

Minutes of a meeting of the Western Health & Social Care Trust Board held on Thursday, 8 June 2023 at 10 am in Lecture Theatre 1, Trust Headquarters

PRESENT

Dr T Frawley, Chair
Mr N Guckian, Chief Executive

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

Dr B Lavery, Medical Director
Mr T Cassidy, Executive Director of Social Work/Director of Women and Children's Services
Mrs D Keenan, Interim Executive Director of Nursing/Director of Primary Care and Older People's Services
Mrs G McKay, Director of Acute Services
Ms K O'Brien, Director of Adult Mental Health and Disability
Mrs T Molloy, Director of Performance and Service Improvement
Mrs K Hargan, Director of Human Resources
Ms E McCauley, Director of Finance, Contracting and Capital Development

IN ATTENDANCE

Mrs C Reid, Assistant Director Acute Services
Mr O Kelly, Head of Communications
Mrs M McGinley, Executive Officer to Chair/Chief Executive
Dr R Sharkey, Consultant Physician Respiratory (Agenda item 5/23/8)

5/23/1

CONFIDENTIAL ITEMS

5/23/2

APOLOGIES

Apologies were received from Mr Mark Gillespie, Interim Director of Planned Services.

5/23/3

DECLARATION OF INTERESTS

There were no declarations of interest expressed.

5/23/4

CHAIR'S WELCOME

The Chair welcomed everyone to his first public Trust Board meeting since joining the Trust on 1 May 2023. He acknowledged the huge and complex agenda facing health and social care and said he felt very fortunate to have around him colleagues who were clearly committed to addressing the numerous challenges that face Northern Ireland's Health and Social Care system and in particular the challenges facing the Western Trust. The Chair said he was very grateful to his Board member colleagues who had made him so welcome and said he looked forward to working with the Board over the next 4 years.

The Chair acknowledged the major contribution his predecessor Mr Pollock had made in leading the Trust Board through the challenging period of the pandemic. He said he was optimistic and confident that the Trust could rise to meet the challenges of rebuilding services and renewing the morale of staff which had been and continued to be severely tested.

The Chair welcomed those members of the public who were joining the meeting as observers.

The Chair referred to a report of business.

- The Chair advised that during his first month he had taken the opportunity to have meetings with the Non-Executive Directors and the Corporate Management Team to gain an understanding of the issues that are facing each Directorate. He said he found these meetings extremely interesting and helpful. In addition, the Chair said he proposes to attend a meeting of all the Board's Sub-Committees and yesterday he had attended a meeting of the Governance Committee.
- The Chair said from 1 January – 31 March 2023 Altnagelvin Hospital, the South West Acute Hospital and Omagh Hospital had all been extremely busy with the Trust's hospitals experiencing one of their busiest ever periods. The Chair said that despite the continued rise in demand for services, as always our staff had been totally committed, pulling out all the stops and working together to care for very sick patients demonstrating exemplary skills, kindness and compassion. The Chair acknowledged that there are things where the Trust needs to improve and waiting lists clearly need to be addressed but said it was also important to

highlight what has been achieved and is being achieved and we should never take for granted what staff are delivering on a daily basis.

- The Chair said he was delighted to be involved in the Trust's celebrations to mark International Nurses Day on 12 May, the anniversary of Florence Nightingale's birth. He said the 'Our Nurses, Our Future' campaign shone a light on nurses and on a brighter future, moving nurses from invisible to invaluable in the eyes of policy makers, the public and all those who make decisions affecting the delivery and financing of health care. As part of the day, the Chair said he attended a service of thanksgiving in Altnagelvin Hospital.
- On 23 May the Chair joined a briefing organised by the Northern Ireland Confederation on the HSC Spending Reductions for 2023-24. He said during this session there had been very full and frank discussion on the financial challenges facing all health and social care Trusts in 23/24. He said the DoH has released an Equality Impact Assessment of the 2023/24 Budget Outcome which provides useful background and detail on the current position and he encouraged member to review this.

The Chair said more would be said later on this but he felt it is very important that Board support staff to find ways to mitigate this financial challenge in order to as far as is possible to protect core services.

- The Chair advised that on 23 May, the Northern Ireland Audit Office issued a very concerning report on Mental Health Services in Northern Ireland. He alluded to the headline messages and said improving mental health was a key priority for the Northern Ireland Executive and for the Western Trust. He said the Service needs to be aware of the challenges in mental health particularly after Covid and in particular its impact on young people. He added that it is important that the Trust develops a response to the challenges presented in this report.
- On 24 May the Chair said he was pleased to be able to visit a range of wards and departments in the South West Acute Hospital and meet staff. He said he would be visiting Altnagelvin Hospital as soon as it could be arranged, Waterside Hospital on 25 July, Omagh Hospital and Primary Care Complex on 31 July and Lakeview and Grangewood on 9 August.
- On 30 May the Chair advised that he met with the Chair of the Southern Trust. He said this was a very helpful and constructive meeting and that they had discussed a range of issues of mutual interest.
- On 31 May as part of his induction the Chair said he had a meeting with the Permanent Secretary. He indicated that this meeting had allowed him the

opportunity to speak about the issues that are facing the Western Trust and the Permanent Secretary for his part shared his priorities for health and social care putting a particular emphasis on the performance of Trusts, both clinical and financial.

- The Chair said he was delighted that Altnagelvin Hospital has become the first hospital in Northern Ireland to offer critical care patients, their families and staff, the opportunity to pilot an innovative lip reading app. He said the recently launched research study, led by Queen's University and driven forward for the Western Trust by Staff Nurse Carla McClintock, was currently being evaluated in the Critical Care Unit in Altnagelvin Hospital. The Chair said he heard S/N McClintock be interviewed on radio and that he had been very impressed by her enthusiasm and clear commitment to this important innovation.
- On 7 June the Chair said the Chief Executive and he were delighted to visit the Dietetic Department at Altnagelvin Hospital as part of Dietitians Week 2023. He said he spent a most informative hour with the Team and that it was noteworthy that the Team highlighted that a number of dietitians had left employment in Northern Ireland to work in the Republic of Ireland because of higher salaries. The Chair said that the Western Trust given its proximity to the Republic of Ireland is in a clearly competitive environment for staff and that the Trust should ensure the DoH is aware of this developing challenge in the already challenging area of staff recruitment and retention.
- Concluding his report, the Chair advised that today is Biomedical Science Day and that he was pleased a number of Board members were able to avail of an invitation to visit Labs following the Board meeting.

5/23/5

MINUTES OF PREVIOUS MEETING – 6 APRIL 2023

The minutes of previous meeting held on 6 April were proposed by Canon Rev McGaffin, seconded by Mrs Laird and unanimously approved by members as a true and accurate record of discussion.

5/23/6

MATTERS ARISING

There were no matters arising.

5/23/7

CHIEF EXECUTIVE'S REPORT

Mr Guckian referred members to a report of issues for members' information. On behalf of the Corporate Management Team, opening his remarks he welcomed the Chair to his first Board meeting.

General Pressure

Mr Guckian advised that over the last month, there had been a reasonably quiet period with EDs with lower numbers of patients waiting for beds in both acute hospitals. He said in recent days demand for beds had increased and that, as always, staff would work to de-escalate through hospital flow and discharge.

Racecourse Road GP Practice

Mr Guckian advised members that the Trust has taken over responsibility for the Racecourse Road GP Practice from 1 June 2023. He said this was similar to the Trust's intervention with Dromore and Trillick GP Practice last year which had been successful. Mr Guckian reassured all patients that the practice will continue to operate and the Western Trust will provide support in the interim.

Financial Budget 2023/24

Mr Guckian advised that the Director of Finance will present a financial analysis later in the meeting on the financial budget outcome for 2023/24 which confirms that the budget settlement will be extremely challenging. He said the amounts the Trust will have to reduce expenditure by are equivalent to, if not greater than, the Trust's full recovery plan financial savings, which took 4 years to secure.

Mr Guckian added that the lateness of the budget, and the time needed to safely implement decisions and actions, inevitably meant that the first quarter would see insufficient progress in reductions however the Trust has a plan in place and is implementing a range of actions. He said for example the public will now notice that Personal Protective Equipment (PPE) guidance has changed, and there are no longer masks at the entrances to Trust facilities. Another element of the Trust's financial savings is the reduction in Agency staff, particularly off-contract agency staff. Mr Guckian said much work had gone into this with a new Nurse Agency Framework contract having been released on 15 May 2023. Mr Guckian again encouraged all available nurses to join the Trust's own teams and benefit from employment in the HSC family.

Ulster University - Physical Activity Research in Schools

On 12 May Mr Guckian said he was delighted to be asked by Ulster University to speak at this event. He said the health and social care system in Northern Ireland is facing some of its biggest challenges since the establishment of the NHS. He said the Bengoa report described the 'Change Needed' if we are to support everyone to lead long, healthy lives and the report described 4 'musts' – one of which is to reduce health inequalities and ensure the next generation is healthy and well.

DEEDS

On 16 May the Chief Executive said he was delighted to be invited to speak at a conference organised by Dementia, Empowered and Engaged in Derry – (DEED) – a project that has been successfully supporting people living with dementia for many years by providing physical, emotional and social support and activities, and gives people the opportunity to continue to be active in their communities.

Volunteers Celebration Week

From 1-7 June, Mr Guckian said the Western Trust joined thousands of charities and voluntary Organisations to recognise the contribution volunteers make across the UK during Volunteers' Week 2023. This year's theme of 'Celebrate and Inspire' was to encourage people to be the change that we want to see and get involved in volunteering in whatever way works for them.

Mr Guckian said the contribution of volunteers is often unseen by many, visible only through the incredible impact of their volunteering, so taking the time during Volunteers' Week to celebrate their efforts and all they contribute to local communities and society as a whole was never more important.

On behalf of the senior leadership team Mr Guckian extended sincere thanks to the many volunteers across the Trust for their commitment and energy in supporting our work and helping the Trust to deliver services.

My Waiting List Website

Concluding his report Mr Guckian said the DoH had recently launched a more transparent approach to waiting list management with a publicly accessible website called "My Waiting List". He advised the webpage will be expanded over time to also provide the latest waiting time information for procedures, treatment and diagnostics.

5/23/8

IMPROVEMENT STORY – NO MORE SILOS RESPIRATORY HUB

Mrs McKay welcomed Dr Rose Sharkey, Consultant Respiratory Physician to the meeting. She said that Dr Sharkey was a transformational leader and that she was pleased that she had been honoured by staff and patients for her work. She added that today Dr Sharkey would present a remodelled respiratory service post pandemic.

Dr Sharkey thanked members for the opportunity to share her presentation with Board.

Dr Sharkey said the service could not forget the pandemic and acknowledged that it had been a very stressful time. She said the pandemic heightened the need for the respiratory service to be reformed.

Dr Sharkey advised that funding from No More Silos had resulted in the development of an Inpatient Respiratory Hub.

Dr Sharkey advised that the Respiratory Hub operates 2.5 days per week with a staffing complement of 1 Consultant, 1 Associate Specialist, 0.5 nurse, a co-ordinator and administration staff. She said the hub sees on average 24 patients per week and has a 40% discharge rate which enhances hospital flow. She said on average 24 beds are released per week through early facilitated discharge, advice to junior doctors on non-resuscitation wards, and intervention in ED and diagnostics. She said the respiratory hub allows respiratory discharges earlier than usual as the patient can be reviewed in the Hub and thus help reduce the length of stay for patients.

Dr Sharkey described the “pleural procedures” that usually are performed as inpatient procedures which are now carried out in the Respiratory Hub. She added that Hub staff are trained to undertake pleural procedures in outlying wards and if necessary they can also drain fluid.

Dr Sharkey described a patient pathway before and after the implementation of the respiratory service reform. She said before the reform the patient was been admitted with an inevitable significant length of stay. When the patient attended the Hub a few months later for the same treatment the patient was able to go home that same day. She said this meant zero bed days and a better quality of care for the patient with reduced risk of hospital acquired infection. She said an intra-pleural catheter (IPC) has been inserted in the patient’s lung and the district nurse now removes the fluid weekly and so prevents the need for further admissions. Dr Sharkey noted that the IPC procedure was learned by a Consultant while in New Zealand and he was now training other Consultants in how to carry out this

procedure and that going forward more patients would have this procedure in the Hub and prevent hospital admission.

Dr Sharkey outlined the Hub interactions with the inpatient respiratory ward, ED, AMU/ACU, non-respiratory wards and the community respiratory team. She said that due to NMS funding an additional Consultant had been recruited who goes into ED 7 days a week to see patients resulting in shortened length of hospital stay for patients and reduced risk for patients. In addition, Dr Sharkey said the outcome of a respiratory consultant attending ED was that respiratory patient who require high flow oxygen or non-invasive ventilation is managed in a timely manner.

Dr Sharkey advised that on average the Consultant sees 25 patients in ED in a week. She said this means that silos are broken down and there is improved hospital flow. She said a Consultant in ED also enables continuous communication between doctors to facilitate patients moving from ED to an inpatient bed. She said it also facilitates on average 1-2 patients being discharged from ED each week with Hub follow up as appropriate, and that on average this enabled 5 patients to avoid attending ED per month.

Dr Sharkey continued by referring to discharge times for the inpatient respiratory ward. She said 75% of patients are discharged before 3 pm and that of these, 35% of patients are discharged before 1 pm. She said discharge letters are completed the day before enabling pharmacy to have the patient's drugs ready for the patient's discharge home. She said on 26 May, there had been 8 discharges before 5 pm with 5 admissions in bed by 6 pm. Dr Sharkey also advised that for the period January – March 2023, there had been 279 discharges from the inpatient ward in comparison to the other medical wards which had 217 and 237 discharges.

Concluding her presentation Dr Sharkey said the next steps for the Hub is to roll it out to GPs depending on funding and resources and to expand to a 5 day a week service. She said there has been significant interest from other Trusts in the model which she will share with regional colleagues. She said the model can work for all teams and not just the respiratory teams.

The Chair thanked Dr Sharkey for her impactful presentation and said by demonstrating the improvement in length of stay, patients supported at home and patient flow it had highlighted the importance of the new way of working.

Dr McPeake thanked Dr Sharkey for her presentation and said he was intrigued by the point that the respiratory model could have wider application. He asked if she had any services in mind. Dr Sharkey suggested endocrine and diabetes however felt there was no speciality that would not benefit. She said she had seen the model work in surgery as this service has access to ambulatory care and perhaps gastroenterology services. She said the model promotes early discharge and she

felt that this shows ED staff that wards are taking the time to review patients and discharge patients which in turn reduces the pressure in ED.

Dr McPeake asked what the barriers to rolling out the model to other specialities is. Dr Sharkey said part of the challenge is that everyone is so busy that you need a project lead. She said she was fortunate to have a project manager who was able to do this as this is very difficult for clinicians to have the time to do this.

Mrs Molloy advised members that staff have begun winter planning and there was a formal workshop held by SPPG and Mrs McKay's team. She said Dr Sharkey's work was cited as best practice in developing the steps to take in preparation for winter.

Mrs Hargan took the opportunity to acknowledge Dr Sharkey's leadership. She said from a patient perspective this was an exceptional service in that patients do not want to be in hospital. Dr Sharkey said respiratory patients do not want to be in ED for hours and if the respiratory service can find a way to see patients early this enhances the patient's journey. Dr Sharkey explained that the community respiratory team also sees patients on direct referral from GPs.

Dr Sharkey cautioned that the number of patients being treated for COPD has reduced and that the service needs to capture this information and assess its implications.

Canon Rev McGaffin asked Dr Sharkey if she would be writing up her model. She acknowledged that the quality of life for patients and the quality of working life for all staff involved must be so much better. Dr Sharkey agreed that the model gave staff a real lift and was attracting staff to the specialty and attracting young doctors to the specialty of respiratory.

Dr Lavery said he wanted to pass on his thanks to Dr Sharkey as he saw daily the positive impact of the Hub on ED. He said the respiratory team is not a large team however its work in ED and on early discharges was making a huge difference. Dr Lavery said the ease of referral to the respiratory hub was also to be commended.

The Chair acknowledged the "ripple effect" the respiratory hub has on so many other departments and staff.

Mrs Laird congratulated Dr Sharkey on her work and the impact it has on patients, staff morale and for making Altnagelvin a more attractive place to work.

Mr Guckian thanked Dr Sharkey for her leadership and hard work during the pandemic and said it was inspiring that she was still able to remodel her service during that very difficult time.

The Chair concluding the discussion commended Dr Sharkey's vision and leadership and asked her to pass on the Board's thanks to the wider respiratory team.

5/23/9

CORPORATE RISK REGISTER AND BOARD ASSURANCE FRAMEWORK

Dr Lavery referred members to the Trust's Corporate Risk Register and Assurance Framework for approval. He said there were 22 corporate risks as agreed at Trust Board on 6 April 2023.

Dr Lavery shared with members a proposal to amend risk ID49 regarding the potential impact of a cyber security incident on the Western Trust.

Members were advised that the risks associated with cyber threats remain high, however the Trust's ICT Department continues to maintain robust cyber security through its continued focus on technical security measures, governance and compliance, in line with the Regional Cyber Security Programme Board. It was noted that the Network & Information Systems Regulation (NIS) Cyber Assessment Framework (CAF) Stage 1 return was completed in January 2023 and a programme of work has been identified and will be agreed for the early months of 2023/24 and across the financial year, in particular to review and test business continuity plans for preparedness to respond to a cyber-incident. A local focus on the challenging area of Cyber Awareness Training uptake is also planned to ensure continual progress in this area. The Trust is continuing to review its corporate risk to take account of these developments.

Dr Lavery advised that there were no proposed new risks and no outstanding issues.

Dr Lavery referred to risk ID1183 and advised that this risk had been updated on 24 May however the paper for today's meeting had not been updated.

The proposal to amend risk ID49 was unanimously approved.

5/23/10

QUALITY IMPROVEMENT MONITORING REPORT – VTE

Dr Lavery referred members to the Quality Improvement Plan quarterly report in respect of Venous Thromboembolism (VTE).

Dr Lavery advised that VTE is a significant cause of death in hospital patients, and treatment of non-fatal symptomatic VTE and related long-term morbidities is associated with considerable cost to the health service. He said NICE guidance had

been endorsed by DoH and implemented in Northern Ireland and that assessing the risks of VTE and bleeding were key priorities that implementing the guidance is intended to address.

Dr Lavery noted that compliance with completion of the VTE Risk Assessment within 2 hours of admission is a Commissioning priority and Trust compliance is reported quarterly to the PHA. He advised that the target is to sustain improvement with VTE risk assessment across all adult inpatient hospital wards to achieve 95% compliance throughout 2022/23.

Dr Lavery shared with members the compliance reported to the PHA for 2022/23. He said compliance with completion of monthly VTE audits had been less than or equal to 50% of all adult inpatient wards up to March 2022 however it was noted that this position had significantly improved during 2022/23 with the number of monthly audits submitted increasing from 65.6% of all adult inpatient wards in April 2022 to 90.9% in April 2023. Dr Lavery said there remained some minor issues with a dip in submission of audits noted for a small number of wards particularly over the summer months and assured members that this was being addressed via the VTE Audit Escalation Process which had been developed by the VTE Task & Finish Group and implemented from July 2022 onwards.

Dr Lavery advised that the VTE Task & Finish Group, established in March 2022, met frequently throughout 2022/23 to review and improve the completion of monthly VTE audits for all relevant adult inpatient wards. He said risk ID1389 which was raised on the Medical Directorate Risk Register to successfully manage this risk has now been closed on the basis that this risk has been mitigated. Dr Lavery added that the Clinical Quality & Safety Directorate Reports which are shared quarterly with Directorate Governance Groups continue to highlight percentage compliance with the VTE audit bundle by ward and division as well as any areas where improvement is required with the regular submission of monthly VTE audits.

Concluding his report Dr Lavery took members through run charts which showed the monthly compliance by ward.

5/23/11

ENVIRONMENTAL CLEANLINESS REPORT – JANUARY–MARCH 2023

Mrs Keenan referred members to the Environmental Cleanliness Audit Dashboard for the period January – March 2023 for noting. She said a range of audits had been completed which included bi-monthly, quarterly, 6-monthly and managerial. She noted that no area had received an audit score of less than 75%.

The Chair referred to the dashboards and sought clarity on whether the audits are mandatory. Mrs Keenan confirmed that monthly and managerial audits are and said those areas that had not completed an audit would have been due to some difficulty getting the team together to undertake the audit. Mrs Keenan assured members that if the audit is not carried out in one quarter it will be carried out in the next one.

The Chair asked for an explanatory note to be added to this report detailing the different audits so as to increase members' understanding of these issues.

5/23/12

FINANCIAL UPDATE 2023/24

Ms McCauley advised members that the Trust has received a letter from the Permanent Secretary dated 22 May 2023 in relation to the publication of the DoH's Equality Impact Assessment (EQIA) requirement in relation to the 2023/24 budget outcome. She said the Trust was also aware of a letter issued to Health Spokespersons for the political parties to inform them of the decisions taken by the Permanent Secretary in allocating the 2023/24 budget for the Department of Health and the publication of the Department's EQIA. Ms McCauley also advised that some Trust Board members had attended a short NICON briefing at which the key messages in relation to the budget were discussed.

Ms McCauley said this correspondence states that the DoH is confirming a projected funding gap for 2023/24 of £732m. She said the HSC has identified approximately £260m of savings and efficiency opportunities which are potentially achievable without long term or irrevocable damage to services and the Western Trust has developed low-medium risk savings plans for £12m against a target of £25m and implementation of those saving plans have commenced.

However, Ms McCauley said a funding gap of £472m remains which includes £375m required to fully honour the English pay offer for Agenda for Change staff. Ms McCauley advised that the Permanent Secretary has made it clear that funding this pay award will require large scale cuts on an unprecedented scale, with severe and lasting implications for health and social care services, and he concluded that taking such a decision is out with his authority.

Ms McCauley continued to advise that the EQIA sets out an additional £100m of cost reduction measures and said these included additional savings from Trusts against staffing related issues such as agency and shift premia, reduced waiting list initiative funding and enhanced savings from Departmental and other spending which includes reduced funding for the Department's Core Grant Scheme meaning community and voluntary organisations will only receive core grant funding for the first half of the financial year.

Ms McCauley said the document indicated other areas which will be considered for savings should the £100m of savings not be yielded as detailed including reduction in expenditure on community aids and adaptations, reductions to education and training places, reductions to community care provision, eg domiciliary care, nursing and residential care.

Ms McCauley advised there are a number of other areas where spending has had to be curtailed where a funding source is no longer available and said the most significant of these are the reduction of 300 places for nursing and midwifery for 2023/24 which had been committed under the New Decade New Approach initiative as part of a 3 year growth of 900 placements; the one-off increase in AHP training posts in 2022/23 of 41 extra places; discontinuation of financial support for general dental practitioners and the discontinuation of the Water Surveillance Programme.

Ms McCauley said with regard to capital, the budget settlement is £468.6m and this will enable the Department to fund existing priorities however it falls significantly short of the capital funding required to progress the Department's Capital investment programme. Ms McCauley said as a consequence the number of new projects, which DoH had wanted to commence in 2023/24 have been scaled back. Ms McCauley confirmed that the new Mental Health Unit planned by the Trust will proceed.

Ms McCauley said the consultation on the EQIA will close on 14 August 2023.

The Chair thanked Ms McCauley for her informative update.

Referring to the issue of the pay award and the impact on staff morale, the Chair said it would be remiss not to acknowledge the risk to service if staff do not receive their pay award and the subsequent impact on services. He said some resolution was urgently required but he was hopeful that the urgency of securing agreement would be accepted by all parties. He said that he intended to highlight the importance of securing a resolution at every opportunity. Mrs Laird said the implementation of the pay award was a matter of fairness and equity and said she could not accept staff being treated unfairly. She said she also found it very difficult to hear messages about reducing nursing places which she considered was a backward step and is extremely short sighted as our current staffing challenges demonstrated.

5/23/13

BANK MANDATE UPDATE

Ms McCauley sought Trust Board approval to have the following Trust members of staff authorised as a cheque signatory on the Trust bank mandate following recent

appointments and expansion of cheque signatories in the Southern Sector of the Trust:-

- Ms Mary Gallen, Assistant Head of Financial Services
- Mr Emmet McGrady, Assistant Accountant
- Ms Jennifer Devenney, Financial Assessments Office manager

She also sought Trust Board approval to have the following Trust members of staff removed as cheque signatories on the Trust bank mandate:

- Caoimhe Duddy
- Lisa Doherty

Ms McCauley said a letter would be sent to the Trust's Bank to notify them of these revisions, once approved.

The outline motion was proposed by Canon Rev McGaffin, seconded by Prof McKenna and approved unanimously by the Board.

5/23/14

ENDOWMENT AND GIFTS COMMITTEE

14.1 Minutes of meeting held on 7 February 2023

Canon Rev McGaffin referred members to the formal minutes of an Endowment and Gifts Committee meeting held on 7 February. She said a full briefing had been previously provided to the March Trust Board meeting.

14.2 Verbal Update from meeting held on 2 May 2023

Canon Rev McGaffin advised that there were no exceptional issues to report from the Committee meeting held on 2 May.

5/23/15

AUDIT AND RISK ASSURANCE COMMITTEE

15.1 Minutes of meeting held on 13 February 2023

Mr Hegarty referred members to the formal minutes of an Audit and Risk Assurance Committee meeting held on 13 February 2023. He advised that a full briefing had been previously provided to the March Trust Board meeting. However, he asked the

meeting to refer again to item 6, Internal Audit Progress report 2022/23, and the Internal Audit Plan for 2023/24, and noted that in relation to the 6 audit assignments, 4 had received limited assurance and 2 had received satisfactory assurance.

15.2 Verbal Update from meeting held on 15 May 2023

Mr Hegarty referred to a meeting of the Committee held on 15 May. He said the Committee had been joined by the Corporate Risk Manager who provided an update on risk grading, risk indicators and risk appetite. He advised Ms McCauley intends to liaise with the Corporate Risk Manager to determine the level of detail that should be provided to the Audit and Risk Assurance Committee.

Mr Hegarty said Ms McKeown confirmed that all 2022/23 audit work was now complete and of the 5 audit assignments 2 had received limited assurance, 3 received a split assurance and 1 received satisfactory assurance.

Mr Hegarty advised that in discussion at the meeting which had involved the Head of Internal Audit in relation to the Annual Assurance for 2022/23, a satisfactory assurance on the adequacy and effectiveness of the Trust's Framework of Governance, Risk Management and Control had been determined.

Moving on Mr Hegarty advised that the Committee had reviewed the Trust's Accounts for 22/23. He said the Trust was reporting a financial break-even position for 22/23 subject to the completion of the external audit. He noted the significant amount of work required of staff in order to complete the preparation of the Trust's Accounts and Annual Report and he asked that the Audit Committee's appreciation of their effort be recorded.

The Chair raised his concern with audits that had only achieved limited assurance and said he would look to Ms McCauley to ensure plans are in place to address any issues identified.

5/23/16

PERFORMANCE REPORT JANUARY – MARCH 23 & 2022/23 END OF YEAR REPORT

Mrs Molloy presented to members the Trust's performance report which provided an update on Acute and Community Services at the end of quarter 4, January–March 2023, and the end of year position for the full Service Delivery Plan (SDP) period, July-March 2023. She said the information was provided on the Trust's performance against activity targets set out in the 2022/23 SDP and access targets within the Ministerial standards as set out in the last Commissioning Plan Direction.

Mrs Molloy said members would be familiar with the RAG (Red, Amber, Green) rating approach and the focus in performance management by SPPG to bring all Trusts to a “green” rating as a minimum. She said the best performing Trust is viewed to be the Trust which has the fewest service areas in the “red” category.

Mrs Molloy advised that the 2022/23 cumulative position showed that the Western Trust had reported the lowest number of areas as “red” (34%), therefore it was the best performing Trust in Northern Ireland over the course of the 9 months covered by the SDP period.

Mrs Molloy stressed that this outturn was as a result of an incredible effort by all staff and her performance team, working with Service Assistant Directors and their teams. She said as Director responsible for performance, she could assure members that the Trust had robust processes to hold Teams to account and also to support teams over this period. She added that the level of scrutiny and challenge from specialist commissioners and SPPG when the Trust fell short of targets had been considerable. Mrs Molloy said the result was a very positive year end performance meeting with SPPG, and she expected that to continue into the Trust’s Ground Clearing and Year End accountability meetings with DoH.

Moving on Mrs Molloy said month on month it remained difficult to sustain performance and confirmed that it was the Trust’s aim is to reliably meet targets quarterly as the Trust moved into a new financial year.

Mrs Molloy advised that the body of the report provided, section by section, the position against the SDP targets, which remained mainly activity based and focussed on rebuild. She said these were the targets the Trust is measured against in the DoH and SPPG performance accountability processes. She said each section of the report also provided Board members with the position against Commissioning Plan Direction targets which pre-date Covid, and were generally based on levels of timely access and numbers of patients breaching the standards. Mrs Molloy added that each section also now included for members an insight to the approach and targets moving into the 23/24 year.

Mrs Molloy said there were a number of areas which she wanted to draw the Board’s attention to. First in respect of cancer services, Mrs Molloy advised that an excellent performance had been delivered against the 14 day breast and 31 day cancer standard. She said the Western Trust stood out in the region in its excellent performance in these services. Mrs Molloy added that the Trust has been providing mutual aid to another Trust, and is implementing a significant new investment in breast services, as the Trust begins to secure recurrent funding to address our capacity gap.

Mrs Molloy said there has been a significant focus by SPPG regionally on the 62 day cancer standard specifically on 4 tumour sites in the West. She said to address this the Trust had developed a range of cancer optimisation plans which will take considerable work across a range of actions in all Trusts to achieve improvement.

Moving to elective outpatients, Mrs Molloy said the Trust was on average at or near pre-Covid levels. She said day case exceeded the target and Inpatients remained the Trust's main challenge. Mrs Molloy said however the Western Trust was the only Trust to have exceeded the target for IPDC combined, and for day case, for the year, which was a major achievement. Mrs Molloy advised that the work to scale up theatres and beds was being taken forward, and Omagh Hospital and SWAH were moving to full rebuild in June and July, with Altnagelvin Hospital having a clear trajectory to this objective also.

In addition, Mrs Molloy advised that the Trust had delivered a challenging Waiting List Initiative programme this year, securing over £18m of investment and successfully spending this with only £50k of slippage. She said that additional patients were able to be seen or treated as a result of this.

Mrs Molloy advised that endoscopy remained one of the main areas of concern in elective and a multi-strand approach had been agreed to increase capacity and see more patients. She said this would involve the use of the independent sector and standing up an additional 10 sessions in Omagh which the Trust secured investment for in 22/23 and is progressively moving to put in place.

Continuing, Mrs Molloy referred to performance in unscheduled care and said this remained an extremely challenging area with numbers of patients breaching 12 hours in EDs reaching unprecedented levels, with continuing delays in complex discharge at South West Acute Hospital and difficulties with weekend discharge. She noted that investment had been secured recurrently through No More Silos and improvement work with expert support is being taken forward internally.

Moving to community services, Mrs Molloy advised that the SPPG will cease monitoring Adult Day Care activity in 23/24 and in relation to domiciliary care services SPPG is moving to monitor unmet need rather than measuring activity against pre-Covid levels. It was noted that both services had achieved acceptable performances in 22/23.

In children's services, Mrs Molloy said the Trust was outstanding in the region with the number of initial family assessments and initial child protection case conferences having been completed. She said the service had carefully managed risk in respect of children who had been assessed as being "in need" in our community.

In respect of mental health services, members were advised that on average the Trust had exceeded the SPPG targets and had improved access particularly in relation to Child and Adolescent Mental Health Services having drastically reduced the number of children waiting for interventions, and improved access in a number of adult mental health treatment areas. However, Mrs Molloy said the number of people awaiting access to dementia services had steadily worsened throughout 22/23 due to gaps in the workforce.

Mrs Molloy referring to District Nursing and said the Western Trust was the only Trust to consistently exceed the SPPG targets in 22/23, with AHP services coming close to meeting the targets on average although there were challenges in individual sub-specialties, and waiting lists had grown considerably.

Mrs Molloy said she hoped she had given members an appropriate level of insight to a range of Trust services, where Trust Service Directors and their teams, supported by the performance team, had led recovery programmes. Despite this, Mrs Molloy said the number of patients who were not able to access Trust services in a timely way continued to be significant and she said that despite all the hard work of staff, waiting lists for assessment and treatment remained one of the biggest issues of public concern in Northern Ireland. Mrs Molloy said she did not expect significant further investment in 23/24, and therefore our focus would be on improving the use of the resources available, by driving productivity and efficiency, and dealing with workforce gaps and absence, which remained the single most significant reason for under-delivery of SPPG targets in her view.

Concluding Mrs Molloy said she wanted to once again to acknowledge all of the efforts of the teams across the Trust thus bringing her performance report to a close.

The Chair thanked Mrs Molloy for her informative and comprehensive report. He said the analysis developed of the detail of the report was a tribute to her staff and provided a level of transparency which was very reassuring. He acknowledged the leadership of the CMT and the day and daily effort by so many people to deliver this performance. He said he also recognised that there was still much to do but said it was important to acknowledge the Trust's position in relation to the rest of Northern Ireland and to recognise the significant achievements during the past year.

Mrs Laird sought clarity in respect of the 31 day and 62 day cancer performance standards and asked why the performance against the 31 day is much better than performance against the 62 day standard. Mrs McKay explained that the 31 day standard is in relation to the patient going through the diagnostic process where the 62 day standard relates to first treatment which often includes endoscopy and having surgery. She said that the Trust has patients who cannot get all their diagnostics within the Western Trust and therefore need to go elsewhere and are on a waiting

list for appointments in other Trusts. Mr Guckian added that there is a demand/capacity gap for these patients in respect of theatre capacity elsewhere.

5/23/17

CORPORATE PLAN 2023/24

Mrs Molloy advised that under normal circumstances the Trust would be setting out its corporate priorities and plans for the next 4 years in line with business planning arrangements. She said while advice is received pending agreement on a new Programme for Government, the Trust has developed a one year plan for 2023/24. She said this carries forward the plan from 2022/23 and includes relevant updates to reflect the Trust's organisational development work and key regional and local priorities for the year.

The Chair said he felt it was important that the Trust use the Corporate Plan to communicate to staff the key objectives and themes the Trust will be taking forward in the year 2023/24.

Following consideration, members approved the Corporate Plan for 23/24.

5/23/18

FINANCE AND PERFORMANCE COMMITTEE

18.1 Minutes of meeting held on 31 January 2023

Mr Hegarty referred members to minutes of a Committee meeting held on 31 January. He said he had provided a verbal update of this meeting at the February Trust Board meeting.

18.2 Verbal update from meeting held on 6 June 2023

Mr Hegarty referred to the Committee meeting held on 6 June. He said the meeting discussed in detail performance and financial outturn positions and received a presentation by Mrs Hargan in respect of workforce stabilisation and said he would recommend this presentation to Board.

18.3 Revised Terms of Reference

Mr Hegarty shared with members revised Terms of Reference for the Committee. Following consideration they were proposed by Canon Rev McGaffin, seconded by Prof McKenna and unanimously approved by members.

5/23/19

HSC RECRUITMENT REVIEW UPDATE

Mrs Hargan advised that the People Committee has been receiving updates on the HSC Recruitment Review and said the Committee felt that Trust Board should be updated on this work.

Mrs Hargan advised in February 2022 the Chief Executives' Forum approved a proposal from HR Directors for an end to end review of the current recruitment model for Agenda for Change posts. To progress this Mrs Hargan said in June 2022, PA Consultancy Services was commissioned by HSCNI to complete this review. She said the review had found challenges and deficiencies across the overall end to end recruitment process and operating model, noted that many of the problems in recruitment in HSCNI had become systemic and that the current operating model was not fit for purpose. She added that the review had also noted the opportunity to modernise the overall recruitment process to better meet the expectations of candidates, to optimise the available job market and improve retention.

Mrs Hargan said the review report and recommendations were considered and approved by the CEF in September 2022 and she referred members to high level findings and recommendations of the review in Appendix 1 of her paper. However, Mrs Hargan said the CEF and HRDs acknowledged that the full implementation of the recommendations constituted a significant programme of work and given the range of other significant projects ongoing within HSC and the associated impact on HR teams together with intensive business as usual challenges, HR Directors, Chief Executives and DoH Workforce Policy Leads acknowledged that there would be a requirement for an external resource to supplement an internal programme team.

Mrs Hargan advised that pending the development of a business case to secure the project implementation resources, HR Directors held a workshop to try to identify what could be completed with little or no funding. A further report from this "Next Steps Workshop" with recommendations on the establishment of a number of workstreams was considered and approved by the CEF and the Performance and Transformation Executive Board (PTEB) in February 2023.

Mrs Hargan advised that a Recruitment Review Programme Board was established to oversee implementation of the approved workstreams reporting to the CEF and PTEB. She said the Programme Board is chaired by the Chief Executive of the Northern Ireland Ambulance Trust and the first meeting of board had taken place on 6 April 2023. Mrs Hargan said in line with the recommendations from the Next Steps Workshop a number of sub groups have been established to take forward 6 supporting workstreams.

Mrs Hargan continued by briefing members on progress to date. She said Worskteams 1 to 5 had all been established and have held a number of meetings to progress their remit. She added that a first draft of the business case to support the appointment of a Programme Team is due to be considered at the next Programme Board meeting on 5 June 2023 and if approved the business case will be tested with a range of other stakeholders before being submitted to the CEF for approval.

Mrs Hargan assured members that the People Committee will receive regular updates on this work.

5/23/20

WORKFORCE CHALLENGES

Mrs Hargan advised that discussions over recent months at Trust Board and at various Sub-committees had highlighted a range of workforce related challenges facing the Trust. She referred to her paper which had been prepared to provide an overview of some of these challenges and to update members on the actions being taken to seek to address the issues and their impacts on services.

Mrs Hargan led members through the detail of her report providing an update on:-

Agency Reduction

Mrs Hargan briefed members on the background to the Regional Agency Reduction Programme and provided an overview of the Trust's agency reduction programme. She advised that significant work had been undertaken in all Directorates to support the introduction of the new nursing and midwifery agency framework and the elimination of recourse to off contract agencies. She noted early progress in a number of areas.

Workforce availability and recruitment challenges

Mrs Hargan referred to the medical workforce baseline report previously considered by Trust Board and updated members on the work of the medical workforce stabilisation programme. This programme is working with service managers to validate the information in the baseline report and to begin work with services to address the identified gaps. Mrs Hargan also updated the Board on the Workforce Efficiency and Retention Working Group where HR Business Partners are working with each Directorate to develop a bespoke plan to support workforce stabilisation within that Directorate.

Industrial Action

Mrs Hargan provided members with an overview of the industrial action during the previous 6 months and the impact this had on patients/service users, services and staff. She updated members on the implementation of pay agreements for 2022/23 in England, Scotland and Wales. She advised that whilst action short of strike is ongoing, strike action had been paused to allow for meetings with the Secretary of State on pay. She noted the impact on staff morale whilst the outcome of these discussions is awaited.

Discussion took place with regard to the A4C pay offer and Mrs Hargan reminded members that in April 2020 as part of the settlement of the industrial action undertaken by A4C trades unions in Northern Ireland, the then Health Minister agreed to restore pay parity with England for AfC staff in Northern Ireland. She said the absence of a pay offer in Northern Ireland was having a significant impact on staff morale and trades unions have advised that their members are dismayed and distraught that no offer has been made despite the contribution they made during the Covid period.

The Chair asked the Board if it would be supportive of him writing to the Permanent Secretary to remind him of this agreement and highlighting the Board's concern that a lack of a pay offer is having a deleterious impact on the morale of our staff that is becoming increasingly difficult to address. The Chair said he would take advice from Mrs Hargan and Mr Guckian in relation to the detail of this correspondence. Members supported the Chair's proposal. Prof McKenna suggested it may strengthen the position if all Trusts write and the Chair indicated that he would discuss this with his fellow Chairs.

5/23/21

ANY OTHER BUSINESS

There were no further items of business.

The Chair thanked members for their patience and those members of the public who attended.

5/23/22

DATE OF NEXT MEETING

The next meeting of the Western Health and Social Care Trust Board will take place on Thursday, 6 July at 11 am in Trust Headquarters, Altnagelvin Hospital, Londonderry.

**Dr T Frawley CBE
Chair
6 July 2023**