

**UN-CONFIRMED MINUTES** of the Board of Directors meeting held in Public at 09:00 on  
Thursday 1<sup>st</sup> June 2023 in the Boardroom, King's Mill Hospital

<b>Present:</b>	Claire Ward	Chair	CW
	Graham Ward	Non-Executive Director	GW
	Barbara Brady	Non-Executive Director	BB
	Aly Rashid	Non-Executive Director	AR
	Steve Banks	Non-Executive Director	SB
	Manjeet Gill	Non-Executive Director	MG
	Andy Haynes	Specialist Advisor to the Board	AH
	Paul Robinson	Chief Executive	PR
	Phil Bolton	Chief Nurse	PB
	Rob Simcox	Director of People	RS
	Richard Mills	Chief Financial Officer	RM
	David Ainsworth	Director of Strategy and Partnerships	DA
	David Selwyn	Medical Director	DS
Rachel Eddie	Chief Operating Officer	RE	
Sally Brook Shanahan	Director of Corporate Affairs	SBS	
<b>In Attendance:</b>	Debbie Kearsley	Deputy Director of People	DK
	Beth Hall	Business Support Officer	BH
	Sue Bradshaw	Minutes	
	Jessica Baxter	Producer for MS Teams Public Broadcast	
<b>Observers:</b>	Sue Holmes	Lead Governor	
	Ian Holden	Public Governor	
	Kevin Stewart	Appointed Governor	
	Deborah Dowsing	Communications Officer	
	Laura Keeling	Communications Officer	
	3 members of the public		
<b>Apologies:</b>	Andrew Rose-Britton	Non-Executive Director	ARB

Item No.	Item	Action	Date
<b>23/165</b>	<b>WELCOME</b>		
1 min	<p>The meeting being quorate, CW 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 any members of the public watching the live broadcast were able to submit questions via the live Q&amp;A function.</p>		
<b>23/166</b>	<b>DECLARATIONS OF INTEREST</b>		
1 min	There were no declarations of interest pertaining to any items on the agenda.		
<b>23/167</b>	<b>APOLOGIES FOR ABSENCE</b>		
1 min	Apologies were received from Andrew Rose-Britton, Non-Executive Director.		
<b>23/168</b>	<b>MINUTES OF THE PREVIOUS MEETING</b>		
1 min	Following a review of the minutes of the Board of Directors meeting in Public held on 4 <sup>th</sup> May 2023, the Board of Directors APPROVED the minutes as a true and accurate record.		
<b>23/169</b>	<b>MATTERS ARISING/ACTION LOG</b>		
1 min	The Board of Directors AGREED that actions 18/435, 23/108, 23/137, 23/138, 23/139, 23/141 and 23/145 were complete and could be removed from the action tracker.		
<b>23/170</b>	<b>CHAIR'S REPORT</b>		
2 mins	<p>CW presented the report, which provided an update regarding some of the most noteworthy events and items over the past month from the Chair's perspective, highlighting governor elections. CW welcomed Sally Brook Shanahan, Director of Corporate Affairs, to her first Board of Directors meeting since joining the Trust on 15<sup>th</sup> May 2023.</p> <p>The Board of Directors were ASSURED by the report</p> <p><b>Council of Governors' Highlight Report</b></p> <p>CW presented the report, highlighting Friends and Family feedback and concerns raised in relation to food choices and availability for patients,</p> <p>The Board of Directors were ASSURED by the report</p>		

23/171	<b>CHIEF EXECUTIVE'S REPORT</b>		
9 mins	<p>PR presented the report, which provided an update regarding some of the most noteworthy events and items over the past month from the Chief Executive's perspective, highlighting continuing high levels of demand within ED, relocation of the Sherwood Community Unit to Mansfield Community Hospital, stepping down of the Covid-19 Level 3 national incident, announcement by the British Medical Association (BMA) of further strike action by junior doctors for a 72-hour period commencing on 14<sup>th</sup> June 2023, national awards for two midwives working at the Trust and Risk Committee review of Board Assurance Framework (BAF) Principal Risk (PR) 6 (Working more closely with local health and care partners does not fully deliver the required benefits) and PR7 (Major disruptive incident).</p> <p>MG sought assurance in relation to the actions being taken to mitigate the risks posed by the forthcoming junior doctors' strike. PR advised planning is underway, although this is currently in the early stages. Lessons learnt and good practice from the two previous periods of industrial action will be incorporated into the plans.</p> <p>RE advised the strike planning meetings have commenced. A confirm and challenge session, looking at the detailed divisional plans, is due to take place on 5<sup>th</sup> June 2023. The Trust has managed the two previous strikes well. While it is difficult to know what the level of response to the forthcoming strike will be, there are no major concerns at this point.</p> <p>PR advised, during the period of the strike action, updates will be issued to members of the Board of Directors, in the same way they were issued during previous periods of action. During the previous strikes every shift was covered. It was noted not all the junior doctors took strike action.</p> <p>RS advised during the previous periods of action a number of core offers were introduced for staff, including enhanced wellbeing offers and listening opportunities.</p> <p>DS advised the BMA are currently balloting the consultant workforce. It was noted there is 1-2 weeks of planning prior to the strike, a week of strike action and then a week to debrief and recover after the strike. Therefore, a month of normal working is lost per strike, during which other actions are unable to progress.</p> <p>RE advised in the last period of strike action, the Trust stood down circa 1,000 outpatient appointments and 60 day cases. This has a significant impact on elective recovery. The financial impact is expected to increase as it is proving increasingly difficult for people to take time back for extra work undertaken. Therefore, it is likely people will request payment instead.</p> <p>CW advised there is a need to ensure the system are aware of the costs and the impact on the number of patients displaced. This needs to be escalated to the representative organisations.</p> <p>The Board of Directors were ASSURED by the report</p>		

23/172	<b>STRATEGIC OBJECTIVE 1 – PROVIDE OUTSTANDING CARE IN THE BEST PLACE AT THE RIGHT TIME</b>		
8 mins	<p><b>Maternity Update</b></p> <p><b>Safety Champions update</b></p> <p>PB presented the report, highlighting the Parent Voice Champion, events for International Day of the Midwife, 3-year maternity and neonatal plan, compliance with the CQC ‘Must do’ actions and the work of the Perinatal Mental Health Team. PB advised the Trust has been asked to take part in some national work in relation to recruitment and retention. The Trust has achieved full compliance with the Ockenden initial seven Immediate and Essential Actions (IEAs). It was noted the 15 actions from Ockenden 2 have been incorporated into the 3-year delivery plan.</p> <p>The Board of Directors were ASSURED by the report</p> <p><b>Maternity Perinatal Quality Surveillance</b></p> <p>PB presented the report, highlighting obstetric haemorrhage, elective caesarean sections, regional insight visit in October 2023 and home births service.</p> <p>AH noted the majority of indicators are showing as green and queried if there were any areas of concern. PB advised some work is underway through the Local Maternity and Neonatal System (LMNS) to identify some additional metrics to focus on, without losing sight of the important ones currently on the scorecard. It was disappointing to note the 3-year plan did not include the Single Oversight Framework, as had been expected.</p> <p>AH sought an update on the nitrous oxide issue. PD advised all organisations were written to regarding nitrous oxide. A working group has been established, which meets weekly. An external company has taken some measurements and reported their findings. Therefore, the levels within the organisation are known. The Trust is currently working through the actions which need to be taken. An update will be provided to the Board of Directors in July.</p> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>• <b>Update on nitrous oxide issue to be provided to the Board of Directors</b></li> </ul> <p>MG felt it would be useful to have a deep dive into some of the metrics, particularly with reference to the equality and diversity agenda. PB advised a report is scheduled to be presented to the Quality Committee in July 2023 in relation to this. DS advised there is a group supporting the development of PhDs at the University of Nottingham and Trent University. One of the projects which has been accepted onto the PhD programme is looking at the question of diversity and the impact of that.</p> <p>The Board of Directors were ASSURED by the report</p>	PB	06/07/23

23/173	<b>STRATEGIC OBJECTIVE 3 – EMPOWER AND SUPPORT OUR PEOPLE TO BE THE BEST THEY CAN BE</b>		
13 mins	<p><b>Guardian of Safe Working</b></p> <p>DS presented the report, highlighting the number of training vacancies and non-training posts, increase in exception reporting from Senior Clinical Fellows, development of a medical education strategy and educational charter, business case for new doctors' mess and appointment of Dr Nav Sathi to the role of Guardian of Safe Working.</p> <p>There were 93 exception reports in the period from 1<sup>st</sup> February 2023 to 30<sup>th</sup> April 2023, of which four were categorised as immediate safety concerns. All these exception reports are now closed. The Trust now has the ability to remind supervisors when action is required and the Medical Workforce Team is responding to the simpler exception reports. Surgery, anaesthetics and critical care had the highest number of exception reports, although it was noted the Trust is carrying some vacancies in trauma and orthopaedics which may account for this. DS advised more details on the reasons for this increase will be provided to the People, Culture and Improvement Committee as information becomes available.</p> <p>MG queried how SFHFT compares to other trusts in terms of the allocation of training posts. DS advised there is a complex bidding process and Health Education England (HEE) try to be as fair and equitable as possible. SFHFT is only able to provide certain training aspects which are required. However, the Trust has done well over the last 2-3 years in terms of growing some training posts. DS advised he was not too concerned about the number of vacancies, feeling this is similar to other organisations. However, carrying vacancies does come at a cost and there is a need to feed this factor into other discussions, particularly the reasons for the financial position being off track.</p> <p>AR noted two of the immediate safety concerns raised related to doctors working additional hours. Noting there is an increased risk of mistakes being made if a doctor is tired, AR queried if this aspect was followed up. DS advised all incidents are triangulated and there is a specific question in relation to staffing when incidents are taken through the investigation process. AR felt it would be useful to include some triangulation in future reports.</p> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>• <b>Triangulation between exception reports relating to working additional hours and patient safety incidents to be included in future Guardian of Safe Working reports</b></li> </ul> <p>AR sought assurance training grade doctors feel able to escalate issues to consultants, noting one of the reports suggests the doctor did not feel able to do that. DS advised doctors recognise escalating issues is something they can do and this message is reinforced at all induction meetings, etc. DS advised he has no concerns regarding this.</p> <p>AR felt it is good to see an increase in exception reporting and queried if this is reflected in surveys, etc. from doctors in terms of them finding the process valuable and that their voice is being heard.</p>	DS	07/09/23

<p>12 mins</p>	<p>DS advised some work in relation to the junior doctor forums has been undertaken, but there is more work to do. The importance of exception reporting was raised at a recent forum and junior doctors were reminded this report is presented to the Board of Directors. In addition, this report is taken back to the junior doctor forums so they can see the impact their voice is having.</p> <p>AR queried if there is a timeline for completing the doctors' mess. SB advised the business case was presented to the last meeting of the Capital Oversight Group, who were very supportive. However, a concern was raised in relation to the lack of project structure to support the case. DS advised the requested timeline is for work to be completed by August 2023. The site selected for the mess requires relatively little structural change. DS advised he would arrange for AR to visit the proposed site.</p> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>• <b>Visit to the proposed site of the doctors' mess to be arranged for AR</b></li> </ul> <p>BB queried if the performance of education supervisors, in terms of their response to exception reports, feeds into their appraisals. DS confirmed this is the case.</p> <p>The Board of Directors were ASSURED by the report</p> <p><b>Equality and Diversity Annual Report</b></p> <p>RS presented the report, advising 2022/2023 has been a year of sustained improvement. However, it was acknowledged there is still work to be done. The milestones linked to the Equality, Diversity and Inclusion (EDI) agenda will be linked to the People Strategy, for example, ensuring the staff networks thrive, recognising the importance of the EDI agenda, including the patient voice in the agenda, and recognising the diversity of the community served by the Trust. There is a need to understand the patient demographic in order to tailor the offer and approaches.</p> <p>BB noted the summary and highlights report contains little information on the patient aspect and requested an increased focus on the patient perspective in future reports. RS acknowledged there is work to do in relation to how the patient aspect is showcased.</p> <p>PB advised it is recognised there is a lot to do in relation to the patient voice and the voice of the community. The Patient Experience Team needs to move from being a complaints response team to one of gathering patient experience and 'hearing' the patient voice. This is across all agendas. There are some areas where this is done well, for example in maternity, but there is a need to replicate that.</p> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>• <b>Future Equality and Diversity Annual Reports to have an increased focus on the patient perspective</b></li> </ul>	<p>DS</p> <p>RS</p>	<p>06/07/23</p> <p>June 24</p>
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	<p>AR noted approximately 16% of people working in the Trust are from a non-White background. AR requested information on how that 16% is distributed among the hierarchy of the Trust. RS advised a report regarding the distribution will be presented to a future meeting of the People, Culture and Improvement Committee.</p> <p>AR felt it important not to confuse the population of staff in the hospital with the general population as representation from the population at large is different from the population in the hospital.</p> <p>AH felt the banding distribution is important, but this may not provide the visibility of leadership structures. It is important for the spread of ethnicity across the leadership network to be visible.</p> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>• <b>Further analysis to be provided to the People, Culture and Improvement Committee regarding the Trust quality profile</b></li> </ul> <p>DA advised understanding the demographic of the local population will form part of the Trust strategy. From the Staff Survey results it is known colleagues have experienced racial abuse. The Trust is working with partners to develop a mid-Nottinghamshire communications campaign to address this.</p> <p>GW noted the success measures contained in the report are factual and it would be useful to have information regarding how staff and patients are 'feeling', acknowledging this is difficult to show. RS advised a key component of gathering this information is the staff networks and staff recognising they have a voice.</p> <p>SB advised there was a discussion at the recent meeting of the People, Culture and Improvement Committee in relation to 'hearing' the voice of staff in the various networks. The more people who are 'heard' will help grow the networks. MG noted the quality of the networks has improved over the last 12 months. However, there is more to do in terms of engagement with the networks.</p> <p>The Board of Directors were ASSURED by the report</p>	RS	03/08/23
23/174	<b>STAFF STORY – EMPOWERING OUR PEOPLE TO BE THE BEST THEY CAN BE</b>		
16 mins	<p>DK and BH joined the meeting</p> <p>DK and BH presented the Staff Story, which highlighted how Strategic Objective 3, Empower and support our people to be the best they can be, is being brought to life.</p> <p>CW expressed thanks to all staff who took part in the making of the video for sharing their experiences. It is important not to take for granted what it is like to work for the Trust. There is a need to continue to work on that to ensure SFHFT is the best place to work.</p>		

	<p>MG noted the biggest strength of the Trust in terms of culture is how the champions have been embraced, i.e. maternity, wellbeing, Freedom to Speak Up (FTSU), etc. as this empowers the concept of distributive leadership. MG queried what the Trust wants to achieve in 2-3 years' time in terms of impact.</p> <p>RS advised this will be a key component of years 2 and 3 of the People Strategy. The first area to consider is sustainability, recognising some of the current national challenges. There is a need to reinforce the message SFHFT is a great place to work and have a career. The Step into the NHS events are an excellent opportunity for the local community and these need to continue. The second area to consider is how to build and create opportunities within the Trust, for example, how the apprenticeship levy is used. Finally, there is a need to recognise the continued progress in the Staff Survey results.</p> <p>AH advised it is good to see colleagues thriving. However, there is a need to be confident to give 'airtime' to colleagues who may be less happy with the offer of the Trust.</p> <p>PR advised it is important not to be complacent about the culture within the organisation. A fully empowered, engaged and motivated workforce provides great patient care.</p> <p>DK and BH left the meeting</p>		
<p><b>23/175</b></p>	<p><b>PEOPLE STRATEGY</b></p>		
<p>9 mins</p>	<p>RS presented the report, highlighting the impact and outcomes of the People Strategy over the past 12 months and the achievements, for example, the Step into the NHS events, development of staff networks and recruitment into posts where there have been historical challenges. RS advised the People Strategy has been re-set for years 2 and 3 and it contributes to the wider Trust strategy.</p> <p>BB felt it is not clear what the impact of the strategy will be, noting the success measures could be described as performance indicators. RS advised there will be ongoing discussions at the People, Culture and Improvement Committee in relation to building on the impact of the strategy. There are indicators which are used to measure success, for example, Staff Survey results. It is important to get the staff voice into the agenda and take that forward to build onto the impact and vision.</p> <p>SB advised the strategy was well received by the People, Culture and Improvement Committee. As time passes, the Trust will be able to look back on some of the measures and describe the difference it has made. RS advised the strategy will mature as it goes through years 2 and 3. For example, in the case of any new roles which are introduced, the first step will be to introduce them and then monitor and evaluate the impact of those roles on patient care.</p> <p>The Board of Directors APPROVED the People Strategy</p>		



23/176	<b>BOARD ASSURANCE FRAMEWORK (BAF)</b>		
2 mins	<p>PR presented the report advising all the principal risks (PR) have been discussed by the relevant sub committees. In addition, the BAF in its entirety is subject to quarterly review by the Risk Committee. The changes, and amendments which have been made, are highlighted in the report. It was noted the BAF was subject to further discussion at the Board of Directors Workshop on 27<sup>th</sup> April 2023.</p> <p>There is one risk, namely PR4 (Failure to achieve the Trust's financial strategy), where the current risk rating is above the tolerable risk rating.</p> <p>BB advised she found the discussion at the Board of Directors Workshop very useful.</p> <p>The Board of Directors REVIEWED and APPROVED the Board Assurance Framework</p>		
23/177	<b>COMMITTEE TOR, WORKPLANS AND EFFECTIVENESS REVIEWS</b>		
1 min	<p>SBS presented the report advising all committees review their Terms of Reference (TOR) and work plans each year and undertake an effectiveness review.</p> <p>Three actions have been identified as a result of the committee effectiveness review, two for the Finance Committee and one for the Charitable Funds Committee. There is one outstanding action from the 2021/2022 review of the Audit and Assurance Committee and this is in progress.</p> <p>The Board of Directors were ASSURED by the report</p>		
23/178	<b>ASSURANCE FROM SUB-COMMITTEES</b>		
15 mins	<p><b>Quality Committee</b></p> <p>BB presented the report, highlighting the lack of clarity provided by the single maternity delivery plan, programme of work within pharmacy and its potential impact on essential patient facing services, impact of changes to mandatory training on fundamentals of care, initial health assessments for looked after children, request for review of the Trust's statutory functions which fall in the remit of the Quality Committee, fragile services and Virtual Wards.</p> <p>DS advised the Trust is working with the Integrated Care Board (ICB) in relation to the delivery of initial health assessments for looked after children, noting this is recognised as a national issue. PB noted health assessments is one component of the Special Educational Needs and Disabilities (SEND) review of Nottinghamshire, in which Ofsted and the Care Quality Commission (CQC) raised concerns about the service provided to the vulnerable children of Nottinghamshire.</p>		

	<p>DS advised there is a significant pharmacy transformation programme, the Future Pharmacy Project, which will deliver services in a more patient focussed way. A key aspect of current pharmacy provision is recruitment and retention of pharmacists. Therefore, while the future direction is clear, there is also a focus on maintaining current operational performance.</p> <p>CW felt it would be useful for the Board of Directors to have view of the pharmacy plan.</p> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>• <b>Details of the pharmacy transformation programme to be presented to the Board of Directors</b></li> </ul> <p>SB noted members of the Board of Directors complete safeguarding training as part of their mandatory training, but queried if a more in depth session is required to ensure full awareness of the Trust's safeguarding strategy and approach. PB advised a session on safeguarding training could be delivered at a future Board of Directors' workshop.</p> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>• <b>In depth safeguarding training to be provided to the Board of Directors</b></li> </ul> <p>BB advised the Quality Committee discussed the issue of initial health assessments for looked after children and queried if it was a safeguarding or performance issue. The conclusion reached was that it is both. It was noted the safeguarding annual report is presented to the Quality Committee and the Committee requested information relating to initial health checks be included in that report.</p> <p>PR advised a discussion regarding statutory roles and responsibilities would form part of a future Board of Directors' workshop, including looking at executive responsibilities, in order to be clear where each of the organisational statutory requirements sits in executive portfolios.</p> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>• <b>Organisational statutory roles and requirements to be topic for future Board of Directors' workshop</b></li> </ul> <p><b>People, Culture and Improvement Committee</b></p> <p>MG presented the report, highlighting the violence and aggression agenda, triangulation of assurance and walkarounds by non-executive directors (NEDs). MG advised following a discussion regarding PR5, Inability to initiate and implement evidence-based Improvement and innovation, the Committee agreed improvement work will form part of the Committee's future work programme.</p> <p>The Board of Directors were ASSURED by the reports</p>	<p>DS</p> <p>PB</p> <p>PR</p>	<p>02/11/23</p> <p>07/09/23</p> <p>07/09/23</p>
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23/179	<b>OUTSTANDING SERVICE – STAFF NETWORKS</b>		
10 mins	<p>A short video was played highlighting the work of the staff networks within the Trust.</p> <p>CW encouraged the NEDs to get involved in the various celebration events which will be held throughout the year, for example REACH OUT! and Pride.</p> <p>PR advised it was Staff Network Day on 10<sup>th</sup> May 2023 and the staff network leads and chairs had the opportunity to engage with colleagues across all three sites. The five network leads will be representing SFHFT at an event to mark the 75<sup>th</sup> Birthday of the NHS at Westminster Abbey on 5<sup>th</sup> July 2023.</p>		
23/180	<b>COMMUNICATIONS TO WIDER ORGANISATION</b>		
2 mins	<p>The Board of Directors AGREED the following items would be distributed to the wider organisation:</p> <ul style="list-style-type: none"> <li>• Governor elections</li> <li>• Staff Excellence awards</li> <li>• Thanks on behalf of the Board of Directors to all the Trust's volunteers during National Volunteer Week</li> <li>• Planning for forthcoming industrial action</li> <li>• Equality and Diversity Annual report</li> <li>• Approval of People Strategy</li> <li>• Staff Story</li> <li>• Role of staff networks</li> </ul>		
23/181	<b>ANY OTHER BUSINESS</b>		
	No other business was raised.		
23/182	<b>DATE AND TIME OF NEXT MEETING</b>		
	<p>It was CONFIRMED the next Board of Directors meeting in Public would be held on 6<sup>th</sup> July 2023 in the Boardroom, King's Mill Hospital.</p> <p>There being no further business the Chair declared the meeting closed at 11.10.</p>		
23/183	<b>CHAIR DECLARED THE MEETING CLOSED</b>		
	<p>Signed by the Chair as a true record of the meeting, subject to any amendments duly minuted.</p> <p>Claire Ward</p> <p><b>Chair</b> <span style="float: right;"><b>Date</b></span></p>		

23/184	<b>QUESTIONS FROM MEMBERS OF THE PUBLIC PRESENT</b>		
1 min	<p>CW 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>Sue Holmes, Lead Governor, asked if the governors could have a development session on EDI.</p> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>• <b>Equality, Diversity and Inclusion to be topic for a future Council of Governors workshop</b></li> </ul>	SBS	06/07/23
23/185	<b>BOARD OF DIRECTOR'S RESOLUTION</b>		
1 min	<p><b>EXCLUSION OF MEMBERS OF THE PUBLIC - Resolution to move to a closed session of the meeting</b></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>		