

UN-CONFIRMED MINUTES of the Board of Directors meeting held in Public at 09:00 on
Thursday 5th September 2024, in the Boardroom, King's Mill Hospital

Present:	Graham Ward	Acting Chair	GW
	Steve Banks	Non-Executive Director	SB
	Barbara Brady	Non-Executive Director	BB
	Aly Rashid	Non-Executive Director	AR
	Andrew Rose-Britton	Non-Executive Director	ARB
	Neil McDonald	Non-Executive Director	NM
	Manjeet Gill	Non-Executive Director	MG
	Andy Haynes	Specialist Advisor to the Board	AH
	David Selwyn	Acting Chief Executive	DS
	Claire Hinchley	Acting Director of Strategy and Partnerships	CH
	Richard Mills	Chief Financial Officer	RM
	Simon Roe	Acting Medical Director	SR
	Rob Simcox	Director of People	RS
	Rachel Eddie	Chief Operating Officer	RE
In Attendance:	Shantell Miles	Director of Nursing and Deputy Chief Nurse	SM
	Paula Shore	Director of Midwifery	PS
	Navtej Sathi	Guardian of Safe Working	NS
	Clare Jones	Minutes	
	Jess Baxter	Producer for MS Teams Public Broadcast	
	Caroline Kirk	Communications Specialist	
Observers:	2 members of the public		
Apologies:	Sally Brook Shanahan	Director of Corporate Affairs	SBS
	Phil Bolton	Chief Nurse	PB

Item No.	Item	Action	Date
24/273	WELCOME		
1 min	<p>The meeting being quorate, GW declared the meeting open at 09:00 and confirmed that the meeting had been convened in accordance with the Trust's Constitution and Standing Orders.</p> <p>The meeting was held in person and was streamed live. This ensured the public were able to access the meeting. The agenda and reports were available on the Trust Website and the public were able to submit questions via the live Q&A function.</p>		
24/274	DECLARATIONS OF INTEREST		
1 min	There were no declarations of interest pertaining to any items on the agenda.		
24/275	APOLOGIES FOR ABSENCE		
1 min	Apologies were received from Sally Brook Shanahan, Director of Corporate Affairs, and Phil Bolton, Chief Nurse. It was noted Shantell Miles, Director of Nursing and Deputy Chief Nurse, was attending the meeting in place of Phil Bolton.		
24/276	PATIENT STORY: THE IMPACTS OF PAIN AND THE DISCHARGE PROCESS		
25 mins	<p>SM introduced the Patient Story, highlighting Kevin's journey as described by his wife Gwen.</p> <p>SM advised how Kevin's story had affected the team and reflected on the changes made, ensuring an improved journey for other patients. MG expressed thanks for the courage and honesty on presenting to the Trust Board of Directors, noting team embracement. SM responded that the team are passionate and committed.</p> <p>NM noted the link to recent maternity cases, querying whether Kevin's story had been shared appropriately since filming in winter to highlight and alter issues with cultural attitude. SM responded it has been shared alongside other incidents at various forums as part of the investigation process throughout the year. SM reported the team sense check and apply Confirm and Challenge alongside monitoring the various measures that are now in place.</p> <p>AH expressed thanks for presenting and enquired in terms of the approach to variation of care within a stretched system alongside confidence with the front-line approach to identify. SM acknowledged the challenge for all Emergency Departments (ED) to identify in a timely manner and Sherwood Forest Hospitals Foundation Trust (SFHFT) are working closely with partner organisations to ensure pathways are clear, triggering the appropriate approach. SFHFT have been working closely with Nottingham University Hospitals (NUH) to ensure pathways are clearly identified for spinal cord compression.</p>		

	<p>SM stated in terms of variation in care, all techniques are applied to improve on a day-to-day basis however, modelling is key to committing to the consistency of care and changing the culture. Such cases need unpicking to ensure standards are met and exceeded whilst incorporating the CARE values. People’s behaviours can’t be ruled out but can be addressed.</p> <p>AH enquired in terms of the immediate escalation of incidents. SM responded in addition to ward rounds, daily safety huddles are doubled and ensuing rapid reviews take place if required to ensure the safest course of action is carried out.</p> <p>SB provided assurance via the People Committee where the Urgent Care Team presented a report which was noted within the August 2024 Board of Directors report. SB then enquired in terms of front door pressures, flow and discharge that could sometimes result in wrong decisions being made. SM responded whilst staff were under pressure, fundamental care is uppermost, and balance is key. In this instance a catalogue of incidents occurred. All agreed standards of care should be priority.</p> <p>RE highlighted the Flow meetings which take place 5 times per day, 7 days per week, where these questions are addressed. RE enquired whether the discharge lounge and the cohort of patients are included. SM responded this cohort of patients are under the same standards of care and same guidelines. Acknowledging a high number of Bank and Agency staff, SM stated a robust induction process is in place. ARB queried whether there is an intention to employ substantive staff. RE responded the financial pressures associated with increased demand is an ongoing concern. RE noted the plan to present options at the next Trust Management Team meeting (TMT).</p> <p>DS expressed apologies, recognising as a Board we don’t always get things right. DS encouraged staff to be empowered to be professionally curious despite the pressures they are under.</p> <p>GW summarised the importance of highlighting when things don’t go right, acknowledging the ongoing challenges and the impact of pain.</p>		
<p>24/277</p>	<p>MINUTES OF THE PREVIOUS MEETING</p>		
<p>1 min</p>	<p>Following a review of the minutes of the Board of Directors meeting in Public held on 1st August 2024, the Board of Directors APPROVED the minutes as a true and accurate record.</p>		
<p>24/278</p>	<p>MATTERS ARISING/ACTION LOG</p>		
<p>1 min</p>	<p>The Board of Directors NOTED there were no actions due for review.</p>		

24/279	ACTING CHAIR'S REPORT		
5 mins	<p>GW presented the report, providing an update regarding some of the most noteworthy events and items over the past month from the Acting Chair's perspective. GW highlighted the upcoming Excellence Awards on 12th September 2024, reporting over 500 nominations received. GW then emphasised the generosity of our sponsors who recognise the importance of this event.</p> <p>GW reported 2 Non-Executive Director (NED) appointments have been approved at the Councillor of Governors meeting; an Associate in terms of research and innovation will be sought alongside a finance NED.</p> <p>GW reported ongoing engagement with the system at Patient-Led Assessments of the Care Environment (PLACE) level alongside engagement with NUH and Nottinghamshire Healthcare Foundation Trust (NHFT). A Chairs' meeting recently took place where items were shared.</p> <p>Council of Governors Highlight Report</p> <p>The Board of Directors RECEIVED and took the report as READ. GW expressed thanks for the support of Governors at the Council of Governors meeting on 13th August 2024 where attendance and participation were strong.</p> <p>The Board of Directors were ASSURED by the report.</p>		
24/280	ACTING CHIEF EXECUTIVE'S REPORT		
33 mins	<p>DS presented the report, providing an update regarding some of the most noteworthy events and items over the past month from the Acting Chief Executive's perspective.</p> <p>DS reported on the progress of Paul Robinson, noting his improvement and ongoing support of his recovery.</p> <p>DS stated demand and performance metrics are reporting positively, noting the British Medical Association (BMA) collective action in General Practice has resulted in limited impact to date. Resident Doctors referendum on their pay offer commenced 19th August to 15th September.</p> <p>DS reported the 4-hour ED performance at 82%; the highest since February 2022, then reported the reduction of planned care patient waiting lists and improved diagnostic performance. DS expressed thanks to all concerned</p> <p>DS reported the NHS Oversight Framework (NOF) remains in Segment 2 with the position accurately reflected. DS requested the Board of Directors note the implementation of a new Oversight Framework, resulting in Quarter 1 remaining in Segment 2.</p> <p>DS reported the Newark Urgent Treatment Centre (UTC) extended hours continues to be monitored alongside the Integrated Care Board (ICB).</p>		

	<p>DS reported on a recent visit, followed by a return visit to attend the Maternity Unit by Lee Anderson (MP) and that he had subsequently held a round table parliamentary discussion in terms of baby loss – SFHFT provided factual evidence.</p> <p>In terms of the recent riots across the country, DS expressed proudness of SFHFTs diverse workforce and desire to work in a diverse organisation. Walkarounds and listening events have taken place, noting the concerns of staff across the Trust. Vigils for peace have also taken place in Faith Centres across all 3 sites.</p> <p>DS requested the Board of Directors note the Annual General Meeting (AGM) will take place 24th September 2024 with the Step into the NHS event following immediately after.</p> <p>DS reported construction work in terms of the Community Diagnostic Centre is ongoing, noting the environmental impact. DS highlighted the Comms team are capturing the history of the site, identifying the last baby born in the old hospital.</p> <p>BB queried the reference to being an ‘anchor institute’ within the letter from the ICB regarding segmentation. DS referenced the role in supporting the health and inequalities work within the letter. CH added the statements don’t always provide reflection, noting the challenge of highlighting the work that is being undertaken, employing local providers and working alongside Organisational partners. DS highlighted the significant evidence provided at the recent Board to Board meeting.</p> <p>NM referenced the financial section of the letter and enquired in terms of the Financial Improvement Plan (FIP), Elective Recovery Funding (ERF) alongside the impact of NOF3 segment. DS responded external scrutiny has been increased alongside ICB scrutiny and demands as a result. NM then enquired how a sense of urgency can be instilled to ensure resources are acquired to deliver and achieve end of year. RM responded the sense of urgency is constant, highlighting the weekly efficiency programme updates to Executives, alongside the ongoing visibility at TMT to ensure financial obligations are met. RM compounded the segmentation results in terms of support in addition to scrutiny, referencing the NHS Investigation and Intervention Phase 1 Final Report. RM noted a weekly system Financial Recovery Group has been implemented. DS added this week’s meeting included what assurance is given to the Board of Directors in terms of the Financial Recovery Plan alongside recognising the balance between financial improvements and patient safety.</p> <p>RE referenced the Grant Thornton financial review, noting the high level of ownership reported. RE then highlighted issues reported at the Financial Recovery Group and detailed the measures put in place to address. RE reported positive progress, highlighting the huge amount of work taking place within the divisions to address. CH stated in terms of pace, SFHFT were noted to be very responsive, providing examples of how the recommendations made are being addressed; tangible outcomes will be included within the next phase.</p>		
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	<p>SB enquired whether the same assurance can be provided in terms of support function ownership and understanding. DS reported a Trust wide approach. RS referenced the People directorate measures that are taking place and noted a collaborative approach in terms of delivery. RM referenced the separate support function targets in place.</p> <p>MG queried what is taking place in terms of the culture around recurrent and non-recurrent savings. RM advised a paper will be presented during today's meeting highlighting non-recurrent savings. RM then provided examples of the processes in place to remove non-recurrent costs.</p> <p>ARB expressed thanks from East Midlands Ambulance Service (EMAS) crews who reported improving handover times. DS added a Board of Directors video is in development.</p> <p>AH queried staff attitudes towards the financial position. DS responded a consistent message is regularly circulated, providing visibility to staff. SFHFT have asked staff for ideas which are being fed back, and Dragon's Den has been implemented, therefore DS felt staff do have an understanding. DS then referenced the imminent Staff Survey in terms of measurement. RM compared the process during the Covid pandemic, acknowledging the change in mindset. CH noted a definite shift between segments and staff have been approached to ask about changes. CH then compounded the communications to staff and provided examples of the ideas that are being developed to address the culture.</p> <p>GW summarised by acknowledging the challenges and requested an update of the impact of the financial recovery measures take place at the October 2024 Public Board of Directors meeting, incorporating the Quality Impact Assessment review. GW referenced the contact made with all local MPs and expressing thanks to Lee Anderson MP for his visits.</p> <p>Action</p> <ul style="list-style-type: none"> • To present a Financial Recovery Measures Impact Update at the October 2024 Public Board of Directors meeting. <p>The Board of Directors were ASSURED by the report.</p>	<p>RM</p>	<p>03/10/24</p>
<p>24/281</p>	<p>STRATEGIC OBJECTIVE 1 – PROVIDE OUTSTANDING CARE IN THE BEST PLACE AT THE RIGHT TIME</p>		
<p>19 mins</p>	<p>PS joined the meeting to provide a Maternity Update.</p> <p>Safety Champions Update</p> <p>The Board of Directors RECEIVED and took the report as READ. PS presented the report, highlighting the annual Care Quality Commission (CQC) survey and ongoing focus on action plans. Results will be released shortly and have been shared with various agencies.</p>		

PS welcomed NM as the new Non-Executive Safety Champion, highlighting a recent walkaround undertaken. NM referenced his first walkaround, expressing thanks to staff for their work. NM challenged managers and the Estates team to repair minor works within the Maternity unit. NM has requested an enhancement of Governance within the team, moving away from verbal requests. GW acknowledged the challenges in terms of outstanding minor works.

PS referenced the emotive round table parliamentary discussion in terms of baby loss, resulting in 5 key areas of focus during their tenure; saving baby's lives care bundle, maternity incentive scheme, inequalities and equity, research and innovation, learning lessons.

AR queried the stark sentences within the annual survey in terms of no significant change in trust scores as a learning organisation. PS responded whilst the scoring stays the same, the categories within the survey have changed; pain relief is included within this survey, scoring higher than average. Some areas are not improved but the areas differ each year; the survey is anonymous therefore it is difficult to understand and address, and the survey is national so the timing cannot be changed. A discussion ensued in terms of the appropriate questions and processes. NM noted the opportunity to listen to first hand feedback every month as part of his role.

BB enquired in terms of the increase of acuity. PS responded a scoring tool is used to monitor acuity, adding a doctor noted the rise in acuity of women at the parliamentary debate. PS advised a new matron is in place to address and smoking cessation and weight management services were highlighted to mitigate acuity. PS reported Lee Anderson MP was also keen to support. Programmes are still in their infancy; however, the hope is these services will impact and updates will be reported at the Trust Board of Directors meeting once developed.

ARB enquired whether actions from the last CQC inspection in 2020 have been embedded. PS responded the 'must do's' have been embedded, the 'should do's' are being currently addressed and embedded. PS then advised a paper will be presented at the September 2024 Quality Committee.

AH advised in relation to a recent EMAS conference that higher acuity can result in increased investigations. PS is meeting with Midwives who attended this conference to discuss the agenda and areas of collaboration.

The Board of Directors were ASSURED by the report.

Maternity Perinatal Quality Surveillance Model

PS presented the report, noting the reduction in obstetric haemorrhage alongside 3rd and 4th degree tears. 4 home births in July 2024 were reported and issues in terms of impending staff maternity leave are being addressed.

The Board of Directors were ASSURED by the report.

	PS left the meeting.		
24/282	STRATEGIC OBJECTIVE 2 – EMPOWER AND SUPPORT OUR PEOPLE TO BE THE BEST THEY CAN BE		
24 mins	<p>NS joined the meeting.</p> <p>Guardian of Safe Working</p> <p>The Board of Directors RECEIVED and took the report as READ. NS presented key highlights of the report, referencing the support from Executives and Rebecca Freeman, alongside the feedback provided by the Board of Directors. NS addressed AR in terms of supporting trainees, detailing the measures taken.</p> <p>AR queried the plan to increase uptake in exception reporting, noting the misleading percentages. NS stated the intention to recirculate the survey to capture the appropriate information once the proper processes are in place. SR compounded the survey was undertaken by a very small number of Resident Doctors during a difficult time due to industrial action. SR raised the importance of engaging with Resident Doctors, ensuring appropriate measures are taken.</p> <p>AH recognised the effort to increase visibility, enquiring if Resident Doctors have been asked what questions need to be included within the survey. AH then acknowledged the difficulty in terms of exception reporting.</p> <p>MG enquired what the key headlines were from the NHS England (NHSE) report that refers to improving Doctor’s lives. DS responded the report has been presented in other forums. RS reported 3 main headlines following presentation at People Committee: colleague sense of belonging and engagement within the organisation whilst working within the Trust, the opportunity to voice concerns and resulting action during a short period of time working within the Trust, finally the moving of one organisation to another and the resulting lack of passporting in terms of mandatory training. RS then raised ensuring individuals are paid appropriately and timely whilst moving between organisations. MG queried the key dialogue taking place to ensure these principles are met. SR noted the corporate induction process to address who to contact to mitigate any of the aforementioned circumstances, alongside the speciality level induction focusing on engagement during the short period of time they are with SFHFT. SR then highlighted the visibility of the Medical Director and Deputy Medical Director, alongside the appropriate forums in place. NS highlighted the Medical Managers meeting alongside in reach, providing further assurance.</p> <p>DS noted during his latest walkaround the approach to Resident Doctors where positive feedback was given. DS acknowledged the ongoing work to provide improvements, highlighting the lengthy delay in works to the Doctor’s Mess. GW compounded the intention to ensure this work will continue expressing apologies for the length of time taken. DS noted the financial implications. BB noted the positive increase in Speciality Trainee (ST) 3 levels and the collaborative work with the Freedom To Speak Up Guardian.</p> <p>The Board of Directors were ASSURED by the report.</p>		

	NS left the meeting.		
24/283	STRATEGIC OBJECTIVE 5 – SUSTAINABLE USE OF RESOURCES AND ESTATE		
27 mins	<p>NHSE Investigation and Intervention Process</p> <p>RM presented the process report, prompted by the reporting of month 2 financial results nationally showing an overspend £237 million across 42 systems. Nottingham and Nottinghamshire ICS has been selected for the first wave of the process. Phase 1; a 4-week investigation process, Phase 2; a 12-week intervention process. The phase 1 report has been shared within the ICS, phase 2 is due to commence.</p> <p>RM advised Programme Leads are reviewing non-recurrent finances. Work to apportion saving opportunities associated with cost cutting schemes at divisional level is taking place. The FIP tracker is being reviewed to ensure compliancy and a rigorous governance process has been established via the monthly Financial Recovery Cabinet and weekly Financial Efficiency Review meetings that report to the Cabinet. RM encouraged NED and Quality Committee member attendance to provide further assurance, an Integrated Care System (ICS) representative also attends. RM stated the next steps are to strengthen the Financial Recovery Plan prior to reporting to NHSE, alongside reporting to ICS partners to confirm the scope of phase 2 work and how to take the 12-week process forward.</p> <p>GW noted the use of the Comms strategy in order to disseminate information and increase understanding and commitment to deliver.</p> <p>SB queried whether the focus is on in-year savings or large interventions that would be more longer-term. RM responded initially savings are in-year focused however, some areas may expand into longer-term interventions, highlighting transformation projects. RM noted regular transformation meetings are taking place within the ICS. DS added internal workstreams and multi-year saving plans are in place.</p> <p>MG queried leaver incentives for divisional staff in terms of recurrent savings. RM noted the difficulties of offering clear incentives due to the financial constraints, however acknowledged the bigger picture and the financial sustainability by March 2026. CH raised the Improvement Faculty service redesign, the Bank and Agency constraints and the recruitment of substantive staff at the first stage. MG noted the risk to safety. DS raised the targets for the following year and discussed the incentives to staff nationally in terms of quality and safety alongside the improvement of colleague’s working lives. DS noted caution in terms of comparing to previous years and the rule changes.</p> <p>MG queried how other Trusts and ICBs are operating and have they given insight to SFHFT. RM responded it has provided insight in terms of holding a mirror up to SFHFT compared to other organisational approaches. RM stated wider learning across the NHS has been limited to date however, ICB colleagues are reaching out to other systems for feedback which would be welcomed. MG queried whether more challenge can be made. GW added he would have liked to have seen more systemwide transformation delivery within the report. DS highlighted the East Midlands Acute Provider Network in terms of</p>		

	<p>financial information sharing.</p> <p>MG enquired in terms of interlinking with the 360 audit which took place earlier this year. RM clarified this was a self-assessment, and an internal audit took place as a result. RM reported a positive result which was shared as part of the investigation process and has been built upon.</p> <p>MG raised the PA Consulting work with other ICBs, querying whether triangulation of results and ideas from different parts of the country can be shared. GW agreed. RM shared he is part of the Chief Financial Officer Forum where similar information is shared and will provide any feedback shared.</p> <p>BB queried how this report sits within the Financial Strategy. RM responded the current Financial Strategy is delayed pending the outcome of the intervention phase. BB queried the timeline for delivery of the Financial Strategy. RM responded the October 2024 Finance Committee will discuss the medium-term strategy and an update will be provided to the Board of Directors.</p> <p>GW summarised by recognising the amount of pressure all are under and acknowledged there are no easy outcomes.</p> <p>The Board of Directors were ASSURED by the report.</p>		
<p>24/284</p>	<p>CONSTITUTION REVIEW</p>		
<p>2 mins</p>	<p>DS presented the report, noting minor amendments to the Constitution, the modernisation of the voting arrangements and replacing the unused opportunity for the Placed Based Partnership to nominate a Governor, with the opportunity for the new Combined Authority to make a nomination. The Constitution is in line with NHSE best practice, noting no impact to the power of the Council of Governors meeting or the Council of Governors duties.</p> <p>The Board of Directors APPROVED the revised Constitution.</p>		
<p>24/285</p>	<p>ASSURANCE FROM SUB-COMMITTEES</p>		
<p>18 mins</p>	<p>Finance Committee</p> <p>GW presented the report, highlighting the discussions already undertaken. A workplan to invite divisional staff to Finance Committee is in development. Internal audit reports in terms of Capital provided assurance. The Theatre productivity Business Case was approved, and the impact is being monitored. Renewal of the NHIS contract Business Case was approved. The Board Assurance Framework (BAF) was reviewed, resulting in no changes being made.</p> <p>MG queried the position in terms of cashflow and overdraft charges. RM responded there are risks around this, highlighting the Public Dividend Capital and the complexities around managing payments. RM assured the Board this is managed as a monthly process and decisions are made daily to provide assurance. GW highlighted the difficulties surrounding the process. RM raised the impending payment of the</p>		

	<p>backdated pay rise to staff. DS clarified this cash is not additional, however it is being drawn early to streamline outgoings.</p> <p>The Board of Directors were ASSURED by the report.</p> <p>Partnerships and Communities Committee</p> <p>BB presented the report, highlighting the insufficient capacity to engage with external partnerships effectively, impacting on the Health Inequalities agenda and fragile services. BB raised there are currently 3 different workstreams in terms of fragile services, providing limited assurance.</p> <p>BB reported positive assurance in terms of rephrasing the overall risk for Principal Risk (PR) 6 to 12, alongside positive work in support of anchor organisation.</p> <p>BB raised the Partnerships and Communities Committee Terms of Reference, requesting a Board workshop take place to focus on partnerships and the review of controls and gaps for PR6. GW responded the workshop concept would be developed offline.</p> <p>BB requested a presentation from the recent Quality Committee in terms of Digital Inequalities.</p> <p>NM advised a decision should be made in terms of which workstreams to support and at what level. DS recognised this, noting the complexity of providing the most appropriate forum to address fragile services. A discussion ensued in terms of the appropriate levels of workstream reporting.</p> <p>Action</p> <ul style="list-style-type: none"> • To develop a Board Workshop focusing on partnerships. <p>The Board of Directors were ASSURED by the report.</p>	CH	03/10/24
24/286	OUTSTANDING SERVICE – ORGAN DONATION - CHANGING AND SAVING LIVES		
10 mins	<p>A short video was played highlighting the work of the Organ Donation Team.</p> <p>SR reflected on his career, stating how organ transplants change lives and sharing the statistics. SR encouraged everyone to discuss organ donation.</p> <p>AH queried deprivation in terms of local transplant waiting lists SR responded the national allocation system is equitable however, there is evidence of disparity in terms of deprivation and equality within the work up process and the listing. A review is underway and health knowledge, alongside well-informed families are important.</p> <p>GW summarised by acknowledging a powerful film, highlighting the impact on the lives of the whole family.</p>		

24/287	COMMUNICATIONS TO WIDER ORGANISATION		
3 mins	<p>The Board of Directors AGREED the following items would be disseminated to the wider organisation:</p> <ul style="list-style-type: none"> • Organ donation film and organ donation week commencing 23rd September 2024 • Impacts of Pain and the Discharge Process patient story • Winners of Excellence Awards promotion • Financial climate awareness – Phase 1 of NHS Investigation and Intervention report • Volunteer work and Dragon’s Den • Newark UTC extended hours • Medical Lead for Sepsis 		
24/288	ANY OTHER BUSINESS		
	No other business was raised.		
24/289	DATE AND TIME OF NEXT MEETING		
	<p>It was CONFIRMED the next Board of Directors meeting in Public would be held on 3rd October 2024 in the Boardroom at King’s Mill Hospital.</p> <p>There being no further business the Chair declared the meeting closed at 12:02</p>		
24/290	CHAIR DECLARED THE MEETING CLOSED		
	<p>Signed by the Chair as a true record of the meeting, subject to any amendments duly minuted.</p> <p>Graham Ward</p> <p>Acting Chair</p>		<p>Date</p>

24/291	QUESTIONS FROM MEMBERS OF THE PUBLIC PRESENT		
1 min	<p>GW reminded people observing the meeting that the meeting is a Board of Directors meeting held in Public and is not a public meeting. Therefore, any questions must relate to the discussions which have taken place during the meeting.</p> <p>No questions were raised from members of the public.</p>		
24/292	BOARD OF DIRECTOR'S RESOLUTION		
1 min	<p>EXCLUSION OF MEMBERS OF THE PUBLIC - Resolution to move to a closed session of the meeting.</p> <p>In accordance with Section 1 (2) Public Bodies (Admissions to Meetings) Act 1960, members of the Board are invited to resolve:</p> <p>“That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest.”</p> <p>Directors AGREED the Board of Director's Resolution.</p>		