



**ANNUAL REPORT OF BOARD COMMITTEE EFFECTIVENESS:
GOVERNANCE ASSURANCE COMMITTEE 2023/24**

1.0 Introduction

- 1.1 As part of the Governance Assurance Committee's Annual Programme of Work, the Committee is required to review its Terms of Reference under which it operates as well as consider its overall effectiveness as a Committee. The Committee is also required to give consideration to reviewing the operation of its Programme of Work.
- 1.2 This Annual Report brings together an overview of the outcome of the work of the Committee as well as narrative on its achievements throughout the year.
- 1.3 The Report will be presented to the Committee at its meeting on 21 August 2024 in draft form for consideration and amendment (as required) before being tabled at the next available Trust Board meeting for noting

2.0 Chairperson's Foreword: Mr Norman McKinley MBE (Non-Executive Director)

- 2.1 This is my first Committee Annual Report as Non-Executive Chair having succeeded Dr Maura Briscoe following her retirement from Trust Board in February 2024. I wish to pay particular tribute to Dr Briscoe for her dedicated and impactful service to the Committee and for assisting me in stepping in to this new role. I would also wish to record appreciation to Mr Maynard Mawhinney who also retired from Trust Board in January 2024 and played an active part in the work of this Committee for so many years.
- 2.2 As a new Non-Executive Director to Trust Board, I would first and foremost wish to commend the dedication of Trust staff to their individual and collective contribution to healthcare delivery over the course of 2023/24. As Chair of the Trust's Governance Assurance Committee, I would also record my thanks to Committee Members and staff colleagues who continue to contribute to our important work.
- 2.3 I am satisfied the Committee has discharged its duties in line with its agreed Terms of Reference and Programme of Work. In line with best practice, the Committee will continue to closely review and refine its Programme of Work to ensure the Committee is in a position to provide robust assurances to Trust Board and the Accounting Officer that a sound system of internal control is in place.
- 2.4 A major shift in the Trust's approach to integrated governance took place during 2022/23 with the merging of the Trust's Integrated Governance Strategy and Board Assurance Framework into one document. The Framework is now embedded into our governance practices and adding value to our internal control environment. A key development within the Committee was the addition of a new standing item for

the consideration of the Board Assurance Framework (Risk Document), Corporate Risk Register and Directorate Risk Registers on an agreed schedule so all Directorates are reviewed on an annual basis.

- 2.5 The Integrated Governance & Assurance Framework was officially launched in June 2023 marking a significant milestone in the Trust's integrated governance journey. A staff guidance document was also made available for staff highlighting their role and responsibilities within the Trust's governance arrangements.
- 2.6 During 2023/24, the Committee made dedicated time to consider the preparations for the implementation of the new encompass programme which went live on 9 November 2024 across the Trust. The Committee also agreed to receive updates from the newly formed Maternity Services Oversight Group in respect of the implementation of an agreed Composite Action Plan. The Committee continued to take a keen interest in developments arising from the UK Covid-19 Inquiry and the outworking of the Report by the Independent Neurology Inquiry (INI) with regular updates being provided to Members on the Trust's activities in respect of these matters alongside oversight of progress made in terms of IHRD implementation.

3.0 Membership of Committee

- 3.1 Membership of the Committee comprises all Executive Management Team (EMT) members (11 in total as of 31 March 2024) (an increase of 1 position during the course of the reporting period) together with five Non-Executive Directors (including the Chair of Trust Board) as of 13 February 2024 and eight Non-Executive Directors as of 1 March 2024.
- 3.2 In the Report for the period ending 31 March 2023, there was one Non-Executive Director vacancy on the Committee. By way of update, DoH appointed a number of new Non-Executive Directors to Trust Board in January and February 2024. Mr Norman McKinley MBE was appointed to the Committee in February 2024 and succeeded Dr Briscoe as Chairperson upon her retirement later that month. Mr Kieran Donaghy, Mrs Anne Quirk and Mr Raymond Havlin joined the Committee as Non-Executive Director members as of 1 March 2024. The 2023/24 Terms of Reference were reviewed and approved by the Committee at its meeting on 19 July 2023 and approved by Trust Board on 30 August 2023. The revised Terms of Reference now includes provision for all Non-Executive Directors so all Trust Board Members will now sit on this Committee going forward.
- 3.3 During 2023/24, the Committee also expanded its EMT membership following the reconfiguration of what had been the post of Executive Director of Nursing into two new roles to which Dr David Robinson was appointed Executive Director of Nursing, Midwifery & AHPs and Director of Patient Experience (as of 1 April 2024) and Mrs Clare-Marie Dickson joining as Director of Primary Care & Older People's Services also in April 2024. Mr Marc Neil also joined the Committee having succeeded Dr Robinson as Director of Unscheduled Care, Medicine & Cancer (as of 1 April 2024). Dr Robinson and Ms Thompson, Director of Finance & Estates, were also Deputy Chief Executive during 2023/24 alongside their substantive roles.

- 3.4 As mentioned in the Chairperson’s Foreword, the Committee bid farewell to Mr Mawhinney & Dr Briscoe as two long-standing Non-Executive Directors in January & February 2024 respectively. Members wished to record their thanks and appreciation for their collective and individual contributions to the work of the Committee over many years.
- 3.5 The Board Secretary (or their nominee) is in attendance at all meetings to provide the secretariat to the Committee and the Head of Internal Audit is invited to attend meetings as an observer up to twice a year.
- 3.6 Appendix 1 hereto details the membership of the Committee and their attendance at meetings during 2023/24. 75% attendance is expected of all Members (as per the Governance Controls Assurance KPI).
- 3.7 At times, there may be conflicting priorities for Members due to the scheduling of other important meetings which require senior Trust representation. This was particularly acute during the run-up to and the roll-out of the new encompass programme in November 2023. In line with all other Board Committees, a number of key staff members were released from their obligation to attend meetings to facilitate tasks associated with what was the most complex digital transformation project ever before undertaken by HSCNI. All Members are and remain committed to attending and participating actively in meetings on a regular basis or nominating a deputy (where possible) if they are unable to attend.
- 3.8 EMT Members absent for unavoidable reasons but with agenda items before the Committee table written briefings for consideration at the relevant meeting in agreement with the Chairperson and facilitated by the Board Secretary.

4.0 Frequency of Meetings

- 4.1 Meetings are held on a quarterly basis. During 2023/24, three meetings were held: 19 July 2023, 18 October 2023 and 17 January 2024. There would ordinarily be four meetings held annually but meetings during 2023/24 were scheduled to align better with the work of the main Sub-Committees so more timely and relevant information can be tabled at Committee meetings.—The ‘fourth’ meeting ordinarily held in March of each year fell into April 2024 and outside this reporting period.

5.0 Remit of Committee

- 5.1 The Committee’s remit is reviewed on an annual basis and last considered as part of its Terms of Reference review on 19 July 2023 before being approved by Trust Board on 30 August 2023.
- 5.2 There were revisions of the previous Terms of Reference to maintain alignment with the Integrated Governance & Assurance Framework (IGAF), the Revised Code of Conduct & Code of Accountability of ALB Chairs & Board Members (October 2022), NI Audit Office Board Effectiveness Good Practice Guide (June 2022) and in accordance of the HSC Board Members Handbook published by the Department of Health (DoH) (May 2021).

5.3 In order to discharge this remit, the Committee maintains a Programme of Work which is reviewed on an annual basis and considered on 15 March 2023 for the 2023/24 period. The Programme of Work was then revised and presented again to Committee on 18 October 2023.

A copy of the Programme of Work 2023/24 is attached at Appendix 2 hereto.

Remit	How is this discharged by the Committee	When last performed
<p>The Committee will review the maintenance of an effective system of integrated governance and internal control across the Trust's activities (both clinical and non-clinical) that supports the achievement of the Trust's objectives.</p> <p>This will include regular review of governance infrastructure (including recommendations where appropriate to ensure on-going efficiency and effectiveness</p> <p>The Committee holds delegated authority to approve named strategies & documents listed in its Terms of Reference</p>	<p>Implementation of the Committee's annual Programme of Work (PoW) including receipt of quarterly reports on Risk Management incorporating detail on Complaints received.</p> <p>Preparation of an Annual Report on the Committee's work and effectiveness.</p> <p>Creation and embedding of a new Integrated Governance & Assurance Framework (IGAF).</p> <p>Risk Management Strategy</p> <p>Sub-Committee End-Year Reports 2022/23 & PoWs 2023/24</p> <p>Integrated Governance & Assurance Framework (IGAF)</p> <p>BAF Risk Document</p> <p>Governance Statement</p>	<p>PoW approved by Committee on 25 March 2023 for 2023/24. A revised version was approved on 18 October 2023. Risk Management Reports were tabled at each meeting for consideration.</p> <p>Approved by Committee on 19 July 2023 for the period ending 31 March 2023 and tabled for noting at Trust Board on 30 August 2023.</p> <p>Committee approved the IGAF on 15 March 2023 for launch in Q1 2023/24 which took place in June 2023.</p> <p>Revised Strategy for 2022-25 approved by Committee on 18 October 2023.</p> <p>End-Year Reports & PoWs approved by Committee on 19 July 2023.</p> <p>Approved by Committee on 15 March 2023.</p> <p>Approved by Committee in template format in December 2022 and considered at each meeting in detail thereafter.</p> <p>Mid-Year Statement presented to Committee on 17 January 2024.</p>

<p>The Committee will report to Trust Board annually</p>	<p>Information Governance Annual Report 2022/23</p> <p>Coronial & Litigation Services Annual Report 2022/23</p> <p>Complaints & Compliments Annual Report 2022/23 (also to be approved by Trust Board)</p> <p>Risk Management Annual Report 2022/23</p> <p>Health & Safety Annual Report 2022/23</p> <p>Preparation of an Annual Report on the Committee's work and effectiveness</p>	<p>Presented to Corporate Governance Sub-Committee</p> <p>Presented to Corporate Governance Sub-Committee</p> <p>Approved by Committee on 19 July 2023 then Trust Board on 30 August 2023.</p> <p>Approved by Committee on 18 October 2023.</p> <p>Approved by Committee on 18 October 2023.</p> <p>Approved by Committee on 19 July 2023 for 2022/23 & tabled at Trust Board on 30 August 2023.</p>
<p><u>The Committee will review:</u></p> <p>The adequacy of the underlying assurance processes that indicate the degree of the achievement of corporate objectives, the effectiveness of the management of Principal Risks & the appropriateness of the disclosure statements. This will also include the adequacy of the Board Assurance Framework (BAF) Risk Document, the control and assurance mechanism in place, and additional action taken to address gaps in controls and in assurance.</p>	<p>Quarterly Review of Corporate Risk Register (CRR) Reports.</p> <p>New initiative – Review of Directorate Risk Register (DRR) Reports on an annual schedule so each Directorate is reviewed.</p> <p>Principal Risk Document template created and developed.</p>	<p>Following the implementation of the new BAF Risk Document, Members reviewed the composite BAF Risk Document/CRR Quarterly Update at each meeting.</p> <p>Following the implementation of a new DRR schedule and standing agenda item, Members now review DRR Reports at each meeting to allow for a 'deep dive' review of Directorate-specific risks.</p> <p>Committee approved the new Risk Document on 21 December 2022 and its implementation is now complete with much positive feedback from Members as to its layout and detail provided.</p>

	<p>Appropriate escalation measures in place.</p> <p>Creation and embedding of a new Integrated Governance & Assurance Framework (IGAF)</p>	<p>A new Escalation Pro-Forma has been developed and is in place as of December 2022 and now rolled out to all other Board Committees.</p> <p>SQIIC initiated an item for escalation in relation to Choking Incidents reviewed by Committee on 17 January 2024.</p> <p>Committee approved the final version of the IGAF on 15 March 2023 for launch in Q1 2023/24 Trust-wide which took place in June 2023.</p>
<p>The adequacy of all governance and risk management and control related disclosure statements (including the Governance Statement).</p>	<p>Input to the Mid-Year Assurance Statement and Governance Statement</p>	<p>Circa April/October each year. Dr Briscoe noted at the Committee's review of the Mid-Year Assurance Statement in January 2024 that this was an important document for new NEDs to review in explaining internal control divergences. This was incorporated into the new NED induction programme.</p> <p>Members monitored progress made to respond to concern within the remit of the Committee arising from the Report with Those Charged with Governance (RWTCWG) 2022/23 & its Priority 1 recommendation relating to the Internal Control environment.</p> <p>Trust Board considered in detail Management responses on 31 May 2023 and actions implemented throughout 2023/24 to achieve improvement.</p>

<p>The adequacy of the policies for ensuring compliance with the relevant regulatory, legal and Code of Conduct requirements (including the Trust's Standing Orders).</p>	<p>Review & propose amendments to Standing Orders and Standing Financial Instructions</p> <p>Monitoring progress towards an agreed DoH ALB Partnership Agreement.</p>	<p>Trust Board approved stand-alone Standing Orders & Standing Financial Instructions on 22 February 2023.</p> <p>Going forward, Committee will take forward the reviews of Standing Orders with the Finance & Performance Committee leading on Standing Financial Instructions.</p> <p>Members received regular updates noting receipt of a draft Agreement in January 2024 with a final version signed after the reporting period in June 2024.</p>
<p>The adequacy of strategies for integrated governance</p>	<p>Creation and embedding a new Integrated Governance & Assurance Framework (IGAF).</p>	<p>A significant review led to the Committee endorsing the IGAF on 21 December 2022 & approving the final version on 15 March 2023. The IGAF was launched Trust-wide in June 2023.</p>
<p>The annual PoWs for both the Corporate Governance Sub-Committee and Safety, Quality Improvement & Innovation Sub-Committee.</p>	<p>Approval of Sub-Committee annual PoWs.</p>	<p>Both PoWs approved by Committee on 19 July 2023.</p>
<p>In carrying out its work, the Committee will primarily utilise the work of Internal Audit. It will also seek reports and assurances from other Committees, Directors and Assistant Directors concentrating on the overarching systems of integrated governance, risk management and internal control together with indicators of their effectiveness.</p>	<p>Receipt and review of relevant Internal Audit Reports on Governance & Risk Management.</p> <p>Via Chair of Governance Assurance Committee (Dr Briscoe until 13 February 2024 thereafter Mr McKinley) and Chair of Audit Committee (Mr Brady) sitting on both Governance Assurance & Audit Committees.</p>	<p>The Committee dedicated time on 19 July 2023 & 17 January 2024 to consider Internal Audit findings.</p> <p>Attendance at Governance Assurance and Audit Committee meetings during 2023/24.</p>

<p>This will be evidenced through the Committee's use of an effective Board Assurance Framework (BAF) to guide its work. The Committee shall have the flexibility to scrutinise in depth particular high risk areas identified through the BAF or other assurance functions.</p>	<p>Creation and embedding of a new Integrated Governance & Assurance Framework (IGAF)</p>	<p>A significant review led to the Committee endorsing the IGAF on 21 December 2022 & approving a final version on 15 March 2023. The IGAF was launched Trust-wide in June 2023.</p>
<p>Other Assurance Functions</p> <p>The Committee shall review the findings of other significant assurance functions (both internal and external to SET) and consider the implications for its governance.</p>	<p>Receipt and review of relevant Internal Audit Reports on Governance & Risk Management.</p> <p>Via Chair of Governance Assurance Committee (Dr Briscoe until 13 February 2024 thereafter Mr McKinley) and Chair of Audit Committee (Mr Brady) sitting on both Governance Assurance & Audit Committees.</p>	<p>The Committee dedicated time on 19 July 2023 & 17 January 2024 to consider Internal Audit findings.</p> <p>Attendance at Governance Assurance & Audit Committee meetings during 2023/24.</p>
<p>These will include, but will not be limited to, any reviews by DoH commissioned bodies, the Regulation and Quality Improvement Authority (RQIA) or professional bodies with responsibility for the performance of staff or functions.</p>	<p>Consideration to relevant reviews as they become available.</p>	<p>RQIA was commissioned to examine the application & effectiveness of Serious Adverse Incidents (SAI) process with their Review published in July 2022 & considered by Committee in October 2022.</p> <p>Mrs McNally sits on a regional group taking forward aspects of this work and provided relevant updates throughout 2023/24 as to its progress.</p> <p>Trust Board Members welcomed senior DoH representatives to their meeting on 27 September</p>

		2023 to be advised of progress being made by the DoH SAI Redesign Team in the development of a Framework for Learning & Improvement from Safety Events.
The Committee will review the work of other Trust Committees whose work can provide relevant assurance to the Committee's own work.	Consideration of approved minutes & End-Year Reports from both Corporate Governance Sub-Committee & Safety, Quality Improvement & Innovation Sub-Committee.	Approved Minutes of each Sub-Committee tabled for noting at the next Committee meeting. 2022/23 End-Year Reports were tabled at Committee on 19 July 2023.

5.0 Reporting Arrangements

Reporting Arrangements	How Discharged
<p>Committee deliberations formally recorded and submitted to Trust Board.</p> <p>Committee Annual Report/Review of Effectiveness submitted to Trust Board commenting on:</p> <p>All items below in section 5.0 of this Report included in Annual Report:</p> <ul style="list-style-type: none"> • Fitness for purpose of the Assurance Framework • Completeness and embeddedness of Risk Management • Integration of governance arrangements 	<p>Minutes documented by the Board Secretary (or nominee).</p> <p>Approved Minutes submitted for noting at the next scheduled Trust Board meeting following Committee approval.</p> <p>Yes: included in Committee PoW.</p> <p>Annual Report approved on 19 July 2023 & tabled at Trust Board on 30 August 2023.</p> <p>Yes: approval of a new IGAF in March 2023 which was launched Trust-wide in June 2023.</p> <p>Yes</p> <p>Yes approval of a new IGAF in March 2023 which was launched Trust-wide in June 2023.</p>
<ul style="list-style-type: none"> • Appropriateness of self-assessment of Organisational Controls Assurance (OCAG) & other relevant standards. 	<p>Yes: End-Year Position 2022/23 presented to Committee on 19 July 2023 & Mid-Year Position 2023/24 on 18 October 2023.</p>

7.0 Other Matters

Committee should be supported by the Board Secretary	Yes: Board Secretary (or their nominee) in attendance at all meetings.
Papers and agenda issued in sufficient time for consideration by Members in advance of each meeting.	Yes: Papers issued no later than five days prior to each scheduled meeting date.

8.0 Conclusion

Following discussion at the Governance Assurance Committee on 21 August 2024 and based on the information presented in this Report, Members concluded they were satisfied the Committee had carried out its duties appropriately during the year 1 April 2023 to 31 March 2024.

9.0 Recommendations

There were no recommendations for action made by the Committee as a result of this Report or discussion at its meeting held on 21 August 2024

Table 1 – Summary of Members attending Governance Assurance Committee Meetings 2023/24

Members		Total	KPI - 75% attendance (2/3 meetings)			
		19 July 2023	18 October 2023	17 Jan 2024	%	
<u>Non-Executive Directors</u>						
Jonathan Patton	Chair of Trust Board	✓	Apology	✓	66%	
Dr Maura Briscoe	Chair of Governance Assurance Committee	✓	✓	✓	100%	
Noel Brady	Chair of Audit Committee	Apology	✓	Apology	33%	
Maynard Mawhinney	Non-Executive Director (resigned 15 January 2024)	✓	✓	N/A	100%	
Joan O'Hagan	Non-Executive Director	✓	Apology	✓	66%	
<u>Executive Management Team</u>						
Charlie Martyn	Medical Director	Apology	Apology	✓	33%	
David Robinson	Deputy Chief Executive, Executive Director of Nursing, Midwifery & AHPs and Director of Patient Experience	Apology	Apology	✓	33%	
Maggie Parks	Director of Surgery, Elective Care, Maternity & Paediatrics	✓	Apology	✓	66%	
Clare-Marie Dickson	Director of Primary Care & Older People's Services	✓	✓	✓	100%	
Rachel Gibbs	Director of Adult Services & Healthcare in Prison	Apology	✓	✓	66%	
Claire Smyth	Director of People & Organisational Development	✓	✓	✓	100%	
Roisin Coulter	Chief Executive	Apology	Apology	Apology	0%	
Lyn Preece	Director of Children's Services & Executive Director of Social Work	✓	Apology	✓	66%	

Helen Moore	Director of Planning, Performance & Informatics	Apology	Apology	✓	33%	
Wendy Thompson	Deputy Chief Executive, Director of Finance & Estates	✓	✓	Apology	66%	
Marc Neil	Director of Unscheduled Care, Medicine & Cancer	Apology	Apology	✓	33%	
<u>In Attendance:</u>						
Martine McNally	Board Secretary	Apology	Apology	✓	33%	
Catherine McKeown	Head of Internal Audit (attends 2 per year)	-	-	✓	100%	

GOVERNANCE ASSURANCE COMMITTEE PROGRAMME OF WORK – 2023/4

MONTH	COMMITTEE STANDING AGENDA ITEMS	OTHER ACTIVITY
April – June 2023		Consideration of Internal Audit Plan (Governance & Risk Management issues) with Internal Audit Input into the draft Governance Statement Approved Minutes to Trust Board
July 2023	<p>Board Assurance Framework/Corporate Risk Register</p> <ul style="list-style-type: none"> - End of Year Position 2022/23 - Preparation for Year Ahead 2023/24 - Encompass Programme <p>Directorate Risk Registers</p> <ul style="list-style-type: none"> - Committee Schedule 2023/24 <p>Sub-Committees</p> <ul style="list-style-type: none"> - Annual Programmes of Work 2023/24 - End of Year Position Reports 2022/23 (including outcomes) - SQIIC & CGC minutes <p>Governance Assurance Committee</p> <ul style="list-style-type: none"> - Annual Report & Review of Effectiveness 2022/23 - Terms of Reference 2023/24 <p>Risk Management</p> <ul style="list-style-type: none"> - Q4 2022/23 Report (inc Complaints Details) <p>Organisational Controls Assurance</p> <ul style="list-style-type: none"> - End of Year Position 2022/23 <p>Annual Reports for Approval</p> <ul style="list-style-type: none"> - Complaints & Compliments Annual Report 2022/23 <p>Updates</p> <ul style="list-style-type: none"> - Inquiry into Hyponatraemia Related Death (IHRD) Oversight Group - Maternity Services Oversight Group - Independent Neurology Inquiry (INI) Task & 	

	<ul style="list-style-type: none"> - Finish Group - Third Party Report Register - Internal Audit Findings <p>Items for Escalation from Sub-Committees or to Trust Board</p>	
October 2023	<p>Board Assurance Framework/Corporate Risk Register</p> <ul style="list-style-type: none"> - Q1 2023/24 Report - Encompass Programme <p>Directorate Risk Registers</p> <ul style="list-style-type: none"> - As per schedule <p>Sub-Committees</p> <ul style="list-style-type: none"> - SQIC & CGC minutes <p>Risk Management</p> <ul style="list-style-type: none"> - Q1 2023/24 Report (inc Complaints Details) <p>Organisational Controls Assurance</p> <ul style="list-style-type: none"> - Mid-Year Position 2023/24 <p>Annual Reports for Approval</p> <ul style="list-style-type: none"> - Risk Management 2022/23 - Health & Safety 2022/23 <p>Assurance Statement</p> <ul style="list-style-type: none"> - Programme for Mid-Year Statement <p>Board Governance Self-Assessment Tool</p> <ul style="list-style-type: none"> - Programme for BGSAT completion <p>Updates</p> <ul style="list-style-type: none"> - IHRD Oversight Group - INI Task and Finish Group - Maternity Services Oversight Group - Internal Audit Findings <p>Items for Escalation from Sub-Committees or to Trust Board</p>	<p>Comment and input to the Mid-Year Assurance Statement</p> <p><i>Internal Audit to attend meeting</i></p> <p>Approved Minutes to Trust Board</p>
January 2024	<p>Corporate Risk Register</p> <ul style="list-style-type: none"> - Q2 2023/24 Report - Encompass Programme <p>Directorate Risk Registers</p> <ul style="list-style-type: none"> - As per schedule <p>Annual Reviews</p> <ul style="list-style-type: none"> - Board Assurance Framework (BAF) - Risk Management and Integrated Governance Strategies 	<p>Approved Minutes to Trust Board</p>

	<p>Sub-Committees</p> <ul style="list-style-type: none"> - SQIIC & CGC minutes <p>Risk Management</p> <ul style="list-style-type: none"> - Q2 2023/24 Report (inc Complaints Details) <p>Organisational Controls Assurance</p> <ul style="list-style-type: none"> - Update Position 2023/24 <p>Assurance Statement</p> <ul style="list-style-type: none"> - Mid-Year Position (final version for noting) <p>Organisational Controls Assurance</p> <ul style="list-style-type: none"> - 2022/23 End of Year Position <p>Updates</p> <ul style="list-style-type: none"> - IHRD Oversight Group - INI Task & Finish Group Oversight Group - Maternity Services Oversight Group - Internal Audit Findings <p>Items for Escalation from Sub-Committees or to Trust Board</p>	
March 2024	*Quarterly meeting moved from March into April to allow for better alignment with Sub-Committee and Trust Board reporting periods.	

Gov Ass Com – final POW 2023/24 (following amendment October 2023)