

MINUTES PUBLIC TRUST BOARD MEETING – PART A
VELINDRE UNIVERSITY NHS TRUST LIVE STREAMED
28th NOVEMBER 2024 AT 10:00AM

<p>PRESENT</p> <p>Stephen Harries (SH) Professor Andrew Westwell (AW) Vicky Morris (VM) Gareth Jones (GJ) Lindsay Foyster (LLF) Hilary Jones (HJ) Carl James (CJ) Nicola Williams (NW)</p> <p>Dr Jacinta Abraham (JA) Matthew Bunce (MB) Lauren Fear (LF)</p>	<p>Acting Chair Independent Member Independent Member (<i>remotely</i>) Independent Member (<i>remotely</i>) Independent Member Independent Member (<i>remotely</i>) (<i>in part</i>) Interim Chief Executive Officer Executive Director of Nursing, Allied Health Professionals & Health Science Executive Medical Director Executive Director of Finance Interim Executive Director of Strategic Transformation, Planning & Digital</p>
<p>ATTENDEES</p> <p>Anne Carey (AC) Carl Taylor (CT) Non Gwilym (NG) Kyle Page (Secretariat)</p>	<p>Interim Chief Operating Officer Chief Digital Officer Interim Director of Corporate Governance Business Support Manager (<i>remotely</i>)</p>

1.0.0	STANDARD BUSINESS	
1.1.0	<p>Welcome and Apologies</p> <p>The Chair welcomed attendees to the meeting, noting the following apologies:</p> <ul style="list-style-type: none"> • Professor Donna Mead OBE, Trust Chair • Sarah Morley, Executive Director of Organisational Development & Workforce • Emma Rees, Deputy Head of Internal Audit, NHS Wales Shared Services Partnership • Alan Prosser, Director of Welsh Blood Service • Katrina Febry, Audit Lead, Audit Wales (<i>not noted at the meeting</i>) 	
1.2.0	<p>In Attendance</p> <p>The Chair extended a warm welcome to the following additional attendees:</p> <ul style="list-style-type: none"> • Bethan Davis, Simultaneous Welsh Interpretation Service • Rachel Hennessy, Interim Director of Velindre Cancer Service (<i>remotely</i>) • Amanda Jenkins, Acting Assistant Director of Workforce (<i>deputising for Sarah Morley</i>) • Tina Jenkins, Head of Quality, Safety & Assurance (<i>for item 4.6.0</i>) • David Cogan, Patient Representative 	

	<ul style="list-style-type: none"> Sian James, Head of Research, Development & Innovation Services (for item 5.2.0) Andrew Nash, Surveyor, NHS Wales Shared Services Partnership (for items in the approvals section) 	
1.3.0	<p>Declarations of Interest</p> <p>There were no declarations of interest pertinent to today's agenda.</p>	
1.4.0	<p>Minutes of the Public Session held on 26th September 2024</p> <p>The Trust Board confirmed that the minutes of the meeting held on the 26th September 2024 were an accurate reflection of proceedings.</p>	
1.5.0	<p>Action Log</p> <p>The Trust Board was content that all actions marked as closed was an accurate reflection.</p> <p>It was clarified that overdue open actions had been marked as red and those within their target date had been marked as green. The status of open actions was reviewed as follows:</p> <ul style="list-style-type: none"> 4.1.0 (26/03/2024) Action 1 – It was agreed that the action should remain open with a revised target date. 5.1.0 (23/05/2024) Action 2 – It was agreed that the action should remain open with a revised target date. 7.1.4 (23/05/2024) Action 3 – It was agreed that the action should remain open with a revised target date. 4.1.0 (26/09/2024) Action 8 – As this had been included in the governance section of the cover paper for the Trust Risk Register, it was proposed to close the action once this item had been considered later in the agenda. 4.3.0 (26/09/2024) Action 9 – Anne Carey confirmed that the wording had been updated as requested and it was agreed to close the action. <p>The Trust Board NOTED the status of open actions and Gareth Jones requested that target dates that had passed be revised and circulated to Board members (with the action marked allocated a red rating).</p>	<p>RH</p> <p>NG</p> <p>NG</p> <p>Secretariat</p> <p>Secretariat</p>
1.6.0	<p>Matters Arising</p> <p>Due to its significance, it was agreed that one substantive matter arising would be considered via the main agenda (under item 4.6.0).</p>	
2.0.0	KEY REPORTS	
2.1.0	<p>Chair's Report</p> <p>Professor Donna Mead OBE, Chair</p> <p>The report provided an overview of the Chair's activity since the previous meeting of the Trust Board. The Acting Chair added the following item:</p> <ul style="list-style-type: none"> Colonel Simon Lawrence (a member of the Trust's Radiology department) had been presented with the King's Coronation medal. As a serving soldier at the time of the coronation, he was until recently the Commanding Officer of 293 Wales Medical Reserve Regiment. The Chair had wished to express her personal congratulations and it was 	<p>NG</p>

	<p>agreed that communication would be sent on behalf of the Board to congratulate Simon.</p> <ul style="list-style-type: none"> • Next week the Trust will welcome the new Chief Executive Officer, David Donegan. The Acting Chair and the Board expressed thanks to Carl James for the exemplary way the role of Interim Chief Executive Officer had been carried out over the past five months. • Thanks were also expressed to other Board members who had undertaken interim roles as a result, (Jacinta Abraham, Lauren Fear and Non Gwilym). <p>The Trust Board NOTED the content of the Chair's Update Report.</p>	
<p>2.2.0</p>	<p>Vice Chair's Report Stephen Harries, Vice Chair</p> <p>The report provided an overview of the Vice Chair's activity since the previous meeting of the Trust Board.</p> <p>No questions were raised, and the Trust Board NOTED the content of the Vice Chair's Update Report.</p>	
<p>2.3.0</p>	<p>Chief Executive's Report Carl James, Interim Chief Executive Officer</p> <p>The report provided information to the Board regarding a number of matters and activity since the previous meeting of the Trust Board. Carl James highlighted the following:</p> <ul style="list-style-type: none"> • Attendance at the Employee Excellence Awards during October, which recognised and celebrated the achievements of inspirational colleagues across the Trust and the difference made to patients and donors as a result. • Thanks to the Board for the opportunity and privilege of assuming the role of Chief Executive Officer for the past 5 months. Carl James thanked the Executive Team for their support and welcomed David Donegan's appointment, marking the next chapter in the growth of the organisation. <p>Lindsay Foyster queried the outcome of the meeting with the Senedd's Public Accounts and Public Administration Committee regarding the procurement process supporting the development of the new Velindre Cancer Centre. Carl James advised that discussions had included an explanation of the process (procurement, chronology). Feedback had been positive due to the transparent nature of the meeting and had provided the Trust with a welcome opportunity to outline the actions it had taken. Stephen Harries advised that a recording of the meeting was available for public view on the Senedd's website.</p> <p>Lauren Fear added that the robust process / due diligence undertaken by the Board and Transforming Cancer Services Programme Scrutiny Sub-Committee, had been outlined.</p> <p>Lauren Fear also advised that the BBC had reached out to the Trust, Sacyr, DLA Piper and Kajima directly, providing the opportunity to comment prior to the imminent television coverage of the matters under review.</p> <p>The Trust Board NOTED the content of the Chief Executive's Update Report and the continued celebration of the achievements of staff was welcomed.</p>	

3.0.0	INTEGRATED GOVERNANCE	
	There were no items for discussion.	
4.0.0	QUALITY, SAFETY AND PERFORMANCE	
4.1.0	<p>VUNHST Risk Register Non Gwilym, Interim Director of Corporate Governance</p> <p>The report summarised the current position of risks scoring 12 and above for Quality / Safety and 15 and above for all other domains, whilst also referencing discussions in respect of the register that have been held over the reporting period. The paper referred (for the first time) to a summary of two risk categories which had been the focus over the period (Systemic Anti-Cancer Treatment (SACT) and Medical Staffing), including discussions of risks at a more strategic level.</p> <p>Vicky Morris added that detailed discussion had been undertaken at November's meeting of the Quality, Safety & Performance, noting the succinct articulation of this in the cover paper for Board assurance, and the triangulation with the information detailed in the Committee highlight report.</p> <p>Gareth Jones referenced narrative on page 7 regarding the use of Datix Web / Datix Cymru, querying which of these would be used by the Trust. Non Gwilym advised that a decision had not yet been reached and further internal consideration was required before presenting the pros, cons, benefits and challenges of using a new system and how risk would continue to be managed within the organisation.</p> <p>Gareth Jones queried the timeline for the planned review of all risks under the risk appetite level (as instructed by the Audit Committee). Non Gwilym indicated that it was intention to undertake this at the end of January and that an understanding of what the Audit Committee requires from this substantial piece of work is required in the first instance.</p> <p>Andrew Westwell suggested that it would be helpful to have a timescale by when the 'target rating' may be reached. Non Gwilym agreed to discuss this with the Executive Team.</p> <p>Gareth Jones noted that a more recent update than detailed in the register should be received by the Board (referencing the date of the 12th September for risk 3338). Anne Carey confirmed that while actions had been subject to a more recent update, this had not been included. However, it was advised that the cover paper had referred to this particular risk (among other SACT risks), in addition to referencing the SACT improvement plan. The plan includes a number of initiatives and actions which will influence the management of this risk. However, the issue of the date was noted, and it was agreed that this section would be reviewed. It was also agreed that the most recent updates would be noted in red for ease of reading.</p> <p>As a recent update on the current position of risks scoring 16+ had been included in the cover paper and can be retained going forward, Stephen Harries queried whether action 8 on the log could now be closed as the narrative also provided assurance that conversations are being held.</p> <p>In order to satisfy the action of providing an update on the current position a week prior to Board, Anne Carey suggested that both divisional Operation and Senior Leadership Teams separate out risks scoring 16+ for specific discussion and incorporate narrative regarding the current position into the cover paper for Board assurance purposes (given that Board papers are published a week prior to Board as a matter of course).</p>	<p>NG</p> <p>AC</p> <p>NG</p> <p>AC</p>

	<p>It was also agreed to make the Board aware of matters for escalation in relation to risks scoring 16+, as opposed to reporting on risks in steady state.</p> <p>The Trust Board NOTED:</p> <ul style="list-style-type: none"> • The risks in the quality and safety domain with a score of 12 and risks in other domains with a score of 15 and above; • The ongoing development of the Trust’s Risk Framework; • The work underway to improve organisational management of risk reporting. <p>It was AGREED that action 8 on the action log would remain open until the next meeting of the Trust Board, while proceeding with the above agreement in the interim.</p>	
<p>4.2.0</p>	<p>Trust Assurance Framework (TAF) Non Gwilym, Interim Director of Corporate Governance</p> <p>The report summarised the latest position of the Trust Assurance Framework, which provided the Board with the opportunity to review updates and actions planned for the coming period. Non Gwilym highlighted the following:</p> <ul style="list-style-type: none"> • Substantial work on the Framework had been undertaken since the previous meeting, which had been noted in red in the appended document. The cover paper also summarised the main changes in the dashboard. • Discussions at October’s Strategic Development Committee had been summarised in the governance section of the cover paper. <p>Vicky Morris added that detailed discussions had also been undertaken at the Quality, Safety & Performance Committee (noted in the summary section) and significant work had been carried out to achieve the current version. Vicky Morris advised that whilst significant amendments had been made to TAF07 since the previous meeting, the controls did not currently reflect the closed actions.</p> <p>Lindsay Foyster queried the wording of the title of TAF03, which read “there is a strategic risk of an optimised workforce.....”. It was agreed that this should include “lack of optimised workforce” for accuracy.</p> <p>Lindsay Foyster also questioned whether Executive Management Board had agreed an update on the risk score trend. Non Gwilym advised that this had not yet been achieved, as the main focus had been the update of risks against the Integrated Medium Term Plan objectives. It was agreed that this would be re-visited, and a date confirmed.</p> <p>Gareth Jones noted that an action on page 4 of the dashboard had been due for implementation by April/May 2024, however the most recent update was October. Non Gwilym agreed to review this.</p> <p>While it was appreciated that the governance process dictates how dates are noted, it was recognised that identification of a mechanism to assure the public audience that action had been undertaken since the previous update was required. It was also agreed that it would be appropriate to update the Board (post Quality, Safety & Performance Committee) by exception if required.</p>	<p>SM</p> <p>NG</p> <p>NG</p>

	<p>Non Gwilym also agreed to review the dashboard to ensure that all information is visible.</p> <p>The Trust Board NOTED the current status and ongoing development of the Trust Assurance Framework.</p>	NG
<p>4.3.0</p>	<p>Performance Management Framework (September 2024) Anne Carey, Interim Chief Operating Officer, Lauren Fear, interim Executive Director of Strategic Transformation, Planning and Digital, Matthew Bunce, Executive Director of Finance and Amanda Jenkins, Acting Assistant Director of Workforce</p> <p>The Framework provided an update and supporting analysis on the performance of the Trust for the month of September 2024 against a number of targets, which had been robustly discussed at the November meeting of the Quality, Safety & Performance Committee. Lauren fear advised the following:</p> <ul style="list-style-type: none"> • A significant amount of detail in relation to previous discussions had been provided in the governance section. • Following discussion regarding the format of the document at the Quality, Safety & Performance Committee, two changes had been made to the report; (1) a snapshot across core services had now been provided in the cover paper in place of divisional reports (2) exception reporting – the report had been condensed wherever possible based on feedback from the relevant Committee receiving the overall dashboard, however, more detail had been included for areas not meeting the required standards. • An overall rating for the report, plus an assurance rating for each of the core service areas would be present in the next report. • Inclusion of progress regarding the 7 packages of work presented to the September meeting of the Trust Board. <p>Amanda Jenkins noted that sickness data had been subject to significant scrutiny and confirmed a downward trend over the last 12 months. A request for more detailed analysis of the Trust’s PADR compliance had also been requested for scrutiny at the Quality, Safety & Performance Committee.</p> <p>Vicky Morris added that the Committee had spent a significant amount of time ensuring that the Workforce team is bringing forward action plans supporting the Strategy, noting that it would also be necessary to demonstrate outcomes. Therefore, the level of assurance had been reduced in some areas, which will increase as outcomes are evidenced.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> • DISCUSSED and NOTED the September 2024 Performance Management Framework. 	
<p>4.4.0</p>	<p>Financial Report (September 2024) Matthew Bunce, Executive Director of Finance</p> <p>The report provided an update on the financial position and performance for the period to the end of September 2024. Matthew Bunce advised the following:</p> <ul style="list-style-type: none"> • LTA Contract Rebase – Commissioners had discussed responses from all Commissioning Bodies and there was a unanimous agreement 	

	<p>to move to rebasing with a neutral impact across Commissioners. It was re-iterated that this item would be discussed in further detail at December's Board Development Session.</p> <ul style="list-style-type: none"> • New financial risk – A new financial risk had emerged, involving ensuring that income activity captured by the Trust's clinical systems is correctly mapped and flows into the Data Warehouse. The planned additional income of £1.3m had not materialised as expected, therefore presenting a potential risk of £700k not being delivered (based on data noted at Month 6). Work is urgently being undertaken to resolve process issues and it was confirmed that TAF08 of the Trust Assurance Framework would be updated accordingly in addition to recording the risk on Datix. • KPIs – Capital Funding is showing amber status, as funding had not yet been secured from Welsh Government for a number of schemes, including the nVCC, Enabling Works and Whitchurch Hospital and land matters. The necessary funding has, however, been secured since the time of writing. <p>Carl James assured the Board that the sustainable long term position of the organisation would be worked through via a Task & Finish Group. Confidence remained that financial balance would be achieved by year end and it was advised that progress would be reported at the next meeting of the Trust Board.</p> <p>The Trust Board NOTED the content of the September 2024 financial report, in particular:</p> <ul style="list-style-type: none"> • The year to date and forecast revenue out turn position and PSpP performance. • The agreed position on LTA income for 2024-25 from our Commissioners. • The position with Commissioners on the contract rebase agreement. • The latest position on the LTA activity performance for 2024-25. • That at the time of writing the Trust was still waiting to secure Capital funding from Welsh Government in relation to the nVCC, Enabling Works and Whitchurch Hospital and Land Matter for 2024-25 , but that the necessary funding has since been secured. <p>The Trust Board also NOTED the new financial risk and associated assurance.</p>	MB
4.5.0	<p>Public Quality, Safety & Performance Committee Highlight Report (14/11/2024) Vicky Morris, Independent Member and Chair of Quality, Safety & Performance Committee</p> <p>The report provided the Board with detail of the key issues and risks considered at the November meeting of the Quality, Safety & Performance Committee for escalation to the Board, in addition to the Trust's Quarter 2 Quality & Safety Report. Vicky Morris highlighted the following:</p> <ul style="list-style-type: none"> • Triangulated themes – Key triangulated issues / themes considered by the Committee based on papers received which provide any emerging pictures had been noted at the beginning of the report. • Trust Risk Register – While this had been included under items for alert/escalation, the Risk Register was not discussed in detail under this item following detailed discussion earlier in the meeting. 	

	<p>Nicola Williams wished for the Board to receive sight of quarterly Quality & Safety reports; the second quarterly report brought to the meeting distilled information from (previously) 6 separate reports from differing areas of the Trust, produced through the relevant leads, along with the three established quality hubs. Nicola Williams referenced section 2 of the report, which provided an overview of quality and safety indicators and improvements evidenced by implementation of enhanced processes. The following was also noted:</p> <ul style="list-style-type: none"> • The Trust continues to note nil complaints referred to the Public Service Ombudsman. • Implementation of the Audit Management and Tracking (AMaT) quality assurance system has provided a mechanism to enable significant oversight of whether appropriate action has been undertaken following an inspection, investigation following a serious incident, a review, or an audit. • Delays to quality metric work had resulted from allocation of resource to the SACT improvement work. However, the development of the dashboard is in progress and overseen by the Integrated Quality & Safety Group. <p>The Trust Board NOTED:</p> <ul style="list-style-type: none"> • The key deliberations and highlights from the meeting of the Quality, Safety & Performance Committee held on 14th November 2024. • The Quarter 2 Quality & Safety Report. 	
<p>4.6.0</p>	<p>Process for capture of patient / donor feedback Led by Nicola Williams, Executive Director of Nursing, Allied Health Professionals and Health Science and Tina Jenkins, Head of Quality, Safety & Assurance</p> <p>Following an action raised at the July meeting of the Trust Board, the report provided an update on work undertaken (and planned) to ensure that all patient and donor feedback is captured and used to provide an overarching picture of the Patient and Donor experience across the Trust. A Trust-wide exercise had been undertaken to identify potential missed opportunities to do so (including triangulation of data capture with Quality & Safety reporting). Tina Jenkins advised the following:</p> <ul style="list-style-type: none"> • To date, the Trust has been dependent on CIVICA feedback surveys as a quantitative measure of Trust performance, which generally provide a low return. Additional mechanisms currently used for the capture of feedback were outlined within the document. • A recent refresh of the NHS Wales People’s Experience Framework had been undertaken (currently embargoed) and permission had been granted to use the ‘local self-assessment tool’ for the work required going forward. • Individuals across the Trust had been identified to take part in the self-assessment tool and it is the intention to work collaboratively with the Patient and Carer Partnership Board. Nicola Williams advised that it had been agreed with David Cogan (patient representative) that a similar gap analysis would be undertaken in conjunction with the Patient and Carer Partnership Board within the coming months. • In addition to providing the national document once published, a Trust work plan will be completed and presented to the March meeting of the Trust Board. 	

	<p>David Cogan welcomed the inclusion of the Patient and Carer Partnership Board (previously Patient Liaison Group) and hoped that the new Framework would create organised, structured involvement of the patient voice. All Board members were invited to attend future meetings and it was suggested that a schedule of meetings be circulated to Board members.</p> <p>Nicola Williams agreed to address how the patient voice could regularly be presented to the Board going forward (and mapping of this through the appropriate governance route) outside the Board.</p> <p>Lindsay Foyster requested further information on potential actions taken by the Trust based on feedback received, whether there was evidence of improvements and how this could be communicated to the Board. Tina Jenkins indicated that the self-assessment requires the individual to evidence how patients / donors are heard and how their feedback is used. Tina Jenkins also advised that the involvement of the Dementia Lead Nurse and Safeguarding Lead would ensure that feedback is obtained from hard to reach cohorts of patients.</p> <p>Nicola Williams also recognised that ineffective communication is a recurring theme in feedback received from patients, donors, families and carers and that this must be prioritised over the coming year. David Cogan emphasised that the Trust would benefit from allowing resolution of such issues to be patient, family and carer led, as these are often not considered through the lens of the service user.</p> <p>The Trust Board NOTED the current position and plans in respect of capturing all patient and donor feedback.</p>	<p>DC</p> <p>NW / NG</p> <p>NW</p>
5.0.0	PLANNING AND STRATEGIC DEVELOPMENT	
5.1.0	<p>Strategic Planning Update Lauren Fear, Interim Executive Director of Strategic Development, Planning & Digital</p> <p>The update provided an overview across strategic planning matters for the Executive Management Board, Strategic Development Committee and Trust Board. The report outlined the following:</p> <ul style="list-style-type: none"> • The next substantive discussion in relation to the Integrated Medium Term Planning (IMTP) Framework is to take place in next week's Strategic Development Committee. • An update regarding the newly established Regional Cancer Board for South East Wales, the second meeting of which took place last week. Lauren Fear advised that the Director of Planning for each of the 4 Trusts / Health Boards involved provides a strategic planning paper to their respective Board, in addition to sharing the attached update. It was noted that the Cancer programme was now allocated amber / red status as this is still in development. • An update regarding recent partnership Board meetings between the Trust, Cardiff & Vale University Health Board and Aneurin Bevan University Health Board. <p>The Trust Board NOTED the update for assurance purposes.</p>	
5.2.0	<p>Welsh Blood Service's Research, Development & Innovation Strategy Dr Jacinta Abraham, Executive Medical Director, supported by Sian James, Head of Research, Development & Innovation Services</p>	

	<p>The purpose of the paper was to seek Trust Board approval of the Strategy, which had been designed to guide the Welsh Blood Service's research activities and partnerships with academia, NHS organisations, funders, industry partners and educational leaders, to improve the lives of people in Wales. It was acknowledged that this had previously been endorsed by the September RD&I Sub-Committee and October Strategic Development Committee prior to Trust Board.</p> <p>Jacinta Abraham praised the transformation of Research, Development and Innovation within the Welsh Blood Service over recent years, noting the expansion of the workforce, content of activity and 100+ projects now in train.</p> <p>The development of the Strategy had been well-coordinated and had included robust engagement with a large number of both internal and external stakeholders and alignment with the existing Trust and Welsh Blood Service Strategies.</p> <p>Signoff of the associated Quality Impact Assessment and Equality Impact Assessment Plan was confirmed.</p> <p>Anne Carey expressed thanks to Sian James on Alan Prosser's behalf for the support and effort in achieving this position and the Trust Board APPROVED the Welsh Blood Service's Research, Development & Innovation Strategy and the team was commended for the significant amount of work involved.</p>	
<p>5.3.0</p>	<p>Welsh Blood Service: Fleet Replacement Business Justification Case Anne Carey, Interim Chief Operating Officer</p> <p>The Business Case had been presented to the Board prior to submission to Welsh Government, to enable a three-year phased replacement programme of the Vehicle Fleet. Signoff of the Quality Impact Assessment was confirmed, in addition to endorsement of the Business Case by October's Strategic Development Committee.</p> <p>Anne Carey advised that significant work had gone into preparation of this detailed case and noted that discussions with Welsh Government Colleagues indicated that the case had been considered business critical.</p> <p>Nicola Williams indicated overwhelming support for the replacement of the fleet, to avoid adverse incidents which may occur as a result of ageing vehicles.</p> <p>The Trust Board APPROVED the Business Justification Case.</p>	
<p>6.0.0</p>	<p>CONSENT ITEMS</p> <p><i>Gareth Jones requested the removal of item 6.1.2 to allow for further discussion.</i> <i>Stephen Harries requested the removal of item 6.1.3 to allow for further discussion.</i></p>	
<p>6.1.0</p>	<p>CONSENT FOR APPROVAL</p>	
<p>6.1.1</p>	<p>Chair's Urgent Actions Report Non Gwilym, Interim Director of Corporate Governance</p>	

	The Trust Board CONSIDERED and ENDORSED the Chair's Urgent Action taken between 20 th September 2024 and 21 st November 2024.	
6.1.2	<p>Commitment of Expenditure Exceeding the CEO Limit Non Gwilym, Interim Director of Corporate Governance</p> <p>One item of expenditure had been included for Trust Board approval (Renewal of Contract for HLA Typing by Next Generation Sequencing (NGS)).</p> <p>As a number of queries were raised in relation to inconsistencies regarding the dates noted within the paper, it was accepted that an oral response was insufficient and that the paper would be updated with correct details outside the meeting.</p> <p>The paper was withdrawn and the Trust Board:</p> <ul style="list-style-type: none"> • Did not AUTHORISE the Chief Executive to APPROVE the award of the contracts summarised within this report and supporting appendix. • Did not AUTHORISE the Chief Executive to APPROVE requisitions for expenditure under the named agreements. 	MB
6.1.3	<p>Alder House Increase of Rent (NWSSP) Andrew Nash, NWSSP Surveyor</p> <p>Stephen Harries queried the date of the increase in annual rent noted in the paper (effective from the 10th December 2023) and delay in the paper being presented to the Board.</p> <p>Andrew Nash advised that the rent review had been undertaken for December 2023, based on the application of RPI uplifts for the previous 5 years. As notification of the uplift was not received from the Landlord until several months later, payment of the new rent commenced (backdated to December 2023). The paper was being presented to the Trust Board at the first available opportunity following the NHS Wales Shared Services Partnership Committee.</p> <p>Shared Services Finance colleagues were content that the calculations to agree the RPI had been calculated and applied correctly, prior to issue of the Rent Review Memorandum.</p> <p>Andrew Nash confirmed that the building is the main Shared Services office in North Wales and therefore serves an administrative function.</p> <p>The Trust Board APPROVED the increase in annual rent for lease contract at NWSSP Alder House, St Asaph.</p>	
6.1.4	<p>Extension of Charnwood Court Lease (NWSSP) Andrew Nash, NWSSP Surveyor</p> <p>Gareth Jones raised a minor point of accuracy; while the cover paper referenced a 'Heads of Terms' as the appendix, a Counterpart Lease had been attached. This, however, did not affect the approval of the lease.</p> <p>The Trust Board formally APPROVED the lease extension and signing and sealing thereof on behalf of NWSSP.</p>	

6.1.5	<p>Trust Policies for approval Non Gwilym, Interim Director of Corporate Governance</p> <p>The Trust Board APPROVED the following amended / new policies for adoption within the organisation:</p> <ul style="list-style-type: none"> • WF01 NHS Wales Respect and Resolution Policy • WF08 NHS Wales Managing Attendance at Work Policy • WF16 Welsh Language Policy • WF57 Flexible Pension Policy 	
6.1.6	<p>Amendment to Standing Orders – Schedule 3 Annual Review Committee Terms of Reference Non Gwilym, Interim Director of Corporate Governance</p> <p>The Trust Board APPROVED the revisions to the Terms of Reference and Operating Arrangements in respect of the Transforming Cancer Services Programme Scrutiny Sub-Committee.</p>	
6.2.0	CONSENT FOR NOTING	
6.2.1	<p>Approved Policies Update</p> <p>The Trust Board NOTED that policy IG10 VUNHST Mobile Phone Policy had been approved by the Quality, Safety and Performance Committee at its meeting held on 14th November 2024.</p>	
6.2.2	<p>Public Audit Committee Highlight Report (17/09/2024)</p> <p>The Trust Board NOTED that the paper had not been received and would be brought to the next Trust Board meeting.</p>	
6.2.3	<p>Public Strategic Development Committee Highlight Report (22/10/2024)</p> <p>The Trust Board NOTED that the paper had not been received and would be brought to the next Trust Board meeting.</p>	
6.2.4	<p>Public Transforming Cancer Services Programme Scrutiny Sub Committee Highlight Reports (25/09/2024 & 17/10/2024)</p> <p>The Trust Board NOTED that the papers had not been received and would be brought to the next Trust Board meeting.</p>	
6.2.5	<p>Joint Commissioning Committee (JCC) Summary Report (15/10/2024)</p> <p>The Trust Board is requested to NOTED the content of the report.</p>	
6.2.6	<p>NHS Wales Shared Services Partnership Committee Assurance Report (19/09/2024)</p> <p>The Trust Board NOTED the content of the report.</p>	
6.2.7	<p>NHS Wales Shared Services Partnership Audit Committee Assurance Report (15/10/2024)</p> <p>The Trust Board NOTED the content of the report.</p>	

6.2.8	<p>Trust Seal Report</p> <p>The Trust Board NOTED the content of the Trust Board Seal Register for the period 26th September 2024 – 27th November 2024.</p>	
7.0.0	<p>Date of the next meeting</p> <p>The next public meeting of the Trust Board will take place on Thursday 30th 2025 at 10:00am.</p>	
8.0.0	<p>CLOSE</p>	
9.0.0	<p>It was noted that the following items would be addressed at the Private / Part B Session of the Trust Board:</p> <ul style="list-style-type: none"> • Minutes of previous Trust Board meetings in Private • nVCC Major Capital Scheme of Delegation • nVCC and Enabling Works Contract Approval • COVID-19 Inquiry update • Health Technology Wales Scope • Infected Blood Inquiry update • Chair's Urgent Actions Report • Commitment of Expenditure Exceeding Chief Executive's Limit • Private Committee Highlight Reports 	