

Minutes of meeting of the Western Health & Social Care Trust Board held on Thursday, 6 May 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

5/21/1

CONFIDENTIAL BUSINESS

5/21/2

CHAIR'S WELCOME AND INTRODUCTION

The Chair welcomed everyone to the May Trust Board meeting and welcomed those members of the public present. He asked that any questions from the media be forwarded to Mr Kelly for response.

The Chair began by congratulating Mr Guckian who had been appointed as the next Chief Executive taking up post on 1 July. Mr Guckian said he was proud to become the next Chief Executive of the Trust and looked forward to working with the

Corporate Management Team and Board in his new role. He paid tribute to Dr Kilgallen's leadership particularly over the past 12 months which had been the most challenging time ever for HSC.

Mr Guckian advised that there would not be a financial performance update this month as the Trust was preparing its final accounts however he could confirm that the Trust's financial position was similar to that previously reported.

The Chair said during the month the Corporate Team had held another MLA briefing and that as always these were very constructive meetings.

5/21/3

APOLOGIES

There were no apologies received.

5/21/4

DECLARATION OF INTERESTS

There were no declarations of interest expressed.

5/21/5

MINUTES OF PREVIOUS MEETING HELD ON 1 APRIL 2021

The minutes of the previous meeting held on 1 April were proposed by Prof McKenna, seconded by Dr McPeake and unanimously approved by members as a true and accurate record of discussion.

5/21/6

MATTERS ARISING

There were no matters arising.

5/21/7

CHIEF EXECUTIVE'S REPORT

Dr Kilgallen referred to her report and said it continued to use the format from last month focussing on 5 priorities.

- Improving access to services
- Keeping services safe and functioning
- Supporting staff
- Financial stability

- Positioning staff for new ways of working

Dr Kilgallen provide members with further updates in respect of progress and work being undertaken across the Trust.

The Chair thanked Dr Kilgallen for her comprehensive and informative report.

5/21/8

CORPORATE RISK REGISTER AND BOARD ASSURANCE FRAMEWORK

Dr McDonnell referred members to the Trust's Corporate Risk Register and confirmed there were 19 risks as approved at Trust Board on 1 April.

She shared with members a proposal to de-escalate risk ID1227. Following consideration members approved this proposal.

Dr McDonnell provided members with an update on agreed actions from the Trust Board workshop for information.

Dr McDonnell concluded by referring to Covid 19 risk ID1213 indicators for information. She highlighted that there had been an increase in the number of vaccinations given and some increase in the number of people testing positive in the previous 7 days in the Derry City and Strabane Council area. She confirmed that Infection Prevention and Control work was still getting attention. She added that the Corporate Management Team was looking at the grading of this risk to understand how best to reflect secondary impact of Covid on waiting lists.

5/21/9

INFECTION PREVENTION AND CONTROL UPDATE

Dr McDonnell referred members to her update report within papers.

She said Covid19 outbreaks were continuing to be declared in Trust wards, departments and facilities although the number had greatly reduced over the past few weeks. She said IPC and Occupational Health were supporting the management of these incidents as applicable.

Members noted hospital acquired infection rates. The Chair referred to performance in respect of critical care device-associated infection surveillance and commended that there had been no infections for more than 2 years.

Dr McPeake thanked Dr McDonnell for providing comparison data for previous years.

Mrs Laird asked about the impact of long Covid in particular for staff. Dr McDonnell said this was recorded under health and safety of staff with a number of mitigations

described however she agreed she would draw out the impact within the narrative going forward.

5/21/10

QUALITY IMPROVEMENT MONITORING – VTE

Members noted the quarterly surveillance report in respect of VTE.

5/21/11

POLICIES

Dr McDonnell referred members to a regional suite of policies for approval in relation to:-

1. Being Open
2. Complaints
3. Adverse Incident
4. Supporting Staff
5. RIDDOR Reporting
6. Early Alerts
7. Memorandum of Understanding

Members provided comments on the policies and Dr McDonnell agreed to incorporate these changes. Members were asked if they had any further comments to forward these within the next 2 weeks. Following consideration it was agreed the policies would come back to Trust Board at its next meeting for formal approval.

Dr McDonnell advised that staff training on the policies would be provided through a combination of approaches including e-learning and face to face. She said that she would also include a communications strategy for implementing the policies across the Trust for the next Board meeting.

5/21/12

FINANCIAL PERFORMANCE REPORT FOR MONTH ENDING 31 MARCH

There was no financial report for reporting.

5/21/13

PERFORMANCE MANAGEMENT INFORMATION

Mrs Molloy referred members to her performance report. She said her report set out an overview across 2020/21, in the pattern of demand, the activity delivered to rebuild services, and the end of year position for those waiting to be seen, assessed and treated.

Mrs Molloy said that 2020/21 was dominated by the unprecedented measures taken by the Trust to respond to the Covid19 pandemic which changed across 3 separate periods of surge in community transmission, with resultant impact on Trust services. She said that many routine hospital assessments and interventions were scaled back or stood down ahead of surge 1 in order to escalate critical care capacity in ICUs and to support respiratory wards in our acute hospitals across Northern Ireland. She added that while rebuild of elective activity had commenced in June 2020, this has been affected by subsequent surges.

Mrs Molloy said it was important to acknowledge the significant efforts of service and support teams during this year.

Mrs Molloy referred members to the Covid19 key data and said it showed the surge in hospital admissions and deaths in the Western Trust area across surge 1, 2 and 3. It was noted that as of 27 April there have been 218 Covid19 deaths with the last death on 21 April and as of this date there are 19 Covid19 confirmed inpatients in the Trust's hospitals. Outbreaks in residential and nursing homes remain at a low level.

Mrs Molloy added that continuing with critical community services during surge periods has been achieved through careful prioritisation and close working with service users, carers and families and changes were made to how care was delivered in some cases. She said that these services provided vital support to nursing homes dealing with Covid19 outbreaks and to people in their own homes. Mrs Molloy continued that mental health services had faced considerable pressures particularly Acute Adult Inpatient Services with bed occupancy rates over 100% and increasing demand for Adult Mental Health Services, CAMHS and Psychological Therapies.

Mrs Molloy said as the Trust begins to rebuild its services, Working Safely as employees and with those who experience our services requires high standards of IPC and that we continue with the Covid safe practices which minimise the risk of the spread of infection in hospitals and care settings. It was noted that this impacts our productivity and capacity and affects the Trust's ability to scale up services to pre-Covid levels.

Mrs Molloy said that at the Finance and Performance Committee, members had commented that the Trust has had an enormously flexible and professional workforce throughout the entire period of the pandemic. She said we are accustomed to our staff having to work flexibly through crises but no one could have anticipated that anyone could have worked for so long in this way.

Mrs Molloy led members through the detail of her report which included outturn in respect of:-

- Acute services – elective care, outpatients, diagnostics, cancer care, endoscopy, unscheduled care; and

- Community Services – Adult Mental Health, Psychological Therapies, Dementia Services, Allied Health Professionals, Children’s Services, Child Protection, Domiciliary Care, Carers Assessments and Direct Payments.

The Chair thanked Mrs Molloy for her very comprehensive report and for the exceptional detail.

Mr Hegarty acknowledged the incredibly difficult year and asked had the Trust received feedback from families in the community of the support they received from the Trust.

Dr Brown advised that in respect of older people’s mental health services the opportunity for someone to attend an outpatient clinic has not always been easy however in a Covid environment this has been safer. He said that throughout the year the multi-disciplinary team has had to balance risk in respect of both new and review patients.

Ms O’Brien said this was very similar for adult mental health services and said that her Directorate has a Service User consultant who works with families and clients. She said for clients who have personality disorders the Trust had developed their outpatient clinics to help maintain clients in their own communities. She said her Directorate continued to be innovative with patients and decisions are based on a risk assessment of what is in the best interest of the patient and which ensures families are involved in the risk assessment.

In respect of learning disability services Ms O’Brien said that day centres are very clearly seen as short breaks for families and during the first surge these day centres were closed which led to considerable additional pressures on families who rely on these services. She said that in an attempt to restore support to these individuals and their families, in-reach support has been offered into homes to allow carers to have a break from their caring responsibilities.

Ms O’Brien said that local involvement groups have been re-established and this has assisted in discussions on rebuild with our learning disability families and, has resulted in creative approaches over this period. Mrs Molloy added that the acceleration of direct payments has also shown how families have stepped in to support care in family settings.

Rev McGaffin followed on from Mr Hegarty’s comments in respect of families and unpaid carers and said the Board workshop also showed staff’s agility in their response and how innovative they have been both in acute and community services. She said she was very impressive how staff worked with families and it is well worth underling how well what staff have done and how staff have adapted their practice to support families.

Prof McKenna commended the excellent report and referred to the regional performance information in particular regarding psychological therapies and asked was there anything that can be done to address the considerable waiting list. Ms O’Brien explained that there is a regional review of psychological therapies and that

a new single mental health service is in discussion at a regional level which is looking practice models for psychological therapy. She added that she has begun an improvement project at a local level to seek opportunities for improved access to services.

Mrs Laird said it was a remarkable report and illustrated through such a challenging period it commended what staff had achieved. In facing the rebuild she said everyone should pause and recognise what staff have achieved in such difficult circumstances.

The Chair agreed and asked as a Board it reflects and recognise the exceptional effort that people have made.

5/21/14

DECLARATION & REGISTER OF INTERESTS FORMS 2020/21

The Chair advised members that the Trust's Register in respect of Outside Interests for 2020/21 had been updated and is available for viewing from the Chief Executive's Office.

5/21/15

SUB COMMITTEE REPORTS

1. Finance and Performance Committee – Minutes of meeting held on 30 March 2021

Mr Hegarty referred to the minutes of a Committee meeting held on 30 March. He highlighted key issues and said a revised financial report would be issued in early 2021/22.

Mr Hegarty referred to a presentation on the Doctors' Hub and said this would also be given to Trust Board in due course.

Mr Hegarty provided an update in respect of waiting list initiative funding, performance for 11 months, endoscopy, cancelled appointments, rebuild and transformation. He assured members that longest waiters in elective specialities is under constant scrutiny.

2. Governance Committee – Update from meeting held on 7 April 2021

Dr McPeake advised members that a meeting of the Governance Committee took place on 7 April and the minutes of the meeting would be shared with members following approval at the next Committee meeting. However, he said he wished to provide a number of key points for members' information.

Dr McPeake said the Committee meeting operated under a revised agenda and some issues were getting more prominence in terms of the risk register and SAls which was showing a sustained improvement.

Dr McPeake shared issues raised through Sub-Committee reports which highlighted areas of concern and said the Governance Committee was assured of actions being taken to address these.

Dr McPeake advised that the Governance Committee's Terms of Reference was reviewed and amendments made. He thanked Mr Campbell, Prof McKenna and Mrs Laird for their support in doing this.

5/21/16

ANY OTHER BUSINESS

There were no further items of business.

The Chair thanked Dr Kilgallen for her report and for the Corporate Team's huge support to the Board in its corporate responsibilities.

5/21/17

DATE OF NEXT MEETING

The next meeting of the Western Health and Social Care Trust Board will take place on Thursday, 10 June 2021.

**Mr S Pollock
Chair
10 June 2021**