

Minutes of a meeting of the Western Health & Social Care Trust Board held on Thursday, 5 November 2020 at 10.00 am

PRESENT

Mr S Pollock, Chair
Dr A Kilgallen, Chief Executive

Mr J Campbell, Non-Executive Director
Mr S Hegarty, Non-Executive Director
Mrs R Laird, Non-Executive Director
Rev J McGaffin, Non-Executive Director
Prof H McKenna, Non-Executive Director
Dr J McPeake, Non-Executive Director

Dr C McDonnell, Medical Director
Dr B Brown, Executive Director of Nursing/Director of Primary
Care and Older People's Services
Ms D Mahon, Executive Director of Social Work/Director of
Women and Children's Services
Mrs G McKay, Director of Acute Services
Ms K O'Brien, Director of Adult Mental Health and Disability
Services
Mr N Guckian, Director of Finance and Contracting
Mrs T Molloy, Director of Performance and Service Improvement
Mr A Moore, Director of Strategic Capital Development
Mrs A McConnell, Director of Human Resources

IN ATTENDANCE Mr O Kelly, Head of Communications
Mrs M McGinley, Executive Officer to Chief Executive

The Chair welcomed everyone to the November meeting. He reminded members that a workshop would follow today's meeting.

11/20/1

CONFIDENTIAL ITEMS

11/20/2

CHAIRMAN'S WELCOME AND INTRODUCTION

The Chair referred to a report of business since the last meeting for information. He said he continued to support the Chief Executive in respect of Covid and second surge.

11/20/3

CHIEF EXECUTIVE'S REPORT

Dr Kilgallen referred to her update report.

She began by advising that the BBC Health Correspondent visited Altnagelvin Hospital on 26 October to do an inside feature on managing the pandemic from inside the hospital, highlighting the challenges faced by staff and the seriousness of Covid19. The footage was broadcast on 28 and 29 October on BBC Newsline and was carried across some of the national BBC news channels as well. In addition, Dr Kilgallen said on 3 November the BBC focussed on the Trust's workforce appeal to support the Independent Sector Care Homes. She said this appeared to have been met with success and had enabled the Trust to support care homes that face particular challenges due to staff absence.

Dr Kilgallen provided an update on Covid as at 4 November. She said there were 87 Covid19 positive inpatients with 66 of these in Altnagelvin Hospital and 21 in South West Acute Hospital. She advised that there were 11 people in ICU – 10 in Altnagelvin and 1 in South West Acute however there were high acuity patients being managed on wards.

Dr Kilgallen said it was very sad to note that there had been 70 Covid19 deaths in hospital.

Members were advised that some 1,222 staff are absence from work due to Covid19 and Dr Kilgallen commended Directorates and their teams for managing what staff are available and managing staff who are isolating. Dr Kilgallen advised that there were currently 3 wards affected by an outbreak – 2 in Altnagelvin Hospital and 1 in Waterside Hospital.

Dr Kilgallen advised at as of yesterday there were 24 Care Homes and supported living accommodation within the Western Trust area experiencing a Covid19 outbreak. She said this was 24 out of a Regional total of 121 which is close to the peak the Trust experienced in May. Dr Kilgallen said the main difference this time is the significant number of staff off self-isolating which has had a detrimental impact on service sustainability.

Dr Kilgallen said the Trust's Care Home Support Team continued to provide a superb level of timely advice and support to homes, often accompanied by the Trust's IPC team and working closely with GPs. They have drawn upon district nursing, AHPs, social workers and ambulance service to support a number of homes when they have had significant staffing challenges.

Dr Kilgallen referred to deferred surgery and assured Board members that anyone who had their surgery deferred from earlier in the week has now been rescheduled.

Dr Kilgallen led members through the detail of her report which included a briefing on:-

- Rectory Field Residential Home, Greenhaw Lodge Care Centre, The Valley Nursing Home;
- Letter to staff;
- Senior leader briefings;
- Closure of the HSCB;
- Trust Delivery Plan; and
- National Healthcare People Management Awards success.

The Chair commended the media coverage by the BBC over the 2 nights and how complimentary it was in terms of what is happening on the front line. However, he said he wanted to acknowledge that 70 families have been bereaved and on behalf of members he extended the Board's sympathy to these families.

11/20/4

APOLOGIES

Apologies were received from Dr Catherine O'Mullan, Non-Executive Director, and Mr Alan Moore, Director of Strategic Capital Development.

11/20/5

DECLARATION OF INTERESTS

There were no interests declared.

11/20/6

MINUTES OF PREVIOUS MEETING – 1 OCTOBER 2020

The minutes of the last meeting held on 1 October 2020 were proposed by Mr Hegarty, seconded by Mrs Laird and carried by the Board as a true and accurate record of discussion.

11/20/7

MATTERS ARISING

There were no matters arising.

11/20/8

CORPORATE RISK REGISTER AND BOARD ASSURANCE FRAMEWORK & UPDATE FROM BOARD WORKSHOP

Dr McDonnell referred to the Trust's Corporate Risk Register and Assurance Framework. There are 27 risks on the CRR and the Board workshop will continue after today's Board meeting.

Dr McDonnell drew members' attention to the Covid risk indicators which were recorded and which included statistics from last month and impact on workforce.

Dr McDonnell advised that incidents directly related to Covid are attended to on a daily basis. She said the Chief Executive had already referred to the challenges within Care Homes and the Trust will manage these risks.

Dr McPeake welcomed the extension of the Covid indicators and said he felt this was helpful and provided additional assurance. He referred to the supply of oxygen and the BBC report which was slightly less positive regarding the supply of oxygen for Covid patients. Dr McDonnell confirmed that the Trust did not have an issue with the supply of oxygen. Dr Kilgallen clarified that there are 2 separate issues – first the tank that holds the oxygen and the second is the pipes and flow. Dr Kilgallen said this second issue could be challenging if there were a lot of patients on oxygen which ultimately puts pressure on the pipes. Dr Kilgallen assured that there is currently no issue with the ability to manage high flow oxygen to any clinical setting and that clinicians' work with us every day so that patients are placed where they can have access to oxygen.

Mrs Molloy said this story shone a light on the very difficult issues that some of our professional and technical staff undertake in support of clinical teams. She said "supply" can be interpreted differently. She said there have been wide range of changes made in the Western Trust and across Northern Ireland as a result of learning from first phase Covid and the Trust has led the way to understanding some of the concerns with BOC and other suppliers.

Dr McPeake asked if this was less of an issue for the South West Acute Hospital. Mrs Molloy advised that the Trust was facing a level of demand for oxygen which is completely unforeseen and said there are other types of oxygen therapy for other patients across the Trust. She said there has been an unprecedented and unforeseen level of demand for oxygen.

11/20/9

INFECTION PREVENTION AND CONTROL UPDATE

Dr McDonnell referred to her update report for information. She said the IPC Team are very busy and is hoping to recruit additional staff in mid-November.

Dr McDonnell referred to a number of highlights within the paper. She referred to a pseudomonas aeruginosa colonisation of the water supply in South Wing, Altnagelvin Hospital and said this had been identified through normal routine water testing. She assured members that remedial works had been successful to date in eradicating pseudomonas aeruginosa in the water supply and that a further third cycle of water testing had returned negative results. The incident is now closed with normal water sampling and exception reporting arrangements resumed as per the Trust's Water Safety Plan.

Dr McDonnell referred members to Covid19 case statistics. She advised that from March to 27 October 2020 there have been a total of 378 Covid19 cases within the Western Trust. She said the PHA has introduced a new surveillance programme for healthcare-associated COVID-19 cases in Northern Ireland with all laboratory-confirmed cases reported to the NI regional data warehouse (via local Health Protection Teams) from 26 February 2020 onwards being included. Dr McDonnell advised in relation to outbreaks, learning is disseminated throughout Directorate safety huddles and through to Bronze and Silver teams.

Dr McDonald referred to Legionella and said a Task and Finish group is taking this forward and will be address through the normal surveillance system.

Dr McPeake referred to the growth in Legionella and said it was described as unforeseen. He asked would regular flushing not manage this. Dr McDonnell confirmed that it would however these locations are not currently in use so a process needs to be established to manage this.

Mrs Laird asked were there challenges for teams supporting the independent sector. Dr McDonnell assured that the IPC Team has been supporting the independent sector and other staff/departments. She added that the Trust has introduced Covid Safety Officers and this has been successful in providing support.

Mr Campbell referred to weekly Covid testing within care homes and said while this was to be welcomed did the independent sector have the capacity to do this. If not, he asked if the responsibility fall to the Trust. Dr Brown said this was an additional piece of work the Trust would have to give resource consideration to. He added that it had Ministerial approval. He said that more testing would inevitably result in more positive tests, more outbreaks and that this would require very careful due diligence and an intensive programme of work.

11/20/10

ENVIRONMENTAL CLEANLINESS UPDATE

Members noted the Environmental Cleanliness Audit report for the period July – September 2020. Dr Brown referred to bi-monthly, quarterly, 6 monthly and managerial audits.

Dr Brown said the information showed a good performance across all audit areas. He commenced with the bi-monthly audit reports and advised that no area scored less than 75%. He said a number of areas did not undertake audits either because the units were closed or because the areas were changed to be Covid areas. Dr Brown explained that where there was partial compliance with the area completing 1 of the 2 required audits, he could assure members that this was due to pressures being experienced. Overall cumulative compliance for the period was 98%.

Dr Brown referred to the quarterly audits and confirmed that 1 area scored less than 75% - Belleck Health Centre. He said a number of actions were being taken forward in respect of this facility and that there would be managerial follow up this week to review actions. Dr Brown referred to 3 areas that had not completed its audits and said in respect of Ward 41 terminal cleans were prioritised following Covid 19 and the Butterfly Lodge was used for inpatient care during the period. Overall compliance for the period was 98%.

Dr Brown referred to the 6 monthly audits and said overall compliance had been 90%. He referred to ICU and HDU which had a lower estates score but clarified that these areas were having some work done. He confirmed that this had been rectified. Dr Brown said there were a number of day centres and AHPs that were not operational during this period and therefore audits were not completed. .

Dr Brown concluded by referring to managerial audits and said there were no issues to report.

11/20/11

QUALITY IMPROVEMENT MONITORING – NEWS

Dr Brown led members through the quarterly report for information.

11/20/12

POLICIES

- ***Use of High Strength Potassium***
- ***Treatment of Hyperkalaemia in Adults (>16 years)***

Dr McDonnell advised that these policies were presented and approved by the Drugs and Therapeutic Committee.

Following consideration, the policies were proposed by Dr McPeake, seconded by Rev McGaffin and unanimously approved by the Board.

- ***Non-Medical Prescribing***

Mrs McKay referred to the above policy which allows suitably trained health professionals to independently prescribe drugs. It was noted that policy has been

updated in line with new national guidance and legislation and sets out a number of issues around non-medical prescribing.

Following consideration the policy was proposed by Prof McKenna, seconded by Mr Hegarty and unanimously approved by the Board.

- **CCTV**

Mrs Molloy referred to the updated policy which had been brought to Trust Board in January. She said following a number of queries the policy had been reviewed and further changes made.

Following consideration the policy was proposed by Mrs Laird, seconded by Dr McPeake and unanimously approved by the Board.

- Mobile and Home Working Policy

This policy has been deferred.

11/20/13

GOVERNANCE COMMITTEE MINUTES – 30TH SEPTEMBER 2020

Dr McPeake referred to the minutes of a meeting of the Governance Committee held on 30 September. He said the notes reflected the complexity, scope and volume of the issues that come to the Committee.

Dr McPeake said part of the Governance Committee is to provide scrutiny and look at core issues that come to it. He referred to the Trust Accountable Officer for Controlled Drugs Annual Report, the Leadership Walk Round Annual Report and the Quality Annual Report.

Dr McPeake said one of the challenges faced by the Committee in the independent documents review is how the Committee works and what consideration needs to be given to what is brought before Committee and how issues can be escalated. He said this will ensure risks are linked to the corporate risk register.

Discussion took place on the Controlled Drugs Annual Report and Dr McPeake assured members that through Ms Friel the Trust takes a very series approach to drug errors and reports every concern to ensure improvement and learning. Dr Brown also advised that the Drugs and Therapeutic Committee pays this very significant attention and said given the Trust's robust incident reporting culture, staff learn from errors.

Mrs Laird referred to the review of Muckamore Hospital and Ms O'Brien said that she would prepare a presentation for a future Trust Board meeting.

Discussion took place on anonymous complaints. Mrs McConnell said these are discussed within the People Committee and that she would discuss again at People Committee in how these should be investigated and staff supported.

11/20/14

TRUST ANNUAL QUALITY REPORT 2019/20

Dr McDonnell referred members to the Trust Annual Quality Report 19/20 for information. She said the Annual Report came to Governance Committee and was developed around themes as directed by the Region. She said the report demonstrated how staff are at using data to make improvements and how staff are improving patient engagement.

Following consideration the Annual Report was proposed by Mr Hegarty, seconded by Mr Campbell and unanimously carried by the Board.

11/20/15

FINANCIAL PERFORMANCE REPORT FOR MONTH ENDING SEPTEMBER 2020

Mr Guckian referred members to the Trust's Financial Performance Report for the month ending September 2020.

He referred to Table 2 on page 4 which outlined the Trust's financial position at month 6. Members were advised that the Trust had reduced its deficit (excluding Covid costs) by £10m. Mr Guckian said this was made up of a range of areas including delays in implementation of service developments, downturn in activity due to the pandemic and year end stock adjustments.

Mr Guckian said the Trust could expect a further reduction in this core expenditure and said another detailed review after month 8 would be undertaken.

Mr Guckian advised that the Trust has been advised that there is a funded Control Total of £19m available and the Trust will seek to get its position close to this figure over the next few months.

Mr Guckian said the Trust's overall position including Covid-19 costs is a deficit of £44m.

The Chair thanked Mr Guckian for his report and supported the view that the situation is too precarious at this point to make predictions.

Mr Campbell welcomed the financial report and commended staff for managing finances at this point in time.

11/20/16

FINANCE AND PERFORMANCE COMMITTEE – MINUTES OF MEETING HELD ON 29 SEPTEMBER 2020

Mr Hegarty led members through the minutes of the Financial and Performance Committee meeting on 29 September. He said while the minutes were outdated members had been able to receive more updated information from Mr Guckian and Mrs Molloy during the meeting.

11/20/17

PERFORMANCE MANAGEMENT INFORMATION

Mrs Molloy referred to her paper and said today she would share with members the final report for the end of the Phase 2 Rebuild programme. Overall she paid tribute to all service teams who had worked so hard during Phase 2 in returning to normal services.

Mrs Molloy assured members that the scheme to expand the Emergency Department at Altnagelvin was on track with phases 1 and 2 completed. Phase 3 is the siting of the modular building which will take place on 17/18 November and which will enable commissioning to commence up to Christmas. Final works within the existing footprint for ED will see the Department fully operational from March 2021.

Members were advised that attendances to ED fell during October due to Covid. Mrs Molloy said work was progressing on the “No More Silos” project which is being led by Mrs McKay and Dr Mullan, Associate Medical Director GP. Mrs Molloy explained that this project spanned both hospital and community and was innovative. Mrs Molloy said a specific briefing on this project will be given to the next meeting of the Finance and Performance Committee.

Mrs Molloy referred to elective care and advised that the Trust had performed well against the plan but working at a lower capacity than it has ever done. She said the Trust is concerned about the growing number of patients waiting longer and said there is discussion about how we could deliver planned care on Covid light sites. She added that the Trust is using the independent sector again for our longest waits.

In respect of the Cancer standards, Mrs Molloy advised that Mrs Cardin and Ms Tourish, Cancer Services, attended the Finance and Performance Committee this week. She said they represented the challenges in meeting standards and outlined progress in respect of the 31 day pathway and challenges of the 62 day pathway. Mrs Molloy said the Committee was delighted to be advised of the great improvements made in how we identify higher risk patients.

In respect of domiciliary care Mrs Molloy advised that all packages with the exception of 1 had been resumed. She said significant work has been undertaken to ensure this client has the appropriate provision.

Mrs Molloy referred to Endoscopy capacity and said the tender to secure external support was not successful. She said further options are being considered.

Mrs Molloy advised that there had been good performance across CAMHS and that there are plans in place for October – December which the service will continue to focus on.

Mrs Laird asked when would the Trust be advised of additional Waiting List initiative funding. Mrs Molloy said this was a matter under review by the Health and Social Care Board.

Dr Kilgallen referred to the “No More Silos” project and proposed that this briefing should come to Trust Board instead of the Finance and Performance Committee.

11/20/18

RESOURCING SERVICES AND SUPPORTING STAFF

Mrs McConnell took members through a presentation on the workforce challenges experienced by the second wave of Covid 19. She explained the context was different this time, staff were tired and had a short time to recover from the first wave, fewer people were returning and the independent sector was requiring greater support. As well as this, Mrs McConnell said this time staff were having to self-isolate for 14 days if they have been a close contact of a Covid positive person and even if that person was negative, whereas previously they could have returned to work if negative. The continuation of provision of services, alongside maintaining Covid pathways and services, is also different and Mrs McConnell gave examples such as day care and surgery continuing as far as possible.

Mrs McConnell reported the unavailable workforce at 4 November was 492 staff in Altnagelvin, 697 in Community and 189 in South West Acute Hospital. She described the range of safety issues being managed including business continuity arrangements, introducing more admin support roles and enhancing the contact tracing teams.

Mrs McConnell shared the number of applicants from the Workforce Appeal and the list of requirements was still being processed. She indicated that 50 people had already started including staff to support the Independent Sector.

It was noted that the Flu vaccination programme continues and to date 35% of front line workers have been vaccinated against a target of 75%. The Trust is running short of vaccine due to the national shortage but hope to have more supplies in the next week. Mrs McConnell described the challenges in vaccinating staff who are working from home or who are in community facilities and described how flu champions and peer vaccinators were being consulted about how to maximise the opportunities to access staff, especially in social work and the social care workforce.

The steps taken to Contact/Trace when a staff member tests positive were explained and members were assured that learning from each of these situations is fed back daily to Silver control and there are twice weekly review meetings with Occupational Health and IPC that the Director of HR attends and the Medical Director Chairs to consider learning from outbreaks and tracing.

Mrs McConnell explained the challenges of Face Fit Testing due to the changing supply of masks. She said a 7 day, extended day shift was in place to ensure staff are fitted on new masks. For a small number of staff a reusable mask, a mask designed to be reused, is being fitted as a contingency should the current supply of a discontinued mask run out. Mrs McConnell said risk assessments on this were being shared with Trades Unions. She added that the Western Trust is likely to be the first Trust to use these masks that have a filter to be changed and these will be cleaned in the Trust's HSDU – sterile unit.

Mrs McConnell continued to outline psychological support to staff, including support for teams and individuals from Psychologists and the range of webinars was described. She acknowledged this was a growing and ongoing need. She described a focussed training course for Health Champions so more local support can be available through them to staff. Financial wellbeing sessions are being rolled out along with physical and mental health programmes.

Members were advised that the Occupational Health department is challenged to maintain core services for staff who are sick, but not Covid related. Those ready to return to work are being prioritised and an external company has been secured to assist. A review of Occupational Health services is being undertaken to consider the type of services needed in the future and the skills required to support workplace health.

The Chair acknowledged the Trust's position with regard to the update on flu vaccine and said the Trust was in an improved position even if half way through the campaign.

Rev McGaffin asked if the flu vaccine was being prioritised given the limited supply. Mrs McConnell advised that staff who work in Covid areas are the priority.

Mr Hegarty referred to the update of the flu vaccine and asked was the message being received differently by different staff groups. Mrs McConnell advised that initially most of the flu vaccination clinics were in hospital but this had now changed with focus being equally on community facilities.

11/20/19

TRUST BOARD DATES 2021

The Chair asked members to note the list of Trust Board dates for 2021.

11/20/20

ANY OTHER BUSINESS

Audit and Risk Assurance Committee – 12 October

Mr Campbell advised that a meeting of the Audit and Risk Assurance Committee took place on 12 October and the minutes of the meeting would come to the December Board meeting.

Mr Campbell advised due to the pandemic Audit and Risk Assurance Committee was handled differently and it relied on Internal Audit for its assurance. He said Internal Audit had not been able to carry out a number of internal audit assignments during the period nor was it able to agree its audit plan however this had since been agreed.

Mr Campbell referred to the internal audit of domiciliary care and said a follow up audit had not taken place. However Mr Campbell said the Committee had asked for assurance and Mr Guckian will carry out an internal verification exercise which the Committee would like Dr Brown to provide assurance on for the next ARAC meeting.

Mr Campbell referred to the Trust's Governance Statement which will be reviewed by the CMT before forwarding to the DoH.

Mr Campbell referred to other highlights including a further update on BSO payroll. He said the system had continually received limited assurance however he was pleased to receive a report that the service was improving and a significant number of its limitations have been addressed.

Mr Guckian advised that the Trust has received communication from the DoH that it does not require the Trust to submit a mid-year assurance statement. However work completed to date will inform the year end assurance statement.

Mrs Laird referred to the Governance Review and said one of the recommendations was the standardising of Committee Terms of Reference. Dr Kilgallen advised that she would bring a work programme from the Governance Review to Board however, some recommendations had been delayed due to Covid.

11/20/21

DATE OF NEXT MEETING

The next meeting of the Western Health and Social Care Trust will be on Thursday, 3 December 2020.

The Chair concluded the meeting by advising that those members of the public present could raise any questions with Mr Kelly.

He underscored the exceptional difficulties the Trust is facing in the current situation and thanked Dr Kilgallen, her team and all staff for their hard work and commitment. He said the Board appreciated their commitment in difficult circumstances.

Mr S Pollock
Chair
3 December 2020