

**DEPARTMENT OF HEALTH  
DEPARTMENTAL BOARD**

**Minutes of the meeting held on Thursday 19 February 2026 at 10.00hrs  
DoH 5th Floor Conference Room, Castle Buildings**

**Present:** Mike Farrar (Chair)  
David Keenan  
Dr Michael McBride  
Tracey McCaig  
Jim McCooe (NED)  
Maria McIlgorm (By MS Teams)  
Andrew Magowan (NED)  
Chris Matthews  
Aine Morrison  
Dr Paul Rice  
Peter Toogood  
Jim Wilkinson

**In attendance:** Preeta Miller (Item 5)  
Gillian Reith  
Tara McBride  
Jenny Mahood (Secretariat)

**1.0 Opening Remarks, Apologies and Declarations of Interest**

1.1 Introductions were made and the Chair confirmed that no apologies had been received. There were no new conflicts of interest to declare.

**2.0 Minutes of Board Meeting 11 December 2025**

2.1 The minutes were accepted as an accurate record and approved for publication.

### **3.0 Matters Arising and Strategic Leadership**

- 3.1 The Chair referred members to the 6 actions arising from the December 2025 Board meeting and noted that these had all been completed.
- 3.2 The Chair provided members with an update on recent budgetary developments, including the provision of a reserve claim of £400m Resource DEL for 2025/26 from HM Treasury to the NI Executive to help address the projected overspends. He confirmed that DoH would receive £185.4m. He explained that these monies would require to be repaid by the NI Executive over the next three years, and that the HM Treasury would also be undertaking an “open book exercise” to review the Executive budget and plans for change.
- 3.3 He emphasised that, despite the additional monies from the reserve claim and the significant progress that has already been made in delivering unprecedented savings and efficiencies across the system, substantial further effort was still required before year-end if breakeven is to be achieved.
- 3.4 He provided an overview of ongoing planning for the 2026/27 budget and beyond, noting that the draft multi-year budget indicates that the financial position in future years would be extremely challenging. He confirmed that the draft Strategic and Operational Planning Guidance document had been issued which sets out a clear expectation that HSC Trusts, ALBs and the DoH boards must set out and agree plans before the start of the new financial year based on a scale of 6% to 12% reduction in expenditure, along with showing how they will deliver a series of actions and expectations for improving service delivery and delivering within the HSC Reset Plan throughout 2026/27.
- 3.5 He advised that obtaining agreement on a recovery plan over the three-year budget period 2026/27 - 2028/29 would be critical to allowing managed delivery, whilst recognising that it remains exceptionally challenging and not without risk. He referred to the vital importance of implementation of the Reset Plan (including the establishment of the Neighbourhood Model) as the

vehicle to achieving financial sustainability, service change and driving efficiencies, whilst delivering improved outcomes. He pointed to the very positive progress that had already been made across the Reset Plan commitments which provides evidence of what is possible. He also reflected on the scale of success against in terms of the PfG target to reduce waiting lists in NI by 70k which had been exceeded threefold with 200k extra patients who will have been seen, diagnosed or treated by the end of the financial year.

- 3.6 A discussion followed on the importance of effective change management in delivering the Reset Plan. Members emphasised the need to build a culture and belief across all levels of the Department and the wider HSC system that meaningful change is both achievable and sustainable, despite ongoing budgetary and resourcing pressures.
- 3.7 The Chair advised that he had recently delivered a Masterclass on Change Management for staff, which had been very well received and reinforced the message that change is a shared responsibility. It was acknowledged that further work was required given the scale and pace of change, with key areas of focus including leadership at all levels, new ways of working, behavioural change, and communication. An update was provided on SPPG restructuring to support the new Neighbourhood Model, including ongoing consultation with Trade Union Side; a further update will be provided at the next meeting.
- 3.8 Members also emphasised the need for SLT ownership and continued focus on culture and readiness for change across the wider system. It was noted that a session would be arranged for DoH managers at G7 and above to take stock following the December 2025 event on “The HSC Reset Plan and what this means for us as a department”. The Chair stressed the need for the Board to understand whether belief and commitment to Reset delivery are being embedded across the Department, and it was also noted that the Board should continue to check and challenge its own ways of working.

- 3.9 It was agreed that Preeta Miller would prepare a paper for SLT on culture, belief and support for change across the Department, including how progress can be measured. It was confirmed that this work would be led by SLT, with an update to be provided to the Board at its next meeting.

**Action: Update on SPPG restructuring to be provided for the April Board meeting.**

**Action: Preeta Miller to prepare a paper for SLT on culture, belief and support for change across the Department, including proposed indicators for measuring progress. An update will be provided to the Board at its next meeting.**

#### **4.0 NICS HR Update**

- 4.1 Gillian Reith spoke on the NICS HR update paper, noting that its format and content had been revised following previous Board feedback. Members welcomed the revised report, including the dashboard information, but noted that it would be helpful to have sight of longer-term DoH Workforce trend data.
- 4.2 Members referred to the data on DoH Sickness Absence including the increase in working days lost due to Anxiety/Stress/Depression/Other Psychiatric Illnesses between 2024 and 2025 and the need to ensure a proactive approach to addressing this issue. Gillian referred to the ongoing work on implementation of the NICS Health and Wellbeing Strategy, and DoH's participation in the Cross-Departmental Working Group on Health and Wellbeing.
- 4.3 There was some discussion about the NIAO Report on Leading and Resourcing the NICS published on 27 January 2026, and members reflected on the critical role of the DoH P&OD Committee in respect of vacancy management. Members also discussed the age profile of the workforce, the need for effective succession planning and DoH's contribution to the NICS People Strategy.

**Action: Gillian Reith to include DoH Workforce trend data for a 5-year period in the next NICS HR update to the Board (if available).**

**Note: Preeta Miller joined the meeting.**

## **5.0 People Plan Update**

5.1 Preeta Miller provided an update on initiatives within the DoH People Plan 2025/26, highlighting the key actions which have progressed since the previous report to the Board at its December 2025 meeting. She confirmed that progress remains steady across most areas, however flagged that the Strategic Learning Needs Analysis (SLNA) for G5 staff required additional engagement due to non-attendance at the initial workshop. She noted that this was being actively followed up by the People and Organisational Development Team and HR to ensure G5 input is captured, and that the SLNA findings have also been incorporated into departmental planning and were already being addressed through existing masterclass activity. She confirmed that no other material risks to delivery have been identified, and a further update, including refined priorities for 2026/27, will be provided to the Board in Q1 of 2026/27.

5.2 Members noted the update and referred to the earlier discussion around culture, belief and behaviours in relation to change management and the need for the updated People Plan to support this. It was noted that the DoH People Plan does not cover SPPG staff, and that a separate update on SPPG's Ambition People Strategy Action Plan, along with input from DHCNI, would be provided at the next meeting.

**Action: Update on SPPG's Ambition People Strategy Action Plan/ input from DHCNI to be provided at the next Board meeting.**

**Note: Peter Toogood, Preeta Miller and Gillian Reith left the meeting.**

## **6.0 Finance Update**

6.1 David Keenan referred members to his paper. He provided a detailed update on the current resource expenditure position for 2025/26, setting out the

various developments impacting the funding gap since the last report to the Board. He confirmed that the projected overspend was now £26.2m, with further easements expected to be received in the coming weeks. He noted that while breakeven may be possible, at this time there was no guarantee and highlighted the risks in relation to the Utilisation of Provisions budget, primarily regarding clinical negligence. He confirmed that Finance Directorate was continuing to work closely with Trusts, BSO and the Directorate of Legal Services (DLS) to manage this situation.

- 6.2 He provided an overview of the Finance Minister's proposed funding to Health in the draft multi-year budget, noting that this was a disappointing outcome for DoH, albeit an unsurprising one given the limited amount of funding available for allocation. He noted that the reinstatement of Waiting List funding was welcome to cover inescapable pressures for red flag and time critical patients and to build essential capacity within the system, however DoH would require the certainty of this being allocated to its baseline recurrently.
- 6.3 He reiterated the significant challenges ahead, and that for 2026/27 at least, funding would have to be generated internally through savings and efficiencies to cover inescapable commitments, including pay awards. He referred to the plans requested from HSC Trusts and ALBs for the two possible scenarios of a 6% and a 12% reduction in expenditure, as well as ongoing work to review inputs to the zero-based programme budget process for future years within the Department.
- 6.4 Members commended the significant achievement in respect of the scale of in-year savings which had been delivered. They reflected on the presenting challenges for future years, and the need for ALBs to explore all opportunities for collaboration and the reduction of any duplication.
- 6.5 Discussion ensued in relation to clinical negligence, including linkages with work on Quality and Safety, the development of the Regional HSC Being Open Framework, the SENSIBLE Care Programme, investment in services,

and developments in IT and digital technologies to support clinicians' decision-making. Members agreed there was a need for further consideration of the issue of clinical negligence at a strategic level, including around management of the process and the associated budget.

**Action: Paper on Clinical Negligence to be brought to the April Board meeting for discussion.**

## **7.0 Support and Intervention Framework Update**

7.1 Tracey McCaig provided an overview of the application of the HSC Support and Intervention Framework (SIF) as at 30 January 2026, advising that there were no significant changes to highlight from the previous report.

7.2 She explained that following the closure of the SAI-related escalation in the Southern Trust in December, there was now only one common area of escalation across all Trusts, unscheduled care /hospital flow. She noted that each Trust had two escalations in this area, reducing ambulance handover delays and reducing Emergency Department waiting times, particularly waits over 12 hours and those affecting patients aged over 75. She confirmed that performance against both metrics remained unacceptable at a regional level, however, improvements in some Trusts had recent de-escalations on the SIF.

7.3 She advised that a questionnaire had been issued to HSC Trusts seeking feedback on the SIF process, with responses expected by the end of March, which would help inform the refinement of the process going forward. There was some discussion around concerns included within the SIF and those being managed via the Watching Brief Log, and the need for a judgement call to be made depending on the specifics of each. There was also discussion about regional services, and it was noted the Committee in Common was looking at areas where Trusts were committed to an overall HSC target, and how to hold themselves to account.

**Note: Peter Toogood rejoined the meeting, and Jim Wilkinson left.**

#### **8.0 Departmental Business Plan 2025/26 – Quarter 3 Update**

8.1 Chris Matthews provided an overview of the paper and members noted the update.

#### **9.0 Departmental Risk Register 2025/26 - Quarter 3 Update**

9.0 Chris Matthews referred members to the update paper and sought their agreement to the proposed rewording of Risk 8. Members noted the update and agreed to the proposed rewording of Risk 8.

#### **10.0 Departmental Business Plan 2026/27**

10.0 Chris Matthews gave a brief update on the development of the Departmental Business Plan for 2026/27. He reiterated that the plan would be focused on HSC Reset and was being developed in parallel with the ongoing work on the zero-based programme budget exercise. The HSC Reset Team is also taking forward work to make next year's plan more outcomes-focused and to ensure links with the Systems Financial Management Group (SFMG), and alignment of objectives with available capacity and resource.

10.1 There was some discussion around the potential to align Internal Audit (IA) Plans for 2026/27 with the major areas of focus for next year's Business Plan.

**Action: Chris Matthews, Jim McCooe and Andrew Magowan to meet to discuss the potential to align Internal Audit (IA) Plans for 2026/27 with the major areas of focus for the 2026/27 Departmental Business Plan.**

#### **11.0 Mid-Year ALB Assurance Update 2025/26**

11.1 Chris Matthews provided an overview of the paper. He highlighted the assurances to be taken from the investigation into the handling of the Southern HSC Trust IT Outage and dissemination of lessons learned. He also referred members to the revised arrangements for Ground Clearing and Accountability meetings which had been introduced to ensure that issues that are already being managed through the bi-monthly SIF assurance meetings

will not be revisited at Ground Clearing (unless requested by SPPG) and to streamline accountability arrangements and avoid duplication. He noted the revised process has been operating smoothly and supporting more focused discussion at Ground Clearing. He advised members of the Department's recent input to the DoF exercise to assess Departmental consideration of the review of ALBs. There was reference to the NHSC overall limited annual Head of Internal Audit report in 2023/24 and it was confirmed that both internal control and performance had been discussed at the Accountability meeting. It was noted that it may be useful for Jim McCooe and Andrew Magowan to attend a year end Accountability meeting with a HSC Trust, subject to the agreement of the Trust.

**Action: Chris Matthews to liaise with HSC Trust/s in relation to the proposed attendance of the Departmental NEDs at a year-end Accountability Meeting.**

## **12.0 SPPG Equip Programme Update**

12.1 Tracey McCaig provided a verbal update on the implementation of the Equip Programme which will bring in a new system for Finance, Procurement and Human Resources and Payroll across SPPG and the HSC. Under current plans, it is expected that the Finance, Procurement and some elements of HR will go live in September 2026, with full HR and Payroll to go live in November 2026. There was some discussion around associated risks, mitigations and contingency planning. It was agreed that there should be a presentation to the next meeting of the Departmental Audit and Risk Assurance Committee (DARAC) who will then report back and make any recommendations to Mike Farrar as Accounting Officer.

**Action: Dr Paul Rice and Karen Bailey (Chief Executive, BSO and SRO for the Equip Programme) to be invited to the DARAC meeting on 10 March 2026 to provide a presentation on the Equip Programme. DARAC to then provide an update and recommendations as appropriate to the Accounting Officer.**

## **13.0 Update on Children & Social Care Statutory Functions Compliance**

13.1 Aine Morrison provided an overview of the key findings of her report on HSC Trusts' performance on standards of compliance with Children and Social

Care statutory functions and DoH regulations, guidance and circulars within the HSC Trusts for the period 01/04/24 to 31/03/25, including her assessment of the most serious and high-risk failures to fulfil legislative requirements. She acknowledged that the time lag in the assessment process had been identified as a weakness but advised that more contemporaneous reporting on some key areas had been introduced by SPPG and interim reporting, action planning processes and ongoing performance management mitigate the disadvantages caused by the time lag.

13.2 She provided an overview of the main causes for the difficulties in meeting legislative requirements, including social work workforce challenges, increased demands on services, and a lack of appropriate service provision to meet assessed needs. She set out the various actions being taken to address issues across the Programme of Care Reform, Social Work Workforce Reform and Social Care Workforce Reform. She referred to improvements which had been made, most notably in respect of Home Care packages, and also reflected on the evidence of good Social Work practice across HSC Trusts and the significant efforts of Social Workers to ensure the law is applied with compassion and with a person-centred focus.

13.3 Members noted their concerns around the continued significant shortcomings in meeting the full range of legislative duties and agreed that more work was required to improve on this position. The Chair referred to the new Strategic and Operational Planning Guidance which included a commitment to spend more on social care, mental health and community care over the next 3 years. It was agreed that SLT should consider the report in further detail along with the response to the findings, and that an update would be provided to the Board at its next meeting.

**Action: CSWO Report on Children & Social Care Statutory Functions Compliance and the response to the findings to be discussed by SLT. Update to be provided to the Board at its next meeting.**

#### **14.0 Papers to Note/ Written Procedure Papers**

14.1 The Chair referred members to the following papers which they duly noted. Jim McCooe advised that there were still 19 Internal Audit Reports to be received before the end of the financial year, and that he was liaising with IA directly on this in his role as DARAC Chair.

- SPPG – Summary Paper for the SPPG Papers
- SPPG - Annex 1 – Governance in General Dental Services (GDS)
- SPPG - Annex 2 – Community and Voluntary Sector Annual Report
- SPPG – Annex 3 – General Medical Services (GMS) Contract Review Report
- Draft minutes of the Departmental Audit and Risk Assurance Committee Meeting held on 16 December 2025.
- Integr8 Programme Update.

14.2 The Chair confirmed that no **written procedure papers** had been issued to Board members since the previous Board meeting.

#### **15.0 AOB**

15.1 The Chair suggested that the duration of future Board meetings is extended to two and a half hours which Board members agreed.

**Action: Secretariat to issue updated calendar invites for the remaining 2026 Board meetings.**

**The next meeting is scheduled for Thursday 23 April 2026 at 10.00hrs in Castle Buildings.**