

**Minutes of a meeting of the Western Health & Social Care Trust Board held on  
Thursday, 1 April 2021**

**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 O'Mullan, Non-Executive Director

Dr C McDonnell, Medical Director  
Dr B Brown, Executive Director of Nursing/Director of Primary  
Care and Older People's Services  
Mr T Cassidy, Interim Executive Director of Social Work/Director  
of Women and Children's Services  
Ms K O'Brien, Director of Adult Mental Health and Disability  
Services  
Mrs G McKay, Director of Acute 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 M Ward, Acting Director of Human Resources

**IN ATTENDANCE**

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

4/21/1

**CONFIDENTIAL ITEMS**

4/21/2

**CHAIR'S WELCOME AND INTRODUCTION**

The Chair welcomed everyone to the April Trust Board meeting including those members of the public who had joined.

The Chair said it was good to commence a Board meeting with a little more optimism and hope given transmission rates had reduced significantly.

The Chair welcomed Mr Cassidy, Interim Executive Director of Social Work/Director of Women and Children's Services who is covering for Ms Mahon who has been seconded to the Department of Health's Mother and Baby Homes and Magdalene Laundries Co-Design Team. He also welcomed Mrs Ward, Acting Director of Human Resources.

4/21/3

**APOLOGIES**

There were no apologies received.

4/21/4

**DECLARATION OF INTERESTS**

There were no declarations of interest.

4/21/5

**MINUTES OF PREVIOUS MEETING HELD ON 4 MARCH 2021**

The minutes of the previous meeting held on 4 March were proposed by Dr McPeake, seconded by Mrs Laird and unanimously approved by members as a true and accurate record of discussion.

4/21/6

**MATTERS ARISING**

There were no matters arising.

4/21/7

**CHIEF EXECUTIVE'S REPORT**

Dr Kilgallen began her report by welcoming the decision by the Department for Communities to agree to the sale of part of the Fort George site to the Western Trust. She said this would facilitate plans for the Cityside Health and Care Centre bringing together GP and associated healthcare services in an integrated model. She added that the news followed the recent Department of Health first stage approval of the Outline Business Case for £5.4m of a potential £70m investment by the Trust at this site. She said both decisions would now allow the Trust to progress site acquisition for the necessary parcel of land at Fort George and agreements on other relevant planning aspects to ensure progression of detailed design and preparation of tender documents.

Dr Kilgallen said over the next 3 months, her Chief Executive report would focus on 5 priorities:

1. Improving access to services
2. Keeping services safe and functioning
3. Supporting staff
4. Financial stability and
5. Positioning staff for new ways of working

Dr Kilgallen took members through a detailed report outlining work against these 5 inter-related priorities.

The Chair thanked Dr Kilgallen for her superb report and the detail within it.

The Chair acknowledged the 23 March, the first year anniversary of the first pandemic lockdown and commended Marie Currie for organising such a special commemorative event. He said the past year had been horrible for so many people and families, including our staff, who had paid a heavy price having lost loved ones.

The Chair referred to rebuilding services and said that while major challenges would be faced he was pleased that the Trust had begun this work.

On behalf of the Board the Chair commended the Trust's Vaccination service and the major milestone that 100,000 people had been through the vaccination programme. He said members would appreciate the process and the level of attention and care that had been provided in reaching this position. He added that he was encouraged that 60 community pharmacies had also signed up to deliver vaccinations.

Mrs Laird offered Dr Kilgallen and staff her support in relation to the Trust's rebuild plan and for the outstanding success of the vaccination programme and commended the support in respect of psychological support for staff.

Professor McKenna referred to the ethical issues which have emerged during the pandemic and referred to the Trust's Ethics Committee which is chaired by Dr McDonnell. He said the multi-disciplinary Committee had received requests from clinicians who had sought advice, sometimes with an hour's notice, to meet to discuss very important issues and provide ethical guidance and support. He said this was an example of how an Ethics Committee should function. Prof McKenna said he also sits on the regional Ethics Committee and said he had no doubt the Western Trust had a systematic process for dealing with ethical issues and that Dr McDonnell and her team should be congratulated.

Rev McGaffin commended the support to staff and said she was pleased to see that staff were being held at the heart of the Trust. She said a healthy staff base would give a healthy base for everyone who comes into contact with Trust services.

Mr Campbell thanked Dr Kilgallen for her informative report and endorsed all the comments previously made by members. He commended the Trust's communications throughout the pandemic and said they had done an excellent job.

He said communication was very important and that he was particularly struck by the Covid edition of NOW.

Mr Hegarty commended Dr Kilgallen's report for its fantastic breadth and depth. He alluded to the Long Service Award and said it was important for the Trust to recognise these staff. He also commended the £5.4m which has been made available and the agreement that the Trust will acquire part of the Fort George site.

Dr McPeake referred to the vaccination programme and to the shortage of the Pfizer vaccination. Mrs Molloy said the Trust's requirement was for Pfizer for first doses up to and including 15 March however all subsequent vaccinations were now AstraZeneca. She added that the Department of Health was aware of what the Trust's requirement is for first doses and there are no concerns with regard to supply of AZ or supply of Pfizer for second doses. Mrs Molloy said the provision of AZ is negotiated at a 4 Nations level and that those discussions had confirmed a supply of AZ for Northern Ireland.

Dr McPeake asked if the Trust was continuing to use AZ given the concerns with regard to blood clots. Dr McDonnell assured that there was a high level of vigilance with regard to the use of AZ and said the Trust took its advice from the Chief Medical Officer. She said there are no concerns at this point that would change current practice. Dr McDonnell confirmed that there were no cases within the Western Trust.

4/21/8

### **CORPORATE RISK REGISTER AND BOARD ASSURANCE FRAMEWORK**

Dr McDonnell referred to the Trust's Corporate Risk Register and Board Assurance Framework which currently has 21 risks as approved at Trust Board on 4 March. She said following the Board workshop in October work was progressing and as a result she was sharing a number of proposals for consideration and approval today.

- Proposal to update ID57 to include ID1166;
- Proposal for a new corporate risk replacing corporate risks ID100 and ID235;
- Proposal to amend title and description of ID6 and revise category;
- Proposal to revise current risk grading for ID1207;

Dr McDonnell also shared with members an update on agreed actions from Trust Board workshop and an update on Covid19 risk ID1213 indicators.

Mrs Laird referred to risk ID6 and to the revised category. Dr McDonnell said this discussion was ongoing and said she would welcome members' views. Mrs Laird said she felt the risk should move from the category People and Resource and suggested it would be best placed in Quality of Care or Regulation and Compliance.

Following consideration the 4 proposals were unanimously approved.

4/21/9

### **INFECTION PREVENTION AND CONTROL UPDATE**

Dr McDonnell referred members to her report within papers and took members through its detail. She said the IPC Team continued to be significantly involved with the management of any suspected or confirmed cases of Covid19, the continued development of Covid19 pathways, contact tracing and processes and outbreak management. She said the IPC Team also continued to support the Independent Sector care homes in the event of any declared outbreaks.

Dr McDonnell advised that the Department of Health had not yet issued new healthcare-associated infection reduction targets for 2021/22 and alluded to current performance in respect of *C. difficile*, MRSA and GNB.

Dr McDonnell referred to the Covid19 training provided by the IPC Team and said further sessions were planned up until end of April. She said demand for this training had reduced which could be a reflection of the increased workload on the wards and the limited capacity to release staff to attend.

Dr McDonnell concluded her report by referring to the Surgical Site Infection Surveillance data.

Dr McPeake referred to the presentation of the healthcare-associated infection data and suggested that the performance data be set against targets from previous years. Dr McDonnell said she was happy to do this.

4/21/10

### **FINANCIAL PERFORMANCE REPORT FOR MONTH ENDING 28 FEBRUARY 2021**

Mr Guckian referred members to the financial performance report for the 11 months ended 28 February 2021. He said it reflected a very similar position to previous months and that the Trust continued to project a year end deficit of £12m which was within the Trust's agreed control total of £15m.

Members were advised that Covid funding continued to be released and the Trust was currently assuming a full year cost of £76m. Mr Guckian said Trust Board should be assured that the Trust will be funded in full for its Covid costs.

Mr Guckian referred to the Trust's recovery plan and said this had been largely delayed by a year however other savings opportunities had been identified on a non-recurrent basis. He added that in recent months each of the key projects had been refocussed with the aim of recommending in 21/22.

Mr Guckian corrected a small typographical error on page 7, table 4, column 6, which should read January not February.

Members were advised that 95.16% of all invoices were paid within 30 days.

Mr Guckian confirmed that financial planning has begun for 21/22 albeit Health has not received its financial allocation yet.

Concluding his report Mr Guckian advised that that Finance and Performance Committee was working with him on developing a revised reporting template for the finance information. He said he would share a revised template with members for their comments.

The Chair queried the Trust's stock of PPE. Mr Guckian assured that the Trust had made sure all arrangements in respect of masks are resolved. He added that some masks were coming to the end of their shelf life and arrangements were in process to manage this.

Professor McKenna referred to page 6 and pressure on medical and nursing pay budgets. He asked if Northern Ireland followed Scotland and awarded a 4% pay increase what impact would this have for the Trust and use of agency staff. Mr Guckian advised that any pay increase would be applicable in 21/22 and would only be affordable if the funding is allocated from the centre. He said his understanding was that the budget was allowing for a 1% pay increase however he understood that the NHS would be looking to the Pay Review Body in spring to see if there is an advance of 1%.

Mr Campbell commended Mr Guckian for his financial assurance and the excellent result in securing Covid funding and the development of associated business cases. Mr Guckian said the securing of Covid funding was as a result of work done by Directorates in developing business cases.

Mrs Laird commended all Directors for the financial position given the challenging year and sought clarity on the Trust's recovery plan and the announcement of the budget for health. Mr Guckian advised that the Trust's recovery plan was very much in place and was on target for delivery. He said the plan was updated yearly and currently the Trust was negotiating as part of its recovery plan that the DoH commit towards it. He added that there was no indication as to when the budget will be made known. He reminded members that normally the Trust does not report on month 1 financial performance due to the roll forward of budgets.

4/21/11

## **PERFORMANCE MANAGEMENT INFORMATION**

Mrs Molloy referred members to month 11 performance information against key Ministerial targets and rebuild plans. She said at May Board meeting she would provide a more comprehensive report on month 12 performance.

Mrs Molloy said today's report had been discussed at the Finance and Performance Committee earlier in the week and said that going forward in 2021/22 reports she would include in the Trust's monthly report the support the Trust is providing to the region in order to support other Trusts.

Mrs Molloy advised members that as at 23 March there were 23 Covid positive patients in Altnagelvin Hospital and 11 Covid positive patients in the South West Acute Hospital. The Trust had had 214 hospital deaths and there was 1 outbreak in a nursing/residential home.

Mrs Molloy said that February 2021 had been an incredibly pressurised month for the Trust with ICU beds continuing to be escalated about normal levels and operating as part of the Critical Care Network to share ICU pressures regionally. She said that this had constrained the Trust's ability to progress the re-instatement of the Trust's full elective theatre capacity however against this backdrop the Trust had continued to maintain emergency surgery provision treating 197 patients. She explained that with current restrictions planned theatre activity can only operate at 50% of normal capacity.

Mrs Molloy advised that the Trust is rebuilding its outpatient capacity and is continuing to see challenges with the AGP procedures which means that capacity is very much reduced.

Mrs Molloy referred to mental health services and said the Trust had faced considerable pressures particularly in acute adult inpatient services which regularly sees bed occupancy rates over 100% and with heightened acuity levels. She said there were also sustained increased referrals to adult mental health services and CAMHS.

Mrs Molloy advised that the Trust's Phase 5 rebuild plan for the period April – June had been submitted to the Health Minister for approval.

Mrs Molloy said her report today would concentrate on 4 areas:-

1. **Elective** – Mrs Molloy advised that within Northern Ireland there is a regional prioritisation oversight group which is looking at available surgical capacity in Trusts and also the independent hospitals. Mrs McKay said a number of clinicians from the Trust are involved in these important discussions.
2. **Cancer care** – Mrs Molloy advised from October 2020 referrals for the 14 day breast pathway had increased monthly and as clinic capacity had reduced due to Covid19, 92% of patients were seen within 14 days of referral with 26 patients waiting greater than 14 days with the longest wait of 28 days. She added that the Trust was continuing to deliver the rapid assessment breast clinics and was making every effort to ensure patients are seen within 14 days which includes delivering additional sessions through waiting list initiative. Mrs Molloy confirmed that the Trust had met the 31 day Ministerial target and that performance against the 62 day standard remained challenging particularly in urology and GI mainly around surgical capacity and challenges in the urology workforce. Members

were advised that in relation to Endoscopy the Trust was hoping to secure external support, but that this was not certain at this point.

3. **Unscheduled care** – Mrs Molloy advised that the Trust’s performance against the 4 hour performance standard was the same as last year and that the number of 12 breaches was reducing month on month. She advised that the regional No More Silos programme was progressing well with the expansion of ambulatory care and with the continued development of the “Phone First” initiative. Mrs Molloy confirmed that the works scheme was now complete in ED.
4. **Psychological therapies** – Mrs Molloy advised that the Trust had exceeded the psychological therapies phase 4 rebuild target for both new and review outpatients during February 2021. She said that waiting times remained challenging with a steadily worsening position. She said overtime had been deployed but the position remained very challenging. Mrs Molloy said the Trust has asked for support from waiting list initiatives for this area.

Dr McPeake referred to dementia services and to the fact that the service was not amenable to virtual patient consultations. He asked what could be done to support the service to reduce waiting times. Mrs Molloy advised that Dr Brown and his team have been working to employ additional memory nurses although this has been challenging. Dr Brown said performance was reasonable despite these challenges and the Trust had depended on locum medics. It was noted that waiting times are challenging across the region with 4 of the 5 Trusts having considerable numbers of patients exceeding the target.

Mr Campbell referred to performance against the 14 day cancer standard and asked was there a particular reason why performance in February had been 92%. Mrs McKay explained there has been an increase in referrals. She assured that in order to meet demand clinics which usually saw 12 patients had seen 20 patients. She said additional clinics had also been established. She added that a paper had been submitted to the Health and Social Care Board on how we might close the gap between demand and capacity and said there were a number of actions in relation to this.

Reference was made to performance against the 62 day standard and the significant decrease in performance to 47% in February. Dr Kilgallen advised that the issue around the 62 day standard was one where the region was working together but the impact is felt locally. Mrs McKay said the regional Prioritisation Group was considering the longest waiting cancer patients across the region and that it may be that Western Trust patients are not the longest waiting. Members were advised that the Trust had reduced bed capacity to provide cancer surgery.

Mrs Molloy advised members that the Trust had submitted to the HSCB a business case for a longer term stabilisation plan for breast services, in order to increase capacity and looking at a phased approach to waiting list funding to secure continuity until a plan for longer term stability is achieved.

4/21/12

## **SUB COMMITTEE REPORTS**

### **Finance and Performance Committee – Minutes of meeting held 2 March 2021**

Mr Hegarty referred members to the minutes of a Finance and Performance Committee meeting held on 2 March. He said the minutes were a month past and reflected on performance up to January which was 2 months past.

Mr Hegarty said the Trust was consistent with its deficit of £12m within a control total of £15m. He however asked members to remember that the Trust's opening deficit for 21/22 is likely to be £40m. He added that a request for further savings in 21/22 is not clear however the Trust needs to be focussed on this at the start of the new financial year

Mr Hegarty confirmed that the Trust's financial recovery plan is back on track as of 1 April 2021.

Mr Hegarty advised that at the meeting on 2 March, Committee had a first view of the revised finance reporting template and said Committee were able to provide feedback. He said Committee has asked for some commentary on graphs and Mr Guckian agreed to make further changes.

In respect of performance, Mr Hegarty said the Committee discussed the equalisation of waiting lists across the Region being led by the Prioritisation Group. He implored the Board to keep a clear focus on this work and said while no one can argue with clinical prioritisation across the region, it could take any potential capacity the Trust has for other services.

Mr Hegarty said the Committee would also be considering a new reporting template for performance information in due course.

Mr Hegarty advised that the Trust's rebuild plan was submitted to the DoH for the period April – June. He said he was pleased to report that the Trust exceeded rebuild projections in January.

Mr Hegarty said discussion also took place on hospital cancelled appointments, the 5 key priorities in respect of the rebuild plan and the uncertainty of funding associated with the transformation programme.

In response to the Trust's opening deficit for 21/22, Mr Guckian referred members to Table 2 within his financial performance report. He said this table showed the Trust had a recurring deficit of £40m however following Covid downturn savings and other savings the Trust's projected deficit had reduced to £33m. However, following the application of savings plans of £10m, recovery plan savings, additional funding from the DoH this had meant that the Trust's the projected deficit was reduced to £21m.

## **Audit and Risk Assurance Committee**

### **Revised Terms of Reference**

Following consideration members unanimously approved the revised terms of reference for the Audit and Risk Assurance Committee.

### **Minutes of meeting held on 8 February 2021**

Mr Campbell referred members to the minutes of an Audit and Risk Assurance Committee meeting held on 8 February. He highlighted a number of issues for members.

Members were advised that new external auditors, PWC, had been appointed and they presented its external audit strategy for 20/21. Mr Guckian provided an update in relation to the accounting treatment discussions with DoH for accruals and provisions and he and his team will prepare the Trust's annual accounts.

Mr Campbell said the Trust's Internal Audit plan was considered and Committee was confident and assured by the Head of Internal Audit's assurance for Trust Board. Mr Campbell said 5 internal audit reports were prepared with 4 receiving satisfactory assurance. He said one assignment received limited assurance which was in relation to payments to staff. Mr Campbell said the focus of the audit was the Women and Children's Directorate and said there were 2 priority 1 recommendations. He said limited assurance was provided on the basis that the control environment for timesheet processing remained insufficiently robust and the staff in post process within the Directorate was not sufficiently development. The second significant finding was due to the controls in place to validate "Staff in Post" reports which need to be reviewed and strengthened.

Mr Campbell said there is a requirement for Directorates to confirm the accuracy of their Payroll Drilldown Reports. He asked all Directorates to ask their managers to ensure this information is returned on time as there can be significant staff movement in a month. He said if Payroll is not informed of changes then that had an impact on the accuracy of payroll and would also avoid overpayments to staff.

Mr Campbell referred to the Risk Management 2020/21 audit. He said while the Committee was pleased the audit had achieved a satisfactory assurance the audit highlighted some concern with updating and regularly reviewing of Directorate risk registers. He asked Directors to ensure their risk registers are regularly updated.

Mr Campbell advised the Committee noted 2 action reports in respect of domiciliary care payments and historical overpayments and said the Committee was pleased with progress being made. He added that a follow up internal audit report would come to next meeting of the Audit and Risk Assurance Committee in May and that this work was now being treated as business as usual going forward.

4/21/13

**ANY OTHER BUSINESS**

There were no further items of business.

The Chair concluded the meeting by thanking everyone for their support at this important time and said he wanted to reiterate the progress being made into better times.

The Chair commended Dr Kilgallen on her report to members and noted the one year anniversary of 23 March as the first lock down.

The Chair hoped that all present would have a break over Easter and a time to reflect on what is important in life.

4/21/14

**DATE OF NEXT MEETING**

The next meeting of the Western Health and Social Care Trust Board will take place on Thursday, 6 May 2021.

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**Mr S Pollock  
Chair  
6 May 2021**