South Eastern Health and Social Care Trust

| Paper No: SET/179/26 |
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| Trust Board Meeting: 30 September 2026 |
| Public Agenda Item 4.17 |

| Title of Paper: | External Report Register: Recent Additions | | |
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| ~~For Decision~~ | ~~For Assurance~~ | For Information | ~~For Discussion~~ |

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| **1.0** | **Background:** |
| | Following the Trust Board decision taken at the meeting held on 25 March 2026, external reports received between each Board meeting that have been added to the External Report Register (ERR) will be recorded in one tabled paper rather than by way of tabling each individual report for information purposes. |
| **2.0** | **Key Issues:** |
| | Since the scheduled Board meeting held on 26 June 2026, a total of **25** reports/publications have been added to the ERR as set out below.<br><br>At the Chair's request, the Committee to which each new External Report has been referred to for further consideration has also noted in bold:<br><br>- NIAO: Health Estate in Northern Ireland (**Estates SMT**)<br>- Ockenden Report: Maternity Services at Nottingham University Hospitals (**Maternity Services Oversight Sub-Committee**)<br>- Amos Report: National Maternity & Neonatal Investigation (**Maternity Services Oversight Sub-Committee**)<br>- UK Covid-19 Inquiry: Module 5 Report - Procurement (**Inquiries Recommendation Implementation Group)**<br>- DoH: Modernising Pathology Services (**Hospital Services SMT**)<br>- GIRFT: Acute Medicine Site Report for the Ulster Hospital (**Hospital Services SMT)**<br>- RQIA: A Framework for Safety Culture within HSCNI – Summary Guide for HSC Boards (**Patient Safety & Quality Committee**)<br>- Commercial Delivery Group (CDG): Major IT Projects Lessons Learnt (**Digital Health & Information Governance Sub-Committee**)<br>- RQIA: Final Report on the Expert Review of Records of Deceased Patients (Inquiries Recommendation Implementation Group)<br>- National Commission on Regulating AI in Healthcare (**Digital Health & Information Governance Sub-Committee**)<br>- Pivotal: Improving the Institutions of the NI Executive (**EMT**)<br>- DoH: Strategic Business Plan 2026/27 (**EMT**)<br>- DoH: Infected Blood Payment Scheme Update (**EMT)**<br>- DoH: Health Inquiries Annual Report 2025/26 (**PPI SMT**)<br>- DoH: 'Our Pact' (Children's Social Cre Services Reform Programme) (**Children's Services SMT**)<br>- DoH: Making Life Better (MLB) Key Indicators Progress Update 2026 (**PPI SMT)**<br>- DoH: Making Life Better (MLB) – Thematic Action Plan to Refresh and Reshape Collaborative Action to Improve Health & Reduce Health Inequalities (**PPI SMT)** |

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| | - DoH: Independent Neurology Inquiry (INI) Implementation Update (**Inquiries Recommendation Implementation Group**)<br>- DoH: Breastfeeding Action Plan 2026-2029 (**Hospital Services SMT**)<br>- NICCY: 'Rights Without Borders' - Examining Safeguarding Rights for Asylum Seeking and Refugee Children in Northern Ireland (**Children's Safeguarding Committee**)<br>- NI Assembly Public Accounts Committee: Report on Major IT Projects in Northern Ireland (**Digital Health & Information Governance Sub-Committee**)<br>- UK Thirlwall Inquiry: Review of Events at the Countess of Chester Hospital following the trial of former neonatal nurse Lucy Letby (**Nursing & Midwifery Executive**)<br>- GMC: Northern Ireland National Report 2025 (**Medical Director's Office**)<br>- DoH: 'Designing Homes for All' – An Inclusive Design Guide to Support People Living with Cognitive and Sensory Impairment (**Estates SMT**)<br>- Patient & Client Council (PCC): Advocacy: A Call to Action Thought Paper (**Patient Safety & Quality Committee**) |
| **3.0** | **Link to Strategic Objectives:** |
| | Our People ☒<br>Population Health & Health Inequalities ☒<br>Delivering Care Closer to Home ☒<br>Hospital Care ☒<br>Safety, Quality and Experience of Care ☒ |
| **4.0** | **Resource Implications (inc Organisational, Financial, Human Resources):** |
| | 1. Organisational |
| | None identified at this stage. |
| | 2. Financial |
| | None identified at this stage. |
| | 3. Human Resources |
| | Relevant members of staff will be required to assist in the review of each publication and co-ordination of actions arising from each. |
| | 4. Environmental Factors Yes ☐ No ☒ |
| **5.0** | **Impact on Safety, Quality and Experience (SQE):** |
| | 1. Safety |
| | N/A |
| | 2. Quality |
| | By remaining alert and proactive to incoming external reports highlighting best practice, this will have an overall positive impact on SQE within the Trust. |
| | 3. Experience |
| | N/A. |

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| **6.0** | **Key Risks and Proposals to Mitigate:** |
| | 1. Key Risks |
| | Failure to identify key lessons or recommendations listed in an external report. |
| | 2. Proposals to Mitigate |
| | The inclusion of each report onto the External Report Register together with a record of the relevant Committee to which it has been referred to allows the External Report Sub-Committee to seek assurance, track and monitor progress against relevant recommendations as appropriate. |
| **7.0** | **Risk Register:** |
| | It is listed on BAF? Yes ☐ No ☒<br>Is it listed on CRR? Yes ☐ No ☒ |

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| **Lead Director:** | **Professor Stephen Kirk, Medical Director & Professor David Robinson, Deputy Chief Executive, Executive Director of Nursing, Midwifery & AHPs and Director of Support Services** |
| **Date:** | **23 September 2026** |

**Reasons for Paper Presentation**

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| ***Decision*** | *Used when an item requires a formal agreement or endorsement by the meeting / committee members. Examples are approving minutes, budgets, proposals or policies.* |
| ***Assurance*** | *Used when an item can be measured against a certain criteria / standard. Examples are a project is on course with delivery or financial targets are being met.* |
| ***Information*** | *Used when an item is presented for the purpose of updating or informing the attendees without requiring a decision or action, such as reports, updates, or announcements.* |
| ***Discussion*** | *Used when an item is listed primarily for open discussion, brainstorming or gathering input from the members without requiring an immediate decision.* |