

**Minutes of a meeting of the Western Health & Social Care Trust Board held on Thursday, 7 October 2021**

**PRESENT**

Mr S Pollock, Chair  
Mr N Guckian, Chief Executive  
Mr J Campbell, Non-Executive Director  
Mr S Hegarty, Non-Executive Director  
Mrs R Laird, Non-Executive Director  
Rev Canon J McGaffin, 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  
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  
Mrs T Molloy, Director of Performance and Service Improvement  
Mrs K Hargan, Director of Human Resources & Organisational Development

**IN ATTENDANCE**

Ms E McCauley, Assistant Director of Finance  
Mr O Kelly, Head of Communications  
Mrs M McGinley, Executive Officer to Chief Executive

9/21/1

**CONFIDENTIAL ITEMS**

9/21/2

**CHAIR'S WELCOME AND INTRODUCTION**

The Chair welcomed everyone to the October meeting and in particular he welcomed those members of the media who had joined. He asked that any questions from the media are raised with Mr Kelly following the meeting.

The Chair referred to business since the last meeting.

- The Chair advised that Dr Brown has indicated his intention to retire at the end of January 2022. The Chair said he would make further comment regarding Dr Brown's service to the Trust before he departs.

- The Chair referred to a letter from the Department of Health advising that normal sponsorship and governance activities have been suspended because of ongoing pressures across the system for a further 3 months until the end of December 2021. The Chair said the Permanent Secretary has however made it clear that Accountable Officer responsibilities remain unchanged and Non-Executive Directors should continue to provide support and constructive challenge.
- The Chair referred to a meeting he had during the month to discuss chaplaincy services across the Trust.
- On 14 September the Chair was pleased to welcome a full Cohort 4 to the Safety Quality West Quality Improvement programme.
- Concluding his comments the Chair referred to Dr O'Mullan, Non-Executive Director, whose term of office ended on 30 September. He said Dr O'Mullan had been a Non-Executive Director since 2016 and said she had given outstanding service to the Board, its Committees both internal and regional and on behalf of members he thanked her for her commitment over the past 5 years. The Chair advised that he has not been notified of a replacement to date.

9/21/3

### **APOLOGIES**

Apologies were received from Prof McKenna, Non-Executive Director, and Mr Quigley, Acting Director of Finance & ICT.

9/21/4

### **DECLARATION OF INTERESTS**

There were no declarations of interest expressed.

9/21/5

### **MINUTES OF PREVIOUS MEETING HELD ON 2 SEPTEMBER 2021**

The Chair referred to the minutes of the previous meeting held on 2 September 2021.

A correction was made to page 11, item 2.2 which should read that Dr O'Mullan presented the update on People Committee. Subject to this amendment the minutes were proposed by Canon Rev McGaffin, seconded by Mr Hegarty and unanimously approved by members as a true and accurate record of discussion.

9/21/6

**MATTERS ARISING**

There were no matters arising.

9/21/7

**CHIEF EXECUTIVE'S REPORT**

Mr Guckian referred to his report which provided an update on issues including:-

- Service pressure across acute and community services;
- Support to staff;
- Charity walk in memory of Ms Nuala McLaughlin;
- GMC National Training Survey results; and
- 2021/22 Seasonal Flu Vaccination

Mr Guckian advised members that Mr Cassidy will continue to be Interim Director of Women and Children's Services/Executive Director of Social Work to 8 November.

The Chair referred to the sad death of Ms McLaughlin and acknowledged the wonderful donation of £54,000 from her memory walk. He added his thanks to those who helped organise the event including her family and friends.

The Chair said he has an opportunity every month to meet Minister Swann along with other Trust Chairs and said the Western Trust is in no different position from other Trusts in respect of the pressures associated with demand for services and staffing challenges. The Chair expressed again his appreciation to staff who continue to work under pressure.

9/21/8

**CORPORATE RISK REGISTER AND BOARD ASSURANCE FRAMEWORK**

Dr McDonnell referred members to the Corporate Risk Register and Board Assurance Framework. She said there were 20 risks on the register as approved at Trust Board on 2 September 2021.

Dr McDonnell referred to risk ID1213 and risk ID1316 and said indicators were being developed to monitor these risks.

Dr McDonnell said new target scores for each corporate risk were agreed at CMT in August which align to the adopted Risk Appetite model. She said the agreement was given to fully adopt the risk appetite model and will be discussed further at a Trust Board workshop scheduled for April 2022.

Members were referred to the summary report of all risks which had been reviewed in the last quarter and updated action plans.

Mrs Laird asked how the Trust would measure the level of behavioural adherence in respect of risks ID1213 and ID1316. Dr McDonnell said this would be measured through breaches in protocols and IPC practice.

Discussion continued on risk ID1216 and a deadline of December 2021. Mrs McKay said there were 2 key actions being progressed to meet this deadline. She said the ED was seeking to increase its staffing and was in the process of recruiting 10 Band 5 nurses. She added that ED was also reviewing other issues such as senior nurse flow and ambulance handover and said through No More Silos ED was expecting support for additional staff. Mrs McKay said the expansion of the Ambulatory Care Unit was not complete and would be reviewed again in mid-November.

Mr Campbell sought an update on risk ID 1133. Dr Brown assured that the SAI action plan was being implemented and the risk had been updated in September.

9/21/9

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

Dr McDonnell advised that she would be providing members with a report every other month going forward.

9/21/10

#### **FINANCIAL PERFORMANCE REPORT FOR MONTH 5**

Ms McCauley referred members to the Trust's financial performance report for month ending August 2021.

Ms McCauley stated that at month 5, the Trust was reporting a deficit of £18.7m, of which £3.9m related to Transformation (£0.3m) and Covid19 (£3.6m). She said the projected deficit for the year had been revised to £57m (£38.2m core deficit and £18.8m Covid19 deficit). It was noted that the core deficit had reduced by £6.4m to account for further income from the Health and Social Care Board, increased savings and revised pressures.

Ms McCauley said the Covid deficit had increased by £10.1m mainly to reflect the cost of extending Covid response from July to March 2022 following the emergence of the Delta variant. Mrs McCauley advised that the HSCB is waiting on the outcome of the October monitoring bid. Ms McCauley confirmed that all Trust Recovery Plan Workstreams which were delayed in 21/22 due to the pandemic are currently up and running again.

Concluding her report, Ms McCauley said the Trust paid 93.9% of its undisputed invoices with suppliers within 30 days, at 31 August 2021.

Mr Guckian advised members that there is a meeting of the Northern Ireland Executive today in respect of resourcing and the Trust awaited the outcome of these discussions. He said each month the Trust provides a detailed monitoring report to the DoH on expenditure and he expected a significant movement in the Trust's finances over the next number of months.

Mr Hegarty reinforced the financial messages given by Ms McCauley. He said in the first 5 months the Trust's projected core deficit had reduced from £49m to £38.2m due to reprofiling costs and additional monies from the HSCB. He said the Covid costs were accurately reflected and he commended finance staff for this position.

Mr Campbell commended the revised financial report which he found informative and clear. He asked how confident was the Trust that at this stage its Covid19 costs would be fully funded? Mr Campbell also referred to the core deficit position and said while it was reducing it was still £26m above the agreed control total and said this would be a challenge going forward. He recognised the importance of the October monitoring round for the Trust.

Mr Campbell welcomed the section on flexible staffing expenditure and said this section would allow members to see trends and provide focus on more expensive agency staff. He said he was pleased to see within the report that overtime and banking covered a significant element of flexible staff expenditure and that there had been a reduction in agency but off set by nurse agency expenditure. Mr Campbell asked how was agency nurse expenditure being managed.

Mrs Hargan said services are emerging from a very challenging period in that from mid-July they have experienced significant pressures from the most recent Covid surge. She said in light of this it had been necessary for services to rely on flexible staffing to supplement the workforce. She said in some areas contract agency and non-contract agency have been employed. Mrs Hargan assured members that nurse staffing receives significant attention and referred to the establishment of the Nurse Stabilisation Project which examines in detail agency usage and spend.

Mrs McKay said the expansion of critical care beds had contributed to an increase in nurse agency spend. She said Altnagelvin had been asked by the Region to increase its critical care capacity to 12 beds and SWAH to 6 beds and both hospitals have been asked to maintain this level across the winter period.

Mrs McKay however said she was pleased that the Trust had recently appointed 110 Band 5 new nurse registrants to the Trust with some mentorship and training regimes to be completed. She said it would be a few weeks before the staff would be able to start work but that this would have a significant impact in reducing nurse agency spend. Mrs McKay said even with these new recruits, there would still be 15 vacancies in Altnagelvin Hospital after this.

Mrs Laird asked to understand the retention of these recruits and Mrs Hargan suggested this could be an issue that the People Committee would consider.

9/21/11

### **PERFORMANCE MANAGEMENT INFORMATION**

Mrs Molloy referred members to her performance report. She advised that the Trust's Phase 7 plan had been submitted to the DoH on 15 September and this was an integrated service delivery and resilience/surge plan in line with Departmental/HSCB requirements. Mrs Molloy added that as usual the plan included projected activity that covered the period October – December 2021.

Mrs Molloy took members through the detail of her report referring to key highlights including:-

- 62 day cancer standard
- Waiting List Initiative spend for 2021/22.
- Inpatient and day case activity
- Endoscopy
- Diagnostics
- Unscheduled care
- Psychological Therapies
- AHP services

Concluding her report Mrs Molloy referred to the Elective Care Framework. She said the Department of Health continued to lead the work to prepare for delivery of the elective framework. Mrs Molloy said a primary area of focus was currently the prioritisation of elective surgical capacity with independent sector providers through a regional group which included senior clinicians and managers from each Trust. Surge planning was also taking into consideration how time-critical surgery can be maintained across the region, particularly where that requires access to ICU beds.

Mrs Molloy said the Minister has announced the movement towards elective surgery "hubs" which enable green pathways for patients requiring surgery and said Mrs McKay and herself would be attending a regional meeting shortly to look at this.

Mrs Molloy concluded that the Trust had continued as part of its Waiting List Initiative to plan for regional orthopaedics activity to be delivered by an Independent Provider in the South West Acute Hospital. She said preparations were well advanced and it was likely that contracts would be signed in the coming weeks, subject to the required approvals.

The Chair thanked Mrs Molloy for her very informative report.

Dr McPeake referred to the table detailing the regional information on performance and remarked that some services were reported as numbers waiting which made it difficult to compare the Western Trust's performance against the rest of Northern Ireland. Mrs Molloy explained that traditionally hospital targets are reported as percentages and community services and mental health targets are reported in number waiting more than 13 weeks. She however gave assurance that the Western Trust compares favourably in comparison to other Trusts.

9/21/12

**DELEGATED STATUTORY FUNCTIONS REPORT - ANNUAL REPORT 1 APRIL 2020 TO 31 MARCH 2021**

Mr Cassidy referred members to the Delegated Statutory Functions Annual Report for the period 1 April 2020 to 31 March 2021. He said this report confirmed that the Trust is compliant with its requirements to discharge its Statutory Functions while acknowledging that there remain areas which the Trust needs to focus.

Mr Cassidy said in 2020/21 health and social care had experienced a year like no other with the impact of Covid on service delivery and on staff wellbeing. He said it would be little surprise that Covid is mentioned throughout the report in terms of how it disrupted services and the impact on Delegated Statutory Functions. However, Mr Cassidy said throughout the report there were many references to how staff had risen to the challenge of offering the best care and support to those most vulnerable in our communities, including how staff had offered innovative services throughout the pandemic.

Mr Cassidy said services have had to be flexible to meet the challenges of the pandemic and said there were a number of examples of good practice throughout the Trust where staff had been innovative in ensuring that quality services continued to be offered to the most vulnerable members of our society. For example:-

- Adult Physical Disability, day care staff developed an outreach model which facilitated over 700 outreach sessions for service users. The Social Work Lead in Adult Mental Health embarked on an improvement project along with the Multi-Disciplinary Team to improve carers' assessments;
- Primary Care and Older People, staff had been actively engaged in the care and governance associated with residents in Residential and Nursing Homes;
- Women and Children's Directorate, Family and Child Care social work staff continued to do direct work and home visits to safeguard children, despite the risk associated with the pandemic.

Mr Cassidy said there were also a number of areas that the Trust needs to focus on in the upcoming year. He said some of these included increased pressures on the

Approved Social Work rota, non-compliance with the Mental Capacity Act, care leavers with no Personal Advisor and needs assessment/Pathway Plan, and children and families waiting in excess of 13 weeks for an individual post diagnostic appointment with a Social Worker.

Mr Cassidy took members through a detailed presentation of the annual report. He concluded his presentation by acknowledging Ms McLaughlin and said the Family and Child Care Service had lost a very important and valuable manager and member of staff. He acknowledged the recent charity walk organised by her family and friends.

The Chair thanked Mr Cassidy for his very informative annual report and said it gave a very useful summary of core issues. He thanked all social services staff for their hard work over the past year.

Canon Rev McGaffin sought clarity on the end date for the restructuring of Family and Child Care services in Enniskillen. Mr Cassidy said this pilot project commenced in early 2021 and would run for 1 year. He said evaluation was taking place on an ongoing basis however there would be a full evaluation report for sharing in due course.

Mrs Laird thanked Mr Cassidy for his informative report and said she wished to pay tribute to the work of all social services staff. She said she wanted to commend the decrease in the number of unallocated cases. She asked if there was a worry that the number of children on the Child Protection Register had declined because of under representation. Mr Cassidy said at the start of the pandemic there was a decrease in the referral rate and said that he felt services had not yet realised the full impact of Covid. He said however CAMHS had seen an increase in referrals.

Following consideration of the annual report it was proposed by Mrs Laird, seconded by Mr Hegarty and unanimously approved by members.

9/21/13

#### **TRUST BOARD DATES – 2022**

The Chair shared with members a list of Trust Board meetings for 2022 for noting in calendars.

9/21/14

#### **SUB COMMITTEE REPORTS**

#### **Finance and Performance Committee – Minutes of meeting held on 1 September 2021**

Mr Hegarty asked members to note the minutes of a meeting of the Finance and Performance Committee held on 1 September 2021. He highlighted key issues and referred specifically to page 2 para 2 regarding 10% of staff not available to work and said the Committee had asked for a more consistent view of this and give more context to this.

### **Endowment and Gifts Committee**

Members noted the minutes of meetings held on 4 May 2021 and 8 June 2021.

Canon Rev McGaffin highlighted key issues which included expenditure to date, spending plans per Directorate, and registration of funds with Charities Committee. Canon Rev McGaffin referred to the establishment of a sub-committee to approve the expenditure of the additional £3m funding.

### **Terms of Reference**

Following consideration members approved the revised Terms of Reference.

9/21/15

### **ANY OTHER BUSINESS**

There were no further items of business.

The Chair concluded the meeting by referring to a DoH press release published today regarding the “Vaccination Status of Deaths and Hospitalisations Report”. He said the report presented results for Northern Ireland on the vaccination status of patients who have been hospitalised from COVID-19 and of those who have died from COVID-19 between 30 August and 26 September 2021.

The Chair shared the key findings in respect of Hospitalisations:

- Three-quarters of adult inpatients aged under 50 are unvaccinated.
- More than a fifth (22%) of inpatients aged 50 and over are unvaccinated.
- Unvaccinated individuals aged 50 and over are 5 times as likely to be admitted to hospital as fully vaccinated individuals.
- For adults under 50, whilst the numbers admitted to hospital are lower, an unvaccinated individual is almost 18 times as likely to need hospitalisation.

The Chair continued to share the key findings in respect of death and said it was reported that unvaccinated individuals aged 50 and over are almost 4 times as likely to die.

The Chair said these findings were very stark and encouraged the public in Northern Ireland to get vaccinated.

9/21/16

**DATE OF NEXT MEETING**

The next meeting of the Western Health and Social Care Trust Board will take place on Thursday, 4 November 2021 at 11 am.

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**Mr S Pollock  
Chair  
4 November 2021**