development. <p>The Board recognised that, while these actions will not deliver immediate recovery in performance, they</p>	



	<p>represent a structured approach to improving patient flow, strengthening system accountability and supporting phased recovery.</p> <p>The Board NOTED the Chief Executive’s update.</p>	
6.	<p><u>People to Partners – Next Steps</u></p> <p>Mr Ashford welcomed Ms Ruth Sutherland, Chair of the Patient and Client Council (PCC), to the meeting and members introduced themselves.</p> <p>The Board NOTED the presentation provided by Ms Sutherland, which had been circulated in advance. Ms Sutherland drew attention to the accompanying report and encouraged Board members to support and promote the proposed membership approach.</p> <p>In discussion, Mr Ashford reflected on the increasing pressures facing the voluntary and community sector, particularly in relation to reliance on public and external funding streams. Ms Sutherland acknowledged these challenges, noting that key funding sources, including European funding, are under threat, and emphasised that earlier and more structured partnership working between statutory services and the voluntary and community sector will be critical to sustainability. She highlighted the opportunity to better align existing resources to support community-based provision.</p> <p>Mr Mullen welcomed the initiative and noted its relevance to the development of the NIAS Corporate Strategy and forthcoming stakeholder engagement.</p> <p>Ms Paterson outlined that NIAS is already strengthening its engagement with the voluntary and community sector and working with partners to improve patient outcomes. She emphasised the importance of extending NIAS’ reach into communities, particularly in supporting upstream prevention, early intervention and community-based care, aligned to wider system reform and neighbourhood-based models.</p> <p>The Board noted existing NIAS engagement through Patient and Public Involvement (PPI), including the ‘Patient Voices’ initiative, and the opportunity to further strengthen collaboration with the PCC.</p>	



	<p>Ms Sutherland encouraged the Board to consider endorsing the approach outlined in the report.</p> <p>Mr Quinn suggested that the proposal should be considered further through the Safety Committee, including how NIAS might engage in a more structured and meaningful way and whether formal endorsement would be appropriate.</p> <p>The Board NOTED the presentation and agreed that further consideration would be taken forward through the Safety Committee.</p>	
7.	<p><u>Performance Report</u></p> <p>The Board NOTED the Performance Report and continued deterioration in key operational indicators.</p> <p>The Board noted that ambulance handover delays of up to 3–3.5 hours are now being experienced, significantly beyond the sustainable operating threshold of two hours.</p> <p>Members recognised the direct impact on:</p> <ul style="list-style-type: none"> • patient safety and experience; • ambulance availability and Category 2 response performance; and • staff wellbeing, including increased absence linked to sustained operational pressure. <p>Non-Executive Directors expressed concern regarding the scale, persistence and trajectory of these delays, and the implications for the Board’s ability to discharge its responsibilities in relation to patient safety and community risk.</p> <p>The Board noted that this matter had been considered in greater detail in the in-committee session and agreed that the key issues of public accountability and patient safety should be reflected in the public minutes.</p> <p>Members welcomed progress toward regional implementation of the Ambulance Handover and Withdrawal SOP and emphasised the need for sustained whole-system ownership and accountability, recognising that handover delays cannot be resolved by NIAS alone.</p>	



	<p>The Board NOTED the update and agreed to maintain close oversight of this area.</p>	
<p>8.</p>	<p><u>Finance Report</u></p> <p>The Board NOTED the Month 9 Finance Report. Members noted a year-to-date overspend of £2.253m (including pay award pressures) and a forecast pressure of £1.220m, with a pathway to breakeven identified excluding the pay award control limit.</p> <p>Non-Executive Directors acknowledged improvements in transparency but raised challenge regarding:</p> <ul style="list-style-type: none"> • volatility in the in-year financial position; • the need for stronger forecasting and earlier identification of emerging pressures; and • continued development of budget ownership and financial grip across the organisation. <p>The Board also noted the emerging planning context for 2026/27, including:</p> <ul style="list-style-type: none"> • development of a minimum viable investment breakeven plan; and • the requirement to plan for 6%–12% savings scenarios, with submission timelines of 27 February 2026, limiting time for full governance, staff engagement and PPI. <p>Members emphasised that these constraints should be reflected in the Trust’s formal response.</p> <p>Ms Donnelly confirmed that staff would receive their pay award and back pay in the following week.</p> <p>The Board agreed that an additional meeting should be arranged prior to submission of draft planning scenarios.</p> <p>The Board NOTED the update and recorded its appreciation to the executive team for the work undertaken in challenging circumstances.</p>	<p>Ms Beggs</p>
<p>9.</p>	<p><u>Update on Comms Plan</u></p> <p>The Board NOTED the Corporate Communication Planning and Capacity Plan.</p> <p>Members welcomed the development of a more structured and proactive communications approach.</p>	



	<p>In discussion, Non-Executive Directors highlighted:</p> <ul style="list-style-type: none"> • the need to ensure resilience and sufficient capacity within the communications function; • risks associated with reliance on key individuals; • the importance of strengthening political and stakeholder engagement; and • opportunities to enhance engagement with local councils and communities. <p>Members also noted the need to consider affordability and capacity implications.</p> <p>Dr Graham agreed to act as lead Non-Executive Director in supporting further development of the strategy through GARAC.</p> <p>The Board NOTED the update.</p>	
10.	<p><u>Corporate Risk Register</u></p> <p>The Board APPROVED the Corporate Risk Register, as reviewed by GARAC on 29 January 2026.</p> <p>Non-Executive Directors emphasised the importance of progressing substantive appointments to senior roles in support of organisational stability and effective risk management.</p>	
11.	<p><u>Updated Committee ToR</u></p> <p>The Board APPROVED the updated Terms of Reference for GARAC, PCOD and SPF Committees (Proposed: Mr Dennison; Seconded: Mr Corrigan).</p>	
12.	<p><u>Standing Orders Update</u></p> <p>The Board APPROVED the proposed updates to the Standing Orders (Proposed: Mr Dennison; Seconded: Mr Corrigan), as recommended by GARAC.</p>	
13.	<p><u>Risk Management Policy / Risk Appetite Review</u></p> <p>The Board APPROVED the Risk Management Policy and Risk Appetite Statement (Proposed: Mr Ashford; Seconded: Mr Corrigan), as recommended by GARAC.</p>	
14.	<p><u>Committee Business</u></p>	



	<p>The Board NOTED the Forward Work Plan for Trust Board and Committees for 2026/27, recognising that it remains flexible to reflect emerging priorities.</p> <p>The Board also noted Committee minutes for information.</p>	
15.	<p><u>Any Other Business</u></p> <p><u>NIAS New Corporate Plan Update</u></p> <p>Mr Mullen provided an update on development of the Corporate Plan.</p> <p>Members noted ongoing work through the Steering Group and upcoming stakeholder engagement.</p> <p>Mr Dennison reiterated the importance of aligning the timing of publication with clarity regarding the substantive Chief Executive position. It was agreed that this would be considered further by the Chair.</p> <p><u>Acknowledgement</u></p> <p>Members noted that this was Mr Ashford’s final Board meeting. On behalf of the Board, Ms Paterson thanked him for his contribution, commitment and support.</p>	Chair
16.	<p><u>Date and venue of next meeting:</u></p> <p>The next meeting of the Trust Board will take place on 30 March 2026 at 9:30am.</p>	