

**Minutes of the One Hundred and Forty Sixth Trust Board Meeting held on
Thursday 27th October 2022 at 10:00am, Boardroom Trust Headquarters/Via
Videoconference**

Present:

Mr Robert McCann	Chairman
Mrs Jennifer Welsh	Chief Executive
Mr Owen Harkin	Executive Director of Finance/Deputy Chief Executive
Mr Jim McCall	Non-Executive Director
Mr Gerard McGivern	Non-Executive Director
Mr Paul Corrigan	Non-Executive Director
Mr William Graham	Non-Executive Director
Mrs Suzanne Pullins	Executive Director of Nursing, Paediatrics, Women's Services & Corporate Support
Dr Dave Watkins	Executive Director of Medicine
Mr Glenn Houston	Non-Executive Director

In attendance:

Mrs Jacqui Reid	Director of Human Resources and Head of Office
Mr Kevin McMahon	Divisional Director of Surgical and Clinical Services
Mrs Audrey Harris	Divisional Director of Medicine & Emergency Medicine
Mr Neil Martin	Director of Strategic Planning, Performance and ICT
Mrs Karen O'Kane	Executive Office Manager
Mrs Diane Spence	Divisional Director of Community Care
Mrs Martina Bradley	Boardroom Apprentice

Members of the Public:

Michelle Weir	Journalist
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TB111/22 Apologies

Apologies were received from Wendy Magowan, Director of Operations, Dr Petra Corr, Divisional Director of Mental Health, Learning Disability and Community Wellbeing, Maura Dargan, Executive Director of Social Work and Nick Carson, Head of Communications.



There were no conflicts of interest declared.

TB113/22

Chairman's Report

Mr McCann referred to Minister Swann's recent correspondence regarding the financial situation and the robust focus on efficiency needed. This message was also reinforced at a recent meeting held with Mr Peter May, Permanent Secretary, Department of Health (DOH). There was a clear recognition of the pressure facing staff and an acknowledgement of their hard work. Mr McCann noted that there was a challenge for Trust Board to ensure that all activity is carried out as efficiently as possible.

Mr McCann noted that a Revised Code of Conduct and Code of Accountability for Board Members of Health and Social Care Bodies had been issued by DOH. Mr McCann said this was a timely reminder for all members to uphold the Seven Principles of Public Life; "The Nolan Principles", to declare any potential conflicts of interest and to ensure there are appropriate policies and procedures in place to enable any concerns to be raised.

Mr McCann also mentioned the recent Chairman's Awards and said that despite the challenging circumstances faced by staff, it was gratifying to see how individuals and teams continue to go above and beyond every day. He congratulated all the nominees.

Mr McCann concluded his update by asking the public to help with the pressures facing the Health and Social Care Services (HSC). Members of the public can do this by getting their Covid-19 and flu vaccinations when offered. Mr McCann advised people to help themselves, help their community and the health service.

Mr McCann reminded Trust Board that it would be usual to have a patient or client experience story at each meeting. This month, however, the story was withdrawn at the last minute. It would be on the agenda for Trust Board meetings going forward.

TB114/22

Chief Executive's Report

Mrs Welsh began her report by expressing her sincere condolences to Maura Dargan, Executive Director of Social Work and Director of



Northern Health and Social Care Trust

Children and Young People's Services, on her recent bereavement. The thoughts of all of the Senior Management Team (SMT) were with Maura and her family.

Mrs Welsh was delighted to make an official announcement at today's meeting. On 6th October 2022 interviews were held for the Directors of Community Care, Mental Health, Learning Disability and Community Wellbeing, Medicine and Emergency Medicine and Surgery and Clinical Services. Mrs Welsh was very pleased to confirm that Diane Spence, Dr Petra Corr, Audrey Harris and Kevin McMahon were successfully appointed to these posts. All four directors had been carrying out the roles on an interim basis and Mrs Welsh was delighted that their hard work and achievements, as well as a strong value base and a commitment to service users and staff, shone through at interview. Mrs Welsh noted that for the first time in a number of years the Trust had a full complement of permanently appointed senior team members. It was fantastic to have stability in the team, which is important for the senior team and across the organisation.

Mrs Welsh then reflected on an extremely busy couple of months since the previous public Trust Board meeting on 25th August. The Trust held its annual Leadership Conference on 5th September. It was a hybrid event with speakers and others taking part 'in person' from The Cottage in Ballymena and attendees joining virtually. There were a number of excellent, thought-provoking speakers and very positive feedback was received, from across the organisation. Mrs Welsh thanked Mrs Reid, Mr Carson and their teams, and all who took part.

The Trust also held a very successful Chairman's Awards on 22nd September and Mrs Welsh said it was a pleasure to be part of the final judging panel and she offered her sincere congratulations to everyone who made the final nominations stage in each category. Mrs Welsh said there was incredible work going on across the Trust and all the award winners should be very proud of how they deliver for service users. Well done to all.

On 29th September Mrs Welsh attending the graduation event for the third cohort of the Safety Quality North Programme. Mrs Welsh was delighted at the number of staff taking part in formal Quality Improvement Training and expanding the Trust's Quality Improvement faculty. There were a number of excellent poster presentations and some staff personally presented their work as well. This again



Northern Health and Social Care Trust

reflected the breadth of innovation and improvement work across the Trust. Mrs Welsh thanked all involved in the event, Mr Martin and his team, and noted that the fourth cohort had begun with the most participants to date.

The Northern Ireland Confederation (NICON) Conference had taken place on 19th and 20th October, which was a great opportunity for people across the HSC system to come together to hear local, national and international speakers. Mrs Welsh recorded her personal thanks to Mr Harkin, who stepped in for Mrs Welsh at the conference after she lost her voice.

At the beginning of week commencing 21st October, the Trust welcomed a team of assessors from Investors in People (IiP). The Trust had been formally accredited in 2018 and a light touch review was carried out every year since. A formal re-accreditation process would now take place. There was an intensive session at the beginning of the week and further meetings would be held with randomly selected staff from across the Trust. Whilst a lot of the arrangements rest with Mrs Reid and her staff, there are approximately 40 IiP champions who have played a crucial role in preparing for the accreditation. Mrs Welsh thanked her SMT colleagues for their presentations to the assessors and noted that the initial feedback was very positive.

Mrs Welsh said that, notwithstanding all of the positive news, the Trust was of course operating in a very challenging environment across a number of different service areas. Trust Board would be aware of longstanding challenges in relation to obstetric services on the Causeway Hospital site. The low number of births on the site makes it difficult for clinical staff to maintain their skills and the lack of neonatal facilities in Causeway means that all higher-risk women already give birth elsewhere. This in turn makes it difficult to recruit and retain staff in Causeway. A recent advertisement for two consultant posts in Causeway failed to attract any applicants.

The Trust has identified a number of options for the future delivery of maternity services in the Trust and, over the past few months, have been talking to Trust staff and doing in-depth modelling with the Strategic Planning and Performance Group and DOH. The Trust would like to be able to go out to public consultation soon, notwithstanding the clinical challenges that exist. This was under



active consideration and Mrs Welsh expected that the way forward would be discussed in detail at the next Trust Board meeting.

Mrs Welsh mentioned that another challenging area was unscheduled care. She said that members of Trust Board might have seen the recent media report on Ulster Television (UTV), which showed the impact caused in Emergency Departments by poor flow across the system. One element of this is in relation to the availability of various community services and support, such as home based rehabilitation, bed-based in a community hospital or nursing home, or a domiciliary care package. There would be a further coverage of the issue and Mrs Welsh thanked all the staff involved. Mrs Harris had articulated the challenges very well and Mrs Welsh looked forward to seeing the further coverage. Mrs Welsh acknowledged how difficult the situation was for patients, families and staff.

UTV had also referred to the Minister's announcement on Winter Planning, which the Trust welcomed. Mr Swann warned that the HSC system was facing another extremely difficult winter so the recent media coverage was very much in line with the statement. Mr Swann had also briefed Members of the Legislative Assembly (MLA) on winter resilience planning across the system and Mrs Welsh confirmed that there was significant work underway in the Trust. Mrs Welsh was happy to provide further details at a future workshop.

The Minister had also made a number of other announcements in recent weeks including the launch of a consultation into the potential future of Muckamore Abbey Hospital and the interim report into the Review of Children's Services. The Trust will continue to work with departmental colleagues across all of the services.

Mrs Welsh mentioned the Secretary of State, Mr Chris Heaton-Harris', statement on the commissioning of abortion services. Mr Heaton-Harris has requested to meet with all the Trust Chief Executives on the matter and Mrs Welsh will keep Trust Board apprised of any progress.

Mrs Welsh said that the wider political situation was challenging and how things would unfold was unknown. At this point, there could be an election called and the tenure of the current Minister would end on 28th October. Mrs Welsh added that Trust Board would agree that no other Health Minister has had to contend with the challenges of the pandemic, which Mr Swann has had to deal with in the past two and a



half years. Mr Swann has always been very vocal in his support for and thanks to everyone working in the HSC System. Mrs Welsh noted that Mr Swann had visited Causeway Hospital that morning to meet with different clinical teams, hearing about the challenges they face, hearing about their innovative work and taking time to thank them. In turn, Mrs Welsh put on record the Trust's thanks to Mr Swann for all he had done during his tenure as Health Minister. His undoubted popularity speaks for itself and the Trust wished him well for the future.

TB115/22 Minutes of Meeting held on 25th August 2022

The minutes of the previous meeting were approved on the proposal of Mr McGivern and seconded by Mr Corrigan.

TB116/22 Matters Arising

There were no matters arising.

(Mrs Welsh left the meeting at this stage)

TB117/22 Performance Report as 30th September 2022

Mr Martin began the Performance Report by outlining the three areas he would be concentrating on, namely, Service Delivery Plans, Dietetics and Gynaecology Cancer performance.

Mr Martin informed Trust Board members that the Service Delivery Plans (SDPs) were included in an annex of the Trust Board report and that the Trust had submitted its plans to SPPG, along with other Trusts. The plans indicate that the Trust was close to meeting the trajectory for outpatient activity, was at the anticipated level for diagnostics, was over-performing in inpatient activity and was under in day cases. Mr Martin also added that the figures for 31 and 62-day performance in cancer were not a true reflection as there was a very short reporting timeframe for the SDPs. He commented that the figures for July and August had improved significantly.

Mr Martin reported that Dietetics had previously performed well but this had slipped during September and the waiting list was growing. Mrs Harris told Trust Board that in adult dietetics there had been a concern about urgent reviews but outlying referrals were now booked and the wait was down to 27 weeks. Routine reviews were seen in 29



weeks and there were two long waits. A service manager was also in post and clinical validation of the list was being carried out. In September, however, there had been a reduction in staffing and unexpected staff leave. There had been a vacancy in the learning disability dietetic team but this was now filled and the waiting list should reduce. With regard to paediatric dietetics, the urgent waiting list has been validated and this is now down from 42 weeks to eight weeks, with the review list at 67 weeks. Mrs Harris said there was an issue with the complexity of the dietetic service as it covers a number of areas and the number of referrals has continued to increase. Approximately half of referrals are in relation to allergies, obesity and feeding issues, with an increase in referrals from nursing homes as well. Mrs Harris outlined proposals to improve service performance.

Mr Martin took some time to remind Trust Board members of the cancer pathways and how the cancer targets are measured. The performance on the 62-day target was at 35% across all specialties against a target of 95%. The performance on gynaecology was, on average, around 30% in 2021/22 but as recently as April 2022 had dropped to almost zero percent. Referrals had increased by 36% but there was no corresponding increase in resources or capacity. Red flag demand was being met. Hysteroscopy activity had increased by 1% and red flag inpatient and day cases up by 16%. In respect to the 31-day target, performance was above 80% on average.

Mrs Pullins referred to the challenges in the obstetrics and gynaecology workforce and the Trust is seeking to increase staffing. At present, the focus is on outpatient activity but the Trust was working with the Commissioner to agree funding for additional hysteroscopy sessions and at increasing the number of nurse endoscopists.

Mr Graham referred to the 14-day benchmark in the cancer section of the Service Delivery Plans. He noted that the Trust was out of step with the trajectory, with a decrease in gastroscopy and haematology. Mr McMahon advised that the change to surgery had been the Trust's decision to facilitate the impact from Covid-19. There is also an issue with the data in that it does not reflect those patients seen and discharged without attending theatre. Mr McMahon also updated on upcoming staffing changes that should improve performance. The Trust was also reviewing surgical rotas in order to enhance capacity and continuing discussions with SPPG. Mr McMahon reflected that it



can be demoralising for staff to see partial reporting of data but work continues to ensure that actual activity is captured.

Mr Corrigan mentioned that figures for staff absence in the Performance Report and in the People Report were inconsistent. Mr Martin undertook to check and update the figures.

In response to queries from Mr Houston on psychological therapies and Children and Adolescent Mental Health Service (CAMHS) performance, Mr Martin agreed to focus on these areas at the next Trust Board meeting.

Mr McCann highlighted the diagnostics performance, whereby only 25% of reporting was done within two days. He asked what was the longest wait and if senior managers were made aware of long delays. Mr McMahon did not have the detail to hand but would check on this. He said diagnostics continued to over-perform and the delays were reflective of an under-resourced service. The Trust continues to work with the Imaging Board and the Commissioners.

Mr McCann also pointed out that ambulance turnaround times had increased but overall attendances were down, and asked if there was a role for someone to help turnaround ambulances. Mr Martin and Mrs Harris said this was a very complex situation, with an increase in the number of frail elderly services users presenting with co-morbidities. There was also a need to look at the backdoor processes to deal with the increasing number of complex discharges. Mrs Harris reiterated that she was concerned about ambulance turnarounds and continued to work with the Northern Ireland Ambulance Service on service improvement, including carrying out a live audit. There is no single, easy solution. Mrs Harris also added that where any services users were waiting in an ambulance, they were all seen, triaged and treated. Not all ambulance patients are critically ill.

Mr Graham drew attention to the wording used to describe how the Trust had performed on Unscheduled Care non-elective length of stay (LOS). Mr Martin has raised the issue of the language used and said it did not recognise the complexity of the situation. He also said that LOS was not an accurate indicator. Mrs Harris provided an operational assurance on the Trust's LOS and has spoken to SPPG about the matter. The Trust continues to examine ways to improve the patient journey and ensure that every discharge is safe.



Mr Harkin presented the financial position as at 30th September and the Trust was projecting a deficit of £811,000 at year-end. The gap had reduced due to significant additional non-recurring and recurrent funding. The Trust had also achieved non-recurrent savings and would continue with cost containment measures, which would bring the position to the projected deficit figure. The Trust has also been given a target to contain spending on agency staff. Mr Harkin said the Trust would continue to work with both SPPG and DOH.

Mr Harkin also mentioned the regional position, which was projected to be an overspend of around £400 million. This will be managed by SPPG, DOH and the Minister. At this stage, Mr Harkin was not expecting a further request for savings as there would be little opportunity to make savings at this point in the financial year.

Mr Harkin confirmed that divisional positions continue as they were and that spend on non-contract agencies was an ongoing pressure, with approximately £6.4million spent on medical staffing and £16.6million on non-medical staffing. The Minister made an announcement on nurse agency usage and a new contract will be advertised, with a plan to have it in place by February 2023. Mr Harkin advised that this would be a challenge for the HSC service and that the Trust's Nurse Utilisation Group, chaired by Mr Harkin and Mrs Pullins, would be considering short-term actions. It would be difficult to achieve the £2.5million of savings in-year but Trust staff would work hard on it. The Minister had also announced the end of non-contract agency use in Social Care and the service was working with Professor Ray Jones to take forward. The use of medical locums will also be reviewed. Mr Harkin concluded that it will take time to change practices but public messages have now been issued.

In relation to Covid-19 associated spend; the projected expenditure is £19million by year-end, including £7million on personal protective equipment (PPE). This figure included the PPE provided to independent sector providers. Mr Harkin advised that he expected a challenging financial position moving forward into 2023/24 and that efficiencies might be required.

Mr McCall enquired if there would be discussions with non-contract agencies. Mr Harkin responded that this would be carried out by colleagues from the Business Services Organisation Procurement



Team. The reduction in agency staffing would be a gradual process in order not to destabilise services.

Mr Graham asked Mr Harkin what would happen at a regional level regarding the projected overspend. Would it roll forward into 2023/24? Mr Harkin replied that this would not be a decision for the Trusts. Accounting rules, however, would say this should happen.

Mr McGivern raised a query about the availability of medication and asked if there were any issues. Mr Harkin was not aware of any significant issues. Trust Heads of Pharmacy work closely on a regional basis and with DOH.

In response to Mr McCann's question on the £1 million overspend on foster care payments, Mr Harkin undertook to follow up on this. He understood, however, that this was linked to increasing numbers of Looked After Children.

TB119/22

Trust Board People Report

Mrs Reid presented the Trust Board People Report and drew attention to a number of highlights including the launch, in September, of a new Leadership Pathway Programme. Mrs Reid also reported that whilst the general absence figure had remained static, she expected that the figure would spike once Covid-19 absence is aligned to general absence reporting. The Trust's absence rate is around the middle, when compared to the other Trusts. It was also expected that Covid-19 related absence would increase over the winter period.

Mrs Reid then referred to the 8.92% staff turnover rate, which was higher than the Trust would like. Turnover was high in Estate Services, which was due to an older age profile. There had also been a number of resignations in September, including 29 nursing staff. A number of these had moved to bank shifts and there will be work carried out to understand why this happens. There has also been an increase in the number of temporary staff, which could be reflective of managers preferring to use internal processes.

Mrs Reid concluded her reporting by saying there had been a gradual increase in the number of appraisals carried out, and a new process was being tested on a pilot basis. Charitable Trust Funds had been invested in support for staff, including those with long Covid symptoms. Mr Corrigan welcomed the move to include Covid-19 absence in general reporting and inquired as to when homecare



absence would be included. Mrs Reid confirmed this was being reviewed regionally but she did not have a timeframe at present. Mr McGivern asked if the turnover in Estate Services would affect any planned work. Mrs Reid said that Mr Graffin had a workforce group in place and Mr Harkin added that there was no service impact, as there are temporary staff in place. Mrs Reid informed Trust Board that Mrs Chambers, Assistant Director of Human Resources, was working with the Nursing Bank Office to look at internal processes to attract staff from the non-contract agencies.

Mr Graham referred to some recent reports in the media about staff concerns in other Trusts. He asked Mrs Reid if the Trust had any particular areas where there were staffing issues. Mrs Reid said it was difficult to know but the Trust has seen a decrease in employee relations cases and there was a focus on team working and development. Mr Graham further asked if there were any plans in place for those areas where it was hard to retain staff. Mrs Reid stated that a new Head of Resourcing, Mrs Lindsay Taylor, had recently been appointed and would be taking forward all aspects of recruitment, including areas of attrition.

Mrs Pullins indicated that the vacancy rate for Band 5 nursing posts was around 12%. Mrs Pullins and her staff were examining options to recruit and retain nurses. This would be a focus for the Nurse Utilisation Group.

TB120/22 Mid-Year Assurance Statement

Mr Harkin presented the final draft of the Mid-Year Assurance Statement, a draft of which had been submitted to DOH, and was for Trust Board to approve. The draft had been discussed at the recent Audit Committee meeting. Mr Harkin reported that the internal control divergences had been updated, with one new divergence added on reporting of Serious Adverse Incidents (SAI).

Mr Houston asked when the Trust expected the Radiology Lookback exercise to be fully completed. Dr Watkins responded that he was hopeful that the final SAI report would be available in the next several weeks and this would come to the Assurance Committee in due course.

Mr Corrigan queried what the process for oversight of Regulation and Quality Inspection Authority (RQIA) Reports was. Mr McCann



advised that these would come to Assurance Committee and the reporting arrangements for these would be discussed at the next meeting.

Mr McCann asked about the recommendations concerning the radioactive report and Mr Harkin confirmed this would be updated in line with the next report from Internal Audit.

Trust Board approved the Mid-Year Assurance Statement for submission to DOH.

TB121/22 Annual Quality Report

Dr Watkins outlined the purpose of the Annual Quality Report and noted that the draft document had been discussed at Assurance Committee in September. Dr Watkins drew attention to a number of highlights, including a new section on learning from Covid-19. Dr Watkins said it was a very user-friendly format and thanked the Governance Team for their hard work in producing the report.

Mr Corrigan said the report contained a lot of information but it was good to see it presented altogether. It showed how extensive and varied the services provided by the Trust are. Mr Corrigan commended the report and all the staff involved. He did, however, draw attention to page 12 and commented that the number of incidents reported had increased by 18% and the number of SAls had increased slightly. Mr Corrigan asked if this was due to increased training and reporting or if performance had deteriorated. Dr Watkins said the 2020/21 comparator figure was quite low but he expected that the 2021/22 and 2022/23 figures would be a more accurate reflection.

Mr Graham asked if the Trust were an outlier in respect of any international or national audits, would this be highlighted. Dr Watkins agreed that this would be flagged and addressed but it was not an area of concern.

Mr McCall commended the document and asked if there was a role for Non-Executive Directors in the Leadership Walk Rounds, as these are important for staff. Dr Watkins said he had no particular view but he was very conscious of the demands on their time.

Trust Board approved the Quality Report.

- Refurbishment and Operationalisation of Galgorm Accommodation

Mrs Spence spoke to this resubmitted Business Case, which was seeking approval of additional funding to refurbish and operationalise the recently acquired Galgorm Accommodation. Following the tender process and further analysis, the costs had increased.

Mr McGivern asked if a survey had been undertaken in advance. Mr Harkin accepted this point and said this would be examined. He was also looking at options to prevent this from reoccurring. Mr Corrigan asked if there was time for the work to be completed. Mr Harkin and Mrs Spence said there was, the work would be on a phased basis over three years.

Mr McCann referred to the 40% increase in labour and supply costs over the past 10 months and asked if this should also have been anticipated and if the Trust getting value for money. Mr Harkin said there was a balance to be struck in engagement with contractors and that the region was looking at how to deal with the inflationary increase in construction costs, but that the tendering process still offered assurance regarding value for money. Mr Harkin said there was still an advantage in doing the work sooner than later.

Trust Board approved the Business Case.

- Replacement of Mid Ulster Theatres Ventilation and Air Handling Unit

Trust Board approved the business case for the replacement of the 50-year-old ventilation system in the Mid Ulster Hospital, which was not compliant with current standards.

- Main CT Replacement Causeway Hospital 2022/23

Mr McMahon presented this business case for additional work required to facilitate the new CT Scanner in Causeway Hospital. The additional funding requested was £152,000 and was within the capital allocation. Mr Corrigan asked if these costs should have been anticipated. Mr McMahon said it was a new standard but the team should have been aware.

Trust Board approved the business case.

TB123/22 Principal Risk Document

Trust Board noted the principal risk document.

TB124/22 Capital Report as at 30th September 2022

Trust Board noted the Capital Report as at 30th September. Mr Graham requested that Trust Board be provided with an example of a completed post project evaluation (PPE). Mr Martin agreed to consider further at the Performance and Finance Committee.

Mr McCann noted that there was no change in the number of outstanding PPEs and there appeared to be no progress in getting these completed. Mr Martin undertook to review this.

TB125/22 Update on Interim Beds – Antrim Area Hospital

Mr Harkin gave a verbal update and noted that work had started on site, which was welcomed by staff. The current timeframe was to have one ward on site by the end of February and the second by May 2023. The contractor was working closely with the Trust and a workforce plan was in place. The DOH require an update on the critical friend report by the end of November 2022 and Trust Board will be kept updated.

TB126/22 Update on Mental Health Inpatient Service Capital Development

Trust Board noted that an 8% increase in space and inflation had caused an increase in costs from £88 million to £130 million. This will be subject to further discussion and work with DOH. There will be consultation carried out with the local council and neighbours and the design team issues have been resolved.

TB127/22 Committee Minutes

Minutes of Audit Committee – 15th June 2022

Mr Corrigan said these were the minutes of the end of year Audit Committee and included the approval of the Annual Accounts and Annual Report.

Minutes of Charitable Trust Funds Committee – 24th May 2022



Mr Houston said the minutes reflected the full business carried out by the committee and outlined some of the work being undertaken to amalgamate small funds.

Minutes of Strategic Change Committee – 18th August 2022

Mr McCall reported that the committee was now back to its normal pattern of meetings and they had received a very positive presentation on innovation. He added that the committee had the opportunity to take a deep dive into key issues.

TB128/22 Contract Award Report July to September 2022

Trust Board noted the contracts awarded.

TB129/22 Write Off of Losses

Trust Board noted the losses written off.

TB130/22 Use of the Trust Seal

Trust Board noted the occasions on which the Trust Seal had been used.

TB131/22 Any Other Business

There were no items of Any Other Business raised.

TB132/22 Public Questions

There were no public questions.

TB133/22 Date of Next Meeting

The next meeting will be held on Thursday 24th November 2022 at 10am.