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Ymddiriedolaeth Brifysgol GIG  
Gwasanaethau Ambiwylans Cymru  
Welsh Ambulance Services  
University NHS Trust

## MINUTES OF THE MEETING OF THE PUBLIC FINANCE AND PERFORMANCE COMMITTEE HELD ON 17 MARCH 2026 IN THE CARDIFF MRD AND VIA TEAMS

### Meeting started at 09:30

#### MEMBERS:

Jayne Beeslee	Non-Executive Director and Chair
Peter Curran	Non-Executive Director
Bethan Evans	Non-Executive Director

#### PRESCRIBED ATTENDEES:

Matthew Dugdale	Assistant Director of Commercial Development
Carl Kneeshaw	Director of People
Rachel Marsh	Executive Director of Strategy, Planning & Performance (From item 13)
Trish Mills	Director of Corporate Governance/Board Secretary
Damon Turner	Trade Union Partner
Liam Williams	Executive Director of Quality and Nursing

#### ATTENDEES:

Nathan Couch	Audit Wales ( <i>observing for item 11</i> )
Keith Dorrington	Assistant Director Digital ( <i>deputising for Jonny Sammut</i> )
James Houston	Assistant Director for Planning and Transformation
Osian Lloyd	Head of Internal Audit, NWSSP
Alex Payne	Corporate Governance Manager
Ed Roberts	Interim Assistant Director of Finance ( <i>deputising for Chris Turley</i> )
Sonia Thompson	Assistant Director of Operations ( <i>deputising for Lee Brooks</i> )

#### APOLOGIES:

Lee Brooks	Executive Director of Operations
Hugh Parry	Trade Union Partner
Jonny Sammut	Director of Digital
Chris Turley	Executive Director of Finance and Corporate Resources

## OPENING ITEMS

### 1. CHAIR'S WELCOME, APOLOGIES AND QUORUM

- 1.1 Apologies were received as set out above. Quorum was confirmed.
- 1.2 Adjustments to the timing of agenda items were discussed and it was noted that item 12, Rurality, had been deferred to the next meeting.

### 2. DECLARATIONS OF INTEREST

- 2.1 There were no other declarations recorded.

### 3. MINUTES OF PREVIOUS MEETING 20 JANUARY 2026

- 3.1 The minutes of the public meeting of the Finance and Performance Committee held on 20 January 2026 were received and approved.

### 4. ACTION LOG AND MATTERS ARISING

- 4.1.1 The Action Log was reviewed and discussed with updates added to the log.

#### 4.1 AAA HIGHLIGHT REPORT 20 JANUARY 2026

- 4.1.2 The AAA Highlight Report from the meeting held on 20 January 2026 was noted.

## ITEMS FOR ASSURANCE, DISCUSSION OR APPROVAL

*The numbering of items in the minutes do not match the agenda numbering, due to items being presented non-sequentially at the meeting.*

### 5. FINANCIAL REPORT MONTH 10, 2025/26 FINANCIAL POSITION FOR MONTH 11, 2025/26

*The papers for this item in relation to the financial performance at month 10, 2025/26 are in the committee pack in iBabs and on the Trust's website, therefore detail of the content is not repeated here.*

- 5.1 Ed Roberts presented an overview of the Month 11 financial position, key assumptions and risks, confirming that the Trust was reporting an underspend of £100,000 against budget, with a small planned in month overspend. The capital plan remains on track and there was a slight overachievement of £27,000 against the savings target. The Public Sector Pay Policy is on track with 98.4% of non-NHS invoices paid within 30 days against a target of 95%. There has been accelerated expenditure from Trust Reserves due to rebasing of balance sheet provisions through the year which has been offset against planned expenditure.
- 5.2 There has been movement of finance and corporate resources in relation to the removal of the Welsh Risk Pool costs, a small overspend against general losses and a shortfall on interest receivable due to cash balances being lower at certain times of the year. Work is ongoing with Welsh Government and the Joint Commissioning Committee to ensure this does not reoccur in the next financial year. Recurrent savings have been underachieved in-year while nonrecurrent schemes have been overachieved, with work to increase recurrent savings and reduce non-recurrent savings ongoing.
- 5.3 The Trust is on track to deliver its savings targets across all budgets, with all cost pressures mitigated and all risks now removed due to assurance that the Trust will be able to deliver its forecasted financial position by 31 March.
- 5.4 The committee received an update on the Welsh Government "Grip and Control" checklist, with Ed Roberts confirming that many of the measures outlined within it already form part of the Trust's routine financial management and assurance processes. Ed advised that the checklist would be reviewed in detail at a future meeting of the Financial Sustainability Programme Board to ensure that all required controls are fully captured and that no gaps exist.
- 5.5 The committee discussed the appropriate governance route for the Grip and Control work as well as the need to avoid duplicating work between committees and streamlining the reporting pathway, noting that elements of the checklist relate to broader organisational controls that may be more appropriately overseen by the Audit and Risk Assurance Committee (ARAC).
- 5.6 Trish Mills, Ed Roberts and Carl Kneeshaw took an action to review the Grip and Control checklist following its assessment by the Financial Sustainability Programme Board, and to provide a recommendation on the most appropriate governance route to ensure the board is properly assured without duplication within the Trust's governance framework.

- 5.7 Ed Roberts gave an update on the Month 11 capital programme, confirming that delivery remained on track with only minor slippage in some schemes, largely due to seasonal factors such as weather. Assurance was given that the capital position was monitored daily and there is confidence that the Trust will fully deliver the capital programme against the approved capital expenditure limit.
- 5.8 Peter Curran congratulated the finance team on their effective financial management and sought assurance on whether the large volume of capital spend appearing towards year end carried any risk of underspend or potential clawback from Welsh Government. Confirmation was given that there was no risk of this happening, with all items tracked daily, and year-end spend managed. Substantial capital activity had already been completed, sighted and signed off, and current progress, pipeline deliveries and receipting activity gave strong assurance that the yearend capital programme will be fully achieved.
- 5.9 Members discussed the need to continue tight management of the capital programme will be needed next year and noted emerging geopolitical impacts on non-pay inflation, particularly fuel costs, which had already increased in-year and were identified as a material risk for 2026-027, requiring close monitoring through financial planning and in-year oversight.

**The committee:**

- **Noted and gained assurance in relation to the Month 10 revenue financial position and performance of the Trust as at 31 January 2026.**
- **Noted the delivery of the 2025-26 savings plan, and the context of this within the overall financial position of the Trust.**
- **Noted the capital programme for 2025-26 and the Month 10 Welsh Government monitoring return submission (as required by Welsh Government).**

**6. INTERNAL AUDIT REPORT BUDGET SETTING [REASONABLE ASSURANCE]**

*The papers for this item are in the committee pack in iBabs and on the Trust's website, therefore detail of the content is not repeated here.*

- 6.1 The committee took assurance from the Internal Audit report on budget setting, which provided a reasonable assurance opinion. Ed Roberts thanked the Internal Audit team for their thorough work and engagement. It was noted that many of the audit recommendations were in progress.
- 6.2 As Chair of ARAC, Peter Curran welcomed the report's findings and confirmed that the discussion at ARAC had been positive, highlighting the

strong alignment between budget and actual performance which showed confidence in the robustness of the Trust's approach to budget setting.

- 6.3 Osian Lloyd added that similar reviews had been undertaken across several NHS Wales organisations and that a summary thematic report drawing together learning and good practice would be issued later in the year.

**The committee received and took assurance from the Budget Setting Internal Audit report and from the discussion at the meeting of the ARAC on 2 March 2026.**

**7. FINANCIAL SUSTAINABILITY REPORT**

*The papers for this item are in the committee pack in iBabs and on the Trust's website, therefore detail of the content is not repeated here.*

- 7.1 Carl Kneeshaw provided an update on the Financial Sustainability Programme, noting that the intensive focus on savings development has slowed progress on some longer term financial sustainability actions.
- 7.2 Matt Dugdale updated on the Trust's commercial activities, confirming that the Commercial Plan has now been significantly developed and endorsed by the Commercial Steering Group. The plan will shortly undergo wider engagement and will be presented for approval to the Finance and Performance Committee in May 2026. Matt highlighted progress on strengthening the capacity to support commercial activity, with funding for the Applications Development Team and a Business Development Manager roles having been approved.
- 7.3 Trish Mills reflected on the recent meetings of the Commercial Steering Group, noting that the discussions now taking place are substantially different in tone and depth compared to earlier stages of the commercial programme. The Trust now has an agreed open risk appetite for delivering exceptional value and a keen risk appetite for innovation, which is helping to shape thinking about commercial opportunities and organisational tolerance.

**8. INTEGRATED MEDIUM-TERM PLAN (IMTP) DELIVERY/ASSURANCE UPDATE 2025/26**

*The papers for this item are in the committee pack in iBabs and on the Trust's website, therefore detail of the content is not repeated here.*

- 8.1 The committee was assured that previous feedback provided by members has been acted upon, with future reporting reorganised to align deliverables with the Trust's strategic objectives, giving clearer Board level sight of progress against strategic priorities.
- 8.2 Progress continues across Clinical Model Transformation (CMT) workstreams, including the establishment of a Benefits Realisation Steering Group and an upcoming workshop to articulate benefits associated with the programme. The CMT Internal Audit review (below) provided reasonable assurance, which was a positive outcome. The Health Transport workstream remains amber, and this workstream is likely to be paused next year to enable focus on a new Non-Emergency Patient Transport Service (NEPTS) improvement programme.
- 8.3 Members sought assurance regarding the six red-rated items, asking whether Welsh Government would be content with their deferral and whether the organisation had sufficient capacity to carry them into next year. James Houston confirmed that the prioritisation process for 2026–27 has been undertaken with directorate involvement to ensure the new plan is realistic, deliverable and within organisational capacity, and that the forthcoming Q4 report will provide clear evidence and justification to support the Welsh Government submission. It was confirmed that roll-overs are expected within three-year rolling IMTPs and are aligned with Welsh Government expectations.
- 8.4 The Chair asked for clarification on the prioritisation of the IMTP deliverables and whether a critical path had been identified, seeking assurance that the dependencies and sequencing had been examined, so that committee members could clearly understand the plan's key focus areas. The committee were assured that a clear roadmap is already in place and that further refinement will continue as part of ongoing planning. Members were assured that the significant reduction in planned deliverables and ongoing prioritisation means the revised plan is deliverable within available capacity.
- 8.5 The Chair queried the presentation of yellow-rated items, noting that the narrative did not always explain the reason for this status. James agreed an action for future reporting to ensure that all yellow-rated IMTP deliverables in future assurance reports include a brief narrative explaining the reason for the caution rating (e.g., delays, capacity constraints, dependencies, or other issues), rather than using generic wording such as "no change." This will aid the committee to understand the nature of the caution rating and distinguish these items more clearly from green deliverables.

**9. INTERNAL AUDIT REPORT: CMT PROGRAMME MANAGEMENT  
[REASONABLE ASSURANCE]**

*The papers for this item are in the committee pack in iBabs and on the Trust's website, therefore detail of the content is not repeated here.*

- 9.1 The committee received the Internal Audit report on programme management for the Clinical Model Transformation (CMT) programme, which gave a reasonable assurance opinion. The committee were assured that actions to strengthen governance arrangements were progressing for many of the improvement areas highlighted. As Chair of ARAC, Peter Curran confirmed that the audit had been well received at the Committee.
- 9.2 During discussion, an action for James Houston was agreed for the Project Definition Document (PDD) for the CMT programme to be circulated to Non-Executive Directors in line with the Internal Audit recommendation. It was noted that this was the only outstanding recommendation

**The committee received and took assurance from the CMT Programme Management Internal Audit report and from the discussion at the meeting of ARAC on 02 March 2026.**

**10. MONTHLY INTEGRATED QUALITY PERFORMANCE REPORT (MIQPR)**

*The papers for this item are in the committee pack in iBabs and on the Trust's website, therefore detail of the content is not repeated here.*

- 10.1 James Houston provided the MIQPR update for January and February and outlined key performance movements across 999, 111, emergency response and NEPTS. A refreshed MIQPR format is expected to begin reporting from Q1 2026/27, with further iterative improvements planned over the following 6 to 12 months.
- 10.2 The Chair sought clarity on the timeline for the revised MIQPR and how information would be routed from committees to the board, emphasising the need for a clear flow of assurance, ensuring each committee receives the indicators relevant to its remit to avoid duplication or gaps in reporting. Trish Mills gave assurance that this alignment work is underway, with meetings scheduled between herself, Rachel Marsh, committee chairs and committee executive leads to map committee metrics alongside digital and information governance indicators, to the most appropriate governance route. The intention is to create consistent, streamlined and strategically aligned reporting approach across committees, improving clarity and reducing unnecessary papers as the new MIQPR arrangements embed.

## **11. DIGITAL REPORTING MARCH 2026**

*The papers for this item are in the committee pack in IBabs and on the Trust's website, therefore detail of the content is not repeated here.*

- 11.1 Keith Dorrington introduced the digital update and highlighted continuing pressure on digital capacity alongside strong progress across several areas.
- 11.2 Members discussed ongoing capacity pressures within Digital Services, particularly due to work supporting CMT and CAD (computer aided dispatch) priorities. Members also discussed the paused 111 digital front end, recognising its linkage to the 2026/27 budget position and the current assumption of no further investment, emphasising the need for a clear impact assessment of not progressing this work, to support evidence-based decisions and inform forthcoming budget considerations.

**The committee acknowledged the contents of the paper and were assured on the progress of the Digital Plan activities, IMTP commitments and CMT involvement of the Digital Directorate teams.**

## **12. INFORMATION GOVERNANCE REPORTING MARCH 2026**

*The papers for this item are in the committee pack in iBabs and on the Trust's website, therefore detail of the content is not repeated here.*

- 12.1 Keith Dorrington presented the Information Governance (IG) update, highlighting an escalation relating to the Paxton DPIA issue, and confirming that an action plan had now been developed to resolve the associated risks. There has been continued strong performance in core IG compliance areas with the IG Toolkit score maintained at 90% and mandatory IG training compliance at 91%, exceeding the 85% target. Progress on policy development has been made.
- 12.2 Members discussed the data breach involving electronic patient care record data loss, discovered in January 2026 and received confirmation and assurance that the matter had been fully reviewed, that mitigation was underway, and that the situation was being managed in line with information governance requirements. Members were advised that patient survey recommendations from the Information Commissioner's Office have been considered, and the adoption of SMS-based methods for collecting patient experience feedback has been discussed.

**The committee considered the contents of the paper and determined they provide assurance on the progress of the Trust's Information Governance arrangements and related specialist activities for Data Quality, Records Management, Freedom of Information requests and Information Security.**

**13. INTEGRATED MEDIUM-TERM PLAN (IMTP) 2026-2029 INCLUDING FINANCIAL PLAN 2026-27**

*The papers for this item are in the committee pack in IBabs and on the Trust's website, therefore detail of the content is not repeated here.*

- 13.1 Rachel Marsh presented the draft 2026–29 IMTP, highlighting that the plan reflects extensive engagement across the organisation and a significant reduction in deliverables, reduced from 160 to 47, to ensure clarity of focus and deliverability. Further work will be required to ensure activity removed from the central IMTP is appropriately managed within directorate business-as-usual processes. The plan is framed around the Trust's six strategic objectives and supported by a detailed mapping exercise that aligns the deliverables to commissioning intentions, the Well-being of Future Generations Act, and other statutory and strategic drivers. Rachel confirmed that the financial plan underpinning the IMTP is currently based on achieving £9 million in savings for 2026–27, and that this remains subject to refinement as the financial position evolves. Members were assured that engagement had been strong with leaders, staff and partners throughout development, and supported by two Board development sessions that enabled appropriate shaping of the plan.
- 13.2 Rachel updated the committee on feedback from the Joint Commissioning Committee (JCC) that she had attended that day, confirming that while some partners queried whether the Trust should seek further savings to support wider system pressures, the overall response was supportive and commissioners appeared content with the Trust's proposed £9m savings requirement, while signalling an expectation of increased scrutiny in future years.
- 13.3 Peter Curran referred to the four areas where further investment is not being proposed and asked whether work has been done on impact assessments, if there are any immediate implications that the committee should be aware of and how this will be communicated to stakeholders so that they have clarity on this. Assurance was given that each decision had been made through a process of prioritisation, with each area requiring system-wide solutions rather than local investment alone. It is likely that digital front-end development will progress at system level because Welsh Government has asked for funding to be released to support this work

across Wales. Clarification was given that impact assessments are not ordinarily produced for areas not being progressed, although it was confirmed that a Quality Impact Assessment (QIA) had already been completed for the skills-mix review to look at what it would mean for patient care.

- 13.4 The Chair emphasised the importance of having a clear and consistent approach for assessing and articulating the impact and associated risks of stopping or deferring work, both for internal assurance and for external scrutiny, and how this will be communicated. Carl Kneeshaw confirmed that a comprehensive stakeholder engagement plan is already in place to support communication around the decisions not to progress certain areas in the IMTP. Carl highlighted that he is engaged in discussions with system-level partners, including through the new HEIW strategic workforce group, to ensure a coordinated national approach to managing the wider workforce implications. He advised that, once a formal decision is signed off, the organisation has a clear plan for how and when communication will be issued, ensuring that stakeholder expectations are managed effectively and reputational risk is mitigated.
- 13.5 The Committee were assured that confirmation has been received regarding the 2026–27 pay award being fully funded by Welsh Government and this formed the basis for the financial modelling within the IMTP and the revenue budget paper. The Trust is undertaking detailed process-mapping work against the current PTR regulations, with a full gap analysis planned for April.
- 13.6 The Chair welcomed the structure of the IMTP, highlighting the importance of ensuring the revised set of deliverables is clearly aligned to the Trust's six strategic objectives, requesting that this is made clear in reporting. She asked whether the Trust's agreed risk appetite could also be woven through this alignment to strengthen the connection between objectives, deliverables and organisational tolerance and suggested further refinement of the "plan on a page" to make it more accessible and focused on strategic objectives, key deliverables and critical dependencies for committee oversight. The Chair received assurance that all 'plans on a page' for each strategic objective have now been completed and future iterations of the IMTP will present deliverables clearly grouped under the six objectives.
- 13.7 Peter Curran asked for assurance about the assumptions made in the budget regarding non-pay inflation, given the current geopolitical situation. Ed Roberts acknowledged that the Trust is already experiencing upward pressure on costs and steps have been taken to mitigate wider inflationary risks, with no further Welsh Government funding expected for this. The

Committee received assurance that trends are being monitored closely and the assumptions within the budget are the best available based on current intelligence, with recognition that there remains a degree of residual risk.

**The committee:**

- **Noted progress made in developing the 2026-29 IMTP**
- **Endorsed the draft IMTP and financial plan for submission to Trust Board for its meeting on 26 March 2026.**

**14. WAST INITIAL REVENUE BUDGET 2026-27**

*The papers for this item are in the committee pack in iBabs and on the Trust's website, therefore detail of the content is not repeated here.*

14.1 The committee received the revenue budget for the forthcoming financial year, with confirmation given that it had been developed in full alignment with the financial assumptions set out in the IMTP 2026-2028. Ed Roberts explained that the starting point for the budget was a roll-forward of the current year's position, with all non-recurrent income and expenditure removed, and the 1.11% uplift from the Joint Commissioning Committee applied, on the expectation that this will be passed through Health Boards in the usual way. The impact of the Welsh Risk Pool adjustment from the current year has been factored in appropriately, with the related recurrent cost pressures now built into the base budget. The Trust will need to deliver £9 million in savings to achieve a breakeven position in 2026–27 based on current modelling.

14.2 Peter Curran asked for clarification on when the committee would receive the full capital budget for next year, noting that the IMTP includes only a high-level position and querying whether a more detailed capital plan would be brought. Ed confirmed that the full capital budget will be brought for committee and board approval as part of the May reporting cycle.

**The committee endorsed the initial 2026/27 revenue budget, consistent with the financial plan contained within the IMTP 2026-2028, and recommended it for onward approval at Trust Board on 26 March 2026**

**15. RURALITY**

This item was deferred to the May 2026 meeting.

**16. COMMITTEE ANNUAL REPORT 2025-26 AND CYCLE OF BUSINESS 2026-27**

*The papers for this item are in the committee pack in iBabs and on the Trust's website, therefore detail of the content is not repeated here.*

16.1 Meetings have been scheduled with the chairs and committee executive leads of the Finance and Performance Committee, Quality, Patient Experience and Safety Committee, and People and Culture Committee to refine the suite of performance metrics that should be reported into each committee, recognising that this work will likely lead to changes in the Cycle of Business during the year.

16.2 An action was agreed for Trish Mills to update the Committee Annual Report to correct the priorities section, which currently reflects last year's priorities in error, and to amend the noted inconsistencies (including clarification of committee membership and footnote references). The updated version will then be circulated to members for information before the report is submitted to ARAC and the Trust Board.

**The committee approved the draft cycle of business for 2026/27 and endorsed the draft committee Annual Report 2025-26, subject to the changes agreed.**

**17. RISK MANAGEMENT REPORT**

*The papers for this item are in the committee pack in iBabs and on the Trust's website, therefore detail of the content is not repeated here.*

17.1 The committee received the risk management report, and Trish Mills highlighted that the cadence of the Business Assurance Framework (BAF) review is quarterly, whereas the committee meets bi-monthly; meaning the timing of this report often results in the Committee seeing limited movement. Trish suggested the cycle of business be adjusted so that risk reports align with the risk review cycle, improving the usefulness of the assurance provided.

17.3 Members were advised that a number of actions had been closed and would appropriately move into the strengthened controls section in the next reporting period, improving clarity and demonstrating improved maturity of risk management.

17.4 The committee discussed Risk 542 *Failure to deliver the Welsh Government NHS Wales Decarbonisation Strategic Delivery Action Plan* and that it may no longer be appropriate to be a standalone risk, given similar pressures emerging across multiple statutory and regulatory requirements.

- 17.5 An action was taken for Trish Mills to review the framing of the decarbonisation risk and bring a proposal to the Finance and Performance Committee in May on whether this should remain a standalone risk or be reframed as a broader statutory/regulatory compliance risk, to include an indicative timeline for this work.

**The committee considered the contents of the report including the controls in place against the risks and the actions described to further mitigate the risks.**

## **18. AUDIT TRACKER 2025-26 Q3 REPORTING**

*The papers for this item are in the committee pack in iBabs and on the Trust's website, therefore detail of the content is not repeated here.*

- 18.1 The committee received the Audit Tracker report, with Trish Mills noting that the reduced closure rate this quarter was not directly comparable with previous periods due to the differing nature and volume of actions. Trish explained that the Governance Team had recently reviewed how audit action assurance could be strengthened and that future reporting would shift away from numerical closure updates towards clearer visibility of underlying risk mitigation, particularly where actions have slipped or been deferred.
- 18.2 The committee sought assurance that the new approach would enable better understanding of where risks remain and supported the proposed direction of travel, noting that a refreshed, more risk-focused reporting model would be brought forward through the Audit, Risk and Assurance Committee before being adopted across Committees.
- 18.3 With respect to actions related to the ICT contract management audit, the committee discussed the need for improved visibility and oversight of all high-value contracts across the organisation, to ensure consistent governance standards. Trish confirmed that work is underway to create a central register and that future Committee reports will highlight contracts above £500,000 due for renewal.
- 18.4 Osian Lloyd noted that a wider All-Wales contract management audit has generated further recommendations, with many actions managed by Shared Services Procurement. The ICT audit forms part of this broader national effort to strengthen contract management.

**The committee received assurance on the monitoring of management actions to address recommendations in the tracker and noted the updates provided to the Audit, Risk and Assurance Committee relating to the Technical Resilience, ICT Contract Management, and Vehicle Accident Management.**

**19. CCTV AND SURVEILLANCE SYSTEMS POLICY**

*The papers for this item are in the committee pack in iBabs and on the Trust's website, therefore detail of the content is not repeated here.*

19.1 The committee considered the policy presented for approval, with Trish Mills confirming it had completed the necessary governance checks and that an Equality Impact Assessment had been completed.

19.2 The Chair queried whether the current approach, where operational policies routinely come to Finance and Performance Committee for approval, was proportionate or whether a more streamlined approval pathway would be more appropriate. Trish Mills advised that a policy-transformation programme is planned, including a full review of the approvals process, policy format and quality-assurance steps, and confirmed that proposals for a revised approvals framework will be taken through the Audit, Risk and Assurance Committee, after which only policies with material strategic, governance or financial implications would come to Committees for endorsement prior to board approval.

**The committee approved and adopted the updated CCTV and Surveillance Systems Policy.**

**CONSENT ITEMS**

**20. COMMITTEE CYCLE OF BUSINESS MONITORING AND PRIORITIES UPDATE MARCH 2026**

20.1 The committee noted the Cycle of Business Monitoring Report 2025/26.

**CLOSING ITEMS**

**21. REFLECTIONS AND SUMMARY OF DECISIONS/ACTIONS**

21.1 Trish acknowledged the committee's scrutiny and the importance of ensuring that policy approval processes add value rather than administrative

burden. She recognised that the committee members' detailed reading and feedback demonstrate strong governance.

**22. ANY OTHER BUSINESS**

22.1 There was no other business discussed.

**23. DATE AND TIME OF THE NEXT MEETING**

23.1 The next meeting will be held on 19 May 2026 at 9:30am.

**MEETING CLOSE: 12.19**