

Minutes of a meeting of the Western Health & Social Care Trust Board held on Thursday, 6 June 2024 at 10 am in Lecture Theatre, Trust Headquarters

PRESENT

Dr T Frawley CBE, Chair
Mr N Guckian OBE, Chief Executive

Rev Canon J McGaffin, Non-Executive Director
Dr A McGinley, Non-Executive Director
Professor H McKenna CBE, Non-Executive Director
Mrs R Laird CBE, Non-Executive Director
Dr J McPeake, Non-Executive Director
Mr B Telford, Non-Executive Director

Dr B Lavery, Medical Director
Mrs D Keenan, Executive Director of Nursing, Midwifery and AHPs
Mr T Cassidy, Executive Director of Social Work/Director of Children and Families Services
Mrs G McKay, Director of Unscheduled Care, Medicine, Cancer and Clinical Specialties
Mr M Gillespie, Interim Director of Surgery, Paediatrics and Women's Health
Dr M O'Neill, Interim Director of Community and Older People
Ms K O'Brien, Director of Adult Mental Health and Disability
Mrs K Hargan, Director of Human Resources & Organisational Development
Ms E McCauley, Director of Finance, Contracting and Capital Development
Mrs T Molloy, Director of Performance, Planning and Corporate Services

IN ATTENDANCE

Mr O Kelly, Communications Manager
Mrs M McGinley, Office of the Chair/Chief Executive
Mr P Conwell, Head of Occupational Therapy Services (agenda item 6/24/8 only)

6/24/1

CONFIDENTIAL ITEMS

6/24/2

APOLOGIES

The Chair noted apologies from Mr Hegarty, Non-Executive Director.

6/24/3

DECLARATION OF INTERESTS

There were no declarations of interest expressed.

6/24/4

CHAIR'S WELCOME AND INTRODUCTION

The Chair welcomed everyone to the June Board meeting at Trust Headquarters. He welcomed Dr McGinley and Mrs Hargan who were joining the meeting remotely and those members of the press who were also joining remotely.

- The Chair said his first order of business was to welcome Mrs Donna Kennan, to her first Board meeting as the substantive Director of Nursing, Midwifery and Allied Health Professionals. He said the Board was delighted that Mrs Keenan had been confirmed in this important role and members looked forward to working with her as they address the many challenges that lie ahead.
- The Chair said since the last Board meeting there had been a new Health Minister. He said Mr Swann announced in April that he would stand down as Health Minister in order to stand as a candidate for election as MP for the South Antrim constituency and on 28 May, Mr Nesbitt, MLA, had been confirmed as the Minister for Health.
- The Chair alluded to the extensive media attention in relation to the budget for health and social care for 2024/25. He said the Chairs of the 6 Trusts agreed to develop a press statement on this issue and he was asked to speak on behalf of all the Trusts.

He said as health and social care leaders, the Chairs are deeply concerned about the adverse impact the proposed financial allocation will have for frontline

services and in particular the potential implication for some of the most vulnerable people in our community.

He said while Chairs have no wish to be involved in political controversy and are very mindful of the intense budgetary pressures on all parts of the public sector, on balance they had decided it would be an abdication of their responsibility as Chairs of HSC Trusts to fail to articulate their concerns. He said the focus has to be on everyone in Northern Ireland who are dependent on health and social care services that our organisations have a responsibility to. He said Chairs agreed it was their duty to warn of the very real potential for serious harm to be caused to people in our community who require our help, as a result of the budget that had been adopted by the Executive.

The Chair added that HSC Trusts have a clear responsibility to make efficient use of all public resources and said he wanted to assure the public on behalf of the Board that intensive efforts are ongoing to deliver a significant level of savings this year. He said the Trusts' proposals for savings were detailed in a financial assessment published on 28 May 2024 by the Department of Health. He said these proposals were submitted to the Western Trust's Finance and Performance Committee, however it was also clear that even with the intense efforts to identify these savings, a significant shortfall remained that could only be filled by measures with "high" and "catastrophic" impact on the services for which the Western Trust is responsible.

The Chair said such reductions in expenditure would inevitably include bed closures as well as reductions in outpatient care, operating lists, domiciliary care and nursing care packages. Again he emphasised that this would impact adversely on the whole community in Northern Ireland, particularly the most vulnerable.

The Chair said the service is keenly aware of the need to reform services and invest in new technology and recognises that health drives our economy and contributes on a number of levels to the well-being of our communities. However, he stressed that the reality is that without significant additional funding this year and longer-term financial clarity about funding going forward, the Health Service will be further destabilised with further erosion of the public's trust and confidence in HSC.

The Chair said Trusts will continue to work constructively with staff, elected representatives and other stakeholders to pursue the best outcomes for patients and service users.

The Chair said in response to the Chairs' statement Minister Nesbitt has publicly stated his support for this intervention from HSC Trust chairs. The Minister has

stated that it is important that everyone understands the scale of the budgetary pressures and the potential consequences for services and patients. The Minister has again make clear that he will not be approving “catastrophic cuts”.

- On 28 May the Chair said he was pleased to Chair a meeting of the Trust’s Organ Donation Committee.

As in previous meetings, the Chair said the Committee received an update on donation activity and reviewed the Committee’s Terms of Reference and Membership.

The Chair said the Committee has now began to plan for Organ Donation Week which will take place from 23 – 29 September. He added that it is essential that there is a major boost to public awareness of organ donation as previously there had been a tremendous lift through the adoption of Daithi’s Law however, there is a need not to become complacent by failing to build on that initial momentum.

The Chair said he has also been invited one of the Organ Donation Specialist Nurses to join Trust Board later in the year to present the Trust’s organ donation activity for 2023/24.

- On 30 May the Chair said he was pleased to attend the official opening of the new Minor Injuries Unit at Altnagelvin Hospital. He said during his visit he had been taken to the hub where he saw first-hand the hospital being managed as a whole system as opposed to a collection of separate parts.

The Chair said to facilitate the location of the new Minor Injuries Unit, the Ante Natal Clinic had been relocated to Anderson House along with a new plain film imaging room and said as part of the official opening he was afforded the opportunity to visit both new facilities. The Chair said what had been achieved in both settings was a great credit both to the staff involved but also crucially to our Estates and Capital Development departments.

The Chair advised that the new Minor Injuries Unit has successfully seen, treated and discharged over 2,000 patients since it became operational 2 months ago, with patients experiencing minor injuries being seen more expeditiously resulting in a more efficient turnaround and importantly in a more comfortable and controlled environment. This development also allows patients to be triaged by phone and offered a time slot. These are all very welcome innovations offering greater control to staff and some predictability for patients.

- The Chair advised that from 1 to 7 June, the Western Trust joined thousands of charities and volunteer-involving organisations to recognise and celebrate the contribution volunteers make across the UK during “Volunteers’ Week 2024”.

He said the contribution of volunteers is often unseen, visible only through the incredible impact of volunteering. He added that it was important to take the time during Volunteers’ Week to celebrate their efforts and all they contribute to our local communities and society. The Chair said he had the opportunity to speak to some volunteers and acknowledge their contribution and the significant difference they make to patients.

The Chair said the Western Trust offers a diverse range of volunteer roles and is incredibly grateful to the many volunteers who support our wards and services through providing help with “wayfinding”, assistance during meal times or giving information to patients and visitors.

On behalf of the Trust Board, he extended his sincere thanks to our volunteers for their commitment and energy in supporting our work and helping us to deliver services.

- On Monday, 4 June the Chair said he had the honour of delivering the opening address to the Trust’s annual Leadership Festival in Enniskillen. He said he was also delighted to join the Festival yesterday in Omagh and said he would attend the final day tomorrow in Derry.

The Chair said what was being achieved during this week was a visible example of our staff demonstrating resilience and renewal following the devastation of Covid and the ongoing impact of austerity. The Chair took the opportunity to thank the HR Team, in particular Riona Santiago and her OD team and everyone involved for the energy, creativity and innovation in putting together the component events that made up this week long Festival of Leadership.

6/24/5

MINUTES OF PREVIOUS MEETING – 2 MAY 2024

The Chair referred members to the minutes of the Board meeting held on 2 May 2024.

Dr McPeake advised that he had not been listed as present. The Chair apologised for this oversight and asked subject to this amendment, were the minutes a true and accurate record of discussion.

Following consideration the minutes were proposed by Prof McKenna, seconded by Rev Canon McGaffin, and were approved by the Board as a true and accurate record of discussions at the Board meeting on 2 May 2024.

6/24/6

MATTERS ARISING

The Chair referred to a number of matters arising from the previous meeting.

- **Leadership Festival – “Lessons in Leadership”**
It was noted that this session would take place following the Board meeting from 2 pm – 4 pm.
- **Commissioner for Older People Northern Ireland – Home Truth Report**
The Chair referred to the above report which had appeared in the media and asked that the Trust review the report so that members could get a sense of how far this is an issue in the Western Trust and provide comment on whether this is the experience of the people we have placed in nursing homes.

Dr O’Neill advised that she had sight of the report in advance of publication and that she had provided an update to the Chief Executive for inclusion in his Chief Executive’s report for today

- **RESILO programme ‘Making Hope Happen’**
The Chair said it had been suggested that this should be considered for inclusion in a future leadership event. The Chair advised that the programme has been shared with the Assistant Director of OD for consideration as this is important in respect of the Board’s role as corporate parents and particularly for Non-Executive Directors who are visitors to children’s homes as children in care can experience particular challenges.
- **Infection Prevention and Control**
The Chair referred to previous discussion regarding areas which had not been set a DoH reduction target and said Mrs Keenan had agreed that she would seek regional advice from the PHA on this issue. Mrs Keenan advised that she had secured comments from the Antimicrobial Resistance Programme Manager and she provided members with a brief update on their advice.
- **Infographic in respect of the Temporary Suspension of Emergency General Surgery, SWAH**
The Chair advised that this would be facilitated when the item comes back to the Trust Board.

- **HSC Equality and Disability Action Plans**

The Chair advised that he and Mrs Molloy met on 28 May to discuss the reporting and monitoring of action plans and frequency of updates to Trust Board. He said they have agreed a process for the oversight of these 2 important statutory responsibilities.

- **Theatres Peer Support Quality Improvement Project Chair to consider this as a presentation at a future Trust meeting.**

The Chair advised that peer support and other health and wellbeing initiatives will be considered for inclusion as a future Trust Board presentation. He added that the Corporate Management Team will consider how this successful initiative developed in Theatres might be rolled out across other departments in the Trust.

6/24/7

CHIEF EXECUTIVE'S REPORT

Mr Guckian shared with members his report on critical issues which had arisen since the previous Board meeting.

He said he too would like to begin by congratulating Mrs Keenan on her appointment to Director of Nursing, Midwifery and Allied Health Professionals. He said he was delighted that Mrs Keenan was now confirmed as a permanent member of the Corporate Management Team.

General Pressures

Mr Guckian reported that on Saturday, 1 June there were low numbers of patients waiting for a bed which reflected the best position in some months. However he said pressure had built over the weekend, and by Monday afternoon there had been 42 patients waiting for a bed in Altnagelvin and 22 patients waiting for a bed in the South West Acute Hospital.

Mr Guckian said a recent change however had meant that the Ambulatory Care Unit was not being used as an ED "overflow" which meant it was now fulfilling its intended role. He added that the opening of the Minor Injuries Unit at Altnagelvin Hospital had also meant that the ED had more useable space in which to treat patients and importantly in a much "calmer" environment.

Budget 2024/25

Mr Guckian referred to the extensive coverage of the implications of the budget for health and social care in 2024/25. He said the current priority for the Trust is to ensure delivery of the £24m low and medium impact savings it had agreed and to

contain expenditure at last year's levels. Mr Guckian said should the current budget represent the actual outturn then there will be devastating impacts on service levels, and will impact in a random way given the nature of short-term financial planning involved.

Junior Doctor Industrial Action

Mr Guckian advised members that junior doctors across Northern Ireland are taking part in industrial action from 7 am, Thursday, 6 June until 7 am on Saturday, 8 June.

He said the Trust was proceeding with its industrial action command and control and business continuity arrangements to support affected services where junior doctors provide services. He assured members that the Trust is committed to patient safety during this period of industrial action and a protocol has been agreed to support in-patient and clinically critical services.

Mr Guckian advised that it was anticipated that there will be significant disruption and a number of procedures and appointments will be postponed across our hospital sites. He said any patients affected by the industrial action will be contacted directly and an alternative date will be arranged in due course however he said all patients with scheduled hospital appointments should attend for their appointment unless they have been directly contacted to advise their appointment has been rescheduled.

Mr Guckian said the Corporate Management Team is working with senior staff to ensure emergency in-hours and out of hours cover is maintained to ensure patient safety. He added that emergency care will be provided by senior doctors (consultants) and speciality doctors during the period of the industrial action and all admissions and calls will be routed via our hospital switchboards as normal during industrial action.

Report from Older People's Commission

Mr Guckian advised that the Trust received a letter dated 15 May from Mr Mark McGuicken, Director of Disability and Older People, in relation to the Commissioner for Older People Northern Ireland's Home Truth Report outlining the progress made by Workstream 3 of the Social Care Collaborative Forum on Enhancing Care in Care Homes. He said 1 of the actions of this group was to formally sign off the recommendations from this report.

Mr Guckian explained that, Mr McGuicken outlined the recommendations that are fully or wholly assigned to Trusts and he was therefore seeking the Trust Board's acceptance of this position.

Mr Guckian said in total there were 14 recommendations, 11 fully and 3 partially for the Trust to action and these fell under the headings of:-

- Safeguarding and Human Rights;
- Care and Treatment;
- Medicines Management;
- Staff Skills;
- Competence;
- Training and Development; and
- Accountability and Governance.

Mr Guckian said the Interim Assistant Director of Community & Older People has established a Home Truths Report Action Group to consider how the Trust will progress the 14 recommendations. He added that a number of the recommendations had already been implemented as part of the Trust development of Independent Sector Assurance Forum and the Independent Sector Community Governance Group (ISCGG) and through the work of the Adult Safeguarding and Protection team and the Care Home Support team. Mr Guckian said the outworking of this group will report to the ISCGG and will be accountable to the Directors' Oversight Group. The timeframe for completion of the work is anticipated to be 6 to 12 months.

MLA Briefing

On 3 May Mr Guckian said he was pleased to attend the latest MLA Briefing. He said robust discussion took place as always with MLAs receiving a presentation on Population Health West and an update on Community Care including Primary Care. He noted that updates were also provided on:-

- ED Pressures, Escalated beds, MIUs, Cervical Screening Service
- Workforce Update & Re-evaluations and
- Nursing & AHP Services Directorate

Health and Social Care System Efficiency Review

Mr Guckian advised that on 7 May the Health and Social Care System Efficiency Review team met with the Corporate Management Team.

He said the Review Team discussed with the Corporate Management Team the critical role the Trust has in the upcoming Health and Social Care System Efficiency Review in Northern Ireland, by the GIRFT Projects Directorate at the Royal National Orthopaedic Hospital Getting It Right First Time (RNOH/GIRFT) programme.

Mr Guckian explained that Getting It Right First Time (GIRFT) is a national programme in England under the chairmanship of Professor Tim Briggs. He said it has been designed to improve patient care, by reducing unwarranted variations in clinical practice. He said the GIRFT Projects Directorate which is also under the chairmanship of Professor Briggs has been commissioned by the Department of Health to undertake this review.

Mr Guckian said the Review Team visited Northern Ireland for a 2-day visit, meeting with various leads. He said in order to commence the review, the Team had arranged a virtual meeting with the CMT to provide an overview and to gain insights into the areas to be reviewed. In addition he advised that the Review Team had asked for data and information and is also planning to meet with various leads in our Trust individually before and during their visit.

Ulster University

On 15 May Mr Guckian said he was pleased to welcome Professor Malachy O'Neill, Director of Regional Development Ulster University and Vice Chancellor Paul Bartholomew to the Trust.

Mr Guckian said Ulster University is one of the key Partner Organisations for the Trust with the C-TRIC Research organisation being a key element of this along with the Graduate Entry Medical School and Life Sciences Facilities at the Magee Campus.

In recognition of the close working relationship between the Trust and Ulster University, Mr Guckian said the University's Vice Chancellor and Professor O'Neill visited the Trust's Medical Imaging facilities and the North West Cancer Centre. He said this was an opportunity to illustrate the training and education experience for Ulster University students and graduates and the visit would help to strengthen the development of closer ties between our two organisations.

Mental Health Awareness Week

On 15 May, as part of Mental Health Awareness Week, Mr Guckian said he joined staff and service users in a walk around the Gransha site. He said this was well supported and helped to encourage more active lives both for Trust staff and the community.

Model Complaints Handling Procedure (MCHP) for the HSCT Sector

Mr Guckian said on 20 May he welcomed Mrs Margaret Kelly, NIPSO, to the Trust for a pre-engagement meeting to discuss the development of a Model Complaints Handling Procedure (MCHP) for the HSCT sector.

Mr Guckian said Mrs Kelly wrote to him in November 2023 regarding the establishment of the Health and Social Care Trust (HSCT) strategic and operational networks and advised these networks are a critical step in the co-development of a new Model Complaints Handling Procedure (MCHP) for health and social care. He said it is essential that the model developed embeds a culture that not only welcomes, encourages and listens to the patient voice; but one that views their experiences as an essential element in ensuring continuous improvement to the delivery of care within the HSC sector.

Before the first meeting of the strategic network, Mr Guckian said Mrs Kelly considered it would be helpful to meet with each Trust Chief Executive on a one-to-one basis. The purpose of the meeting was to discuss the necessary commitment at senior level required to collaboratively develop a MCHP and to critically ensure the wider culture change for effective implementation is recognised.

Fostering Network

Mr Guckian advised that on 23 May the Trust's Fostering Network arranged a visit of Fatima Whitbred MBE, who herself was in the care system up to the age of 14. He said the event was to promote fostering and the participants convened at the Guildhall for a walk around Derry. A cross section of staff and foster carers attended this very successful event he said.

Northern Ireland Breast Screening Programme

On 23 May Mr Guckian advised that he attended a feedback session with the Public Health Agency in respect of its quality assurance visit to the Trust's Breast Screening Unit as part of the Northern Ireland Breast Screening Programme.

Mr Guckian advised that the Public Health Agency (PHA) led a multi-disciplinary team to undertake this Quality Assurance Visit. He said prior to the verbal feedback session, members of the Quality Assurance Team had met with relevant colleagues to discuss issues identified during the visit and discuss concerns that the Trust had.

Mr Guckian said the Quality Assurance Visit was an important element of the Quality Assurance function of the Breast Screening Programme and the Quality Assurance Team sought to identify any areas of risk which might have an adverse effect on the delivery of this important service.

Level 3 Managers' Framework Wrap Up Session

On 24 May Mr Guckian said he was pleased to attend the Level 3 managers' framework "wrap up" session where the delegates reflected back on their experience of this development programme. He said the group was very enthusiastic regarding

the impact of this experience and they commented positively about the network created by this Management Development course.

“Being Open” Framework

On 29 May Mr Guckian advised that he had a meeting with Mr Peter McBride who has been engaging with Trusts on behalf of DoH to gather views and inform the development of the “Being Open” framework for the Region.

Mr Guckian said Mr McBride would very much like to engage with our staff on this issue and the format of this engagement will be over a number of days he will meet with senior individuals and groups of staff, and seek their views about how best to support staff and encourage an open culture.

Mr Guckian advised that in advance Mr McBride has asked for the opportunity to engage with the senior management team and the Trust Board and that he would share future Board dates with him to take this forward.

RQIA Review

Mr Guckian referred to the Department of Health having commissioned RQIA to conduct a review of the pathways associated with the temporary suspension of emergency general surgery at South West Acute Hospital.

He advised that RQIA conducted fieldwork on Tuesday, 4 and Wednesday, 5 June 2024, in South West Acute Hospital. He said the purpose of this fieldwork was to provide RQIA and its Expert Review Team an opportunity to explore its “Key line of Inquiry” which has been developed from the RQIA Review Terms of Reference, documents submitted by the Trust, and the Expert Review Team.

Mr Guckian said the Trust would receive a report in due course.

Leadership Festival

Echoing the Chair’s comments, Mr Guckian said this week the Trust was hosting a Leadership Festival which was launched in Enniskillen on Monday, 3 June by the Chair.

Mr Guckian said the Festival has continued throughout the week, closing tomorrow, and he would encourage as many staff as possible to attend.

Mission Cup

Mr Guckian advised members that the Pre-operative Assessment Team are the latest recipients of the Mission Cup. He said this reflected the commitment of the team and how it is respected by colleagues.

Men's Health Week

Mr Guckian advised that next week is Men's Health Week running from 10 June to 16 June ending on Father's Day. He said the theme this year is "know your numbers" referring to lifestyle and health measures to improve health and wellbeing choices. Mr Guckian said research has shown that men are less likely to seek mental health support so men's health week will encourage men and boys to talk to family, friends, colleagues or GPs should they need support.

6/24/8

SERVICE IMPROVEMENT STORY – NURSING, MIDWIFERY AND AHPS

The Chair welcomed Mr Patrick Conwell, Head of Occupational Therapy Services, to the meeting.

Mrs Keenan thanked members for the opportunity for Mr Conwell to attend to present the outcome of a Quality Improvement Project in respect of the assessment clinic for low complexity cases within Occupational Therapy Services.

Mr Conwell advised that the aim of the project was to reduce waiting times for non-complex referrals to Band 5 Community Occupational Therapists in the Omagh Locality by 10% by May 2024. He said the Community Occupational Therapy waiting list was screened according to urgency and complexity, with referrals being dealt with in chronological order. Mr Conwell said assessments were usually completed in the service user's home, resulting in travel time for the Occupational Therapist and costs being incurred.

Mr Conwell advised that 61% of referrals on the routine waiting list were screened to Band 5 Occupational Therapists in October 2023 when the QI project commenced. He said there was limited Band 5 capacity to address these referrals as there was only a 1.2 wte in the Omagh locality. As a result of this staffing, there was a lengthy waiting list for low complexity level Band 5 assessment of 75 weeks in October 2023.

Mr Conwell advised that a low complexity level assessment clinic was set up as part of the QI project. He said this alternative method of service delivery gave service users, who were deemed appropriate to attend, a clinic setting and the opportunity to

be fast-tracked. He said service users travelled to a clinic for assessment to make more efficient use of resources and reduce waiting times for assessment.

Mr Conwell shared with members the results and outcomes from the QI project. He said 23% of the low complexity level Band 5 referrals were screened to be “suitable” for the assessment at the clinic. He said the remainder required domiciliary visits or had other outcomes. He noted that 15% of referrals screened no longer required Occupational Therapy services and were discharged and 70% of service users were offered an appointment to attend the clinic.

Mr Conwell said he was delighted to advise that the waiting list reduced from 75 weeks in October 2023 to 40 weeks in May 2024.

The Chair invited members to raise any questions or clarification in relation to the project.

Mr Guckian referred to the DNA rate and said other services experience similar challenges. He asked was there any particular reason why the DNA rate was high.

Mr Gillespie said Mr Conwell’s feedback was similar to the experience in surgery and said it is important to get a message to the public about the vital importance of turning up for appointments. The Chair suggested a collective meeting of those managing waiting lists to see what can be done. He said it was important to provide specific messaging for our geography particularly given the rurality of the Trust and related challenges of transport and isolation.

Dr McGinley commended the excellent initiative and how it had improved the service. She referred to the point regarding DNAs and highlighted that the Omagh and Fermanagh areas have poor public transport. She asked if there had been any follow up with the 20% that did not attend as to the reasons why they did not and asked what happens these individuals now.

Mr Conwell said individuals who did not attend an appointment were discharged off the waiting list. He said it was assumed they were happy to attend the clinic as they had been screened in advance of being offered an appointment and following the issuing of their appointment date they received a telephone call. Mr Conwell said at the screening stage the individual is asked if they have any difficulties getting to the clinic.

Ms O’Brien welcomed the QI project and asked was there appetite for scale and spread. Mr Conwell said the appetite was good and that spread was also being considered for other AHP Services.

The Chair thanked Mr Conwell for attending Trust Board and it said it was clearly a very effective initiative with real outcomes and was the type of improvement project that could be replicated into other areas and services. Mrs Keenan commended Mr Conwell for his leadership of this project.

6/24/9

CORPORATE RISK REGISTER

Dr Lavery referred members to the Trust's Corporate Risk Register and Assurance Framework. He said there were 17 risks on the Corporate Risk Register as agreed at Trust Board on 2 May.

Dr Lavery advised that following discussion at CMT on 28 May he was bringing for members' consideration 2 new risks:-

- Inability to retain ENT Head and Neck Service Provision; and
- Risk of no GP cover in Trust managed GP Practices.

Dr Lavery said in respect of GP cover this had become an issue for the Trust. He said the Practices had lost some Locums recently and over the summer months Locums would be taking annual leave. Dr Lavery said the Trust is seeking to recruit salaried GPs. Dr McGinley acknowledged the issues around primary care and said it was important for the Trust to be strategic as far as possible however she accepted that these were challenges that were deepening.

Dr Lavery referred to a material change to risk ID1487 and a proposal to amend the risk description and a proposal to increase the risk's current score. Dr Lavery said the escalated score would be kept under review.

Dr Lavery referred to the Summary report and confirmed that all corporate risks had been updated within this quarter and all action plans were up to date.

Mrs Laird referred to risk ID1487 and asked if the controls and mitigations around safe staffing were sufficiently well articulated. Dr Lavery advised that the current industrial action today by junior doctors was about pay. Mr Guckian said the impact of the industrial action today was a reduction in safe service provision and in this regard the Trust had cancelled services to keep patients safe as there are no junior doctors working.

Mrs Hargan also assured members that this is being monitoring very closely through "Trust Silver" and in the lead up to industrial action the Trust looks at all rotas which

will be impacted by the strike action via Bronze control and escalated to Silver control. She said this was a dynamic process that is managed for each period of industrial action.

Mrs Laird felt that perhaps this needed to be better articulated in the narrative.

Dr Lavery assured members that there is robust emergency cover at all hospital sites provided by Consultants and Specialty Doctors.

Mr Laird referred to the new risk regarding Trust managed GP practices. She asked who was sharing the ownership of this risk with the Trust. Mr Guckian advised that once the Trust became responsible for the GP Practice, he became the Accounting Officer for the service. He reminded members that these were GP practices that collapsed and that this was therefore a very “fluid” situation. He said there is the possibility that there will be days when there is a reduced GP cover in a practice but the Trust will send Early Alerts to the DoH and will have arrangements in place to provide cover. Mr Guckian said in his letter to the Permanent Secretary he did specifically highlight this risk and the Trust has been very clear about this and he believed we are likely to be conjoined with the DoH.

The Chair recognised this additional work for the Trust and said managing GP practices requires organisational energy and resource. He said the Trust’s senior leadership is not being resourced to manage GP practices and yet there is a clear expectation that our senior leadership is being required to do more. The Chair said he believed it was the right thing to commit to hold primary care together and this reflected the public service values that we are all committed to. However he said that our management resource is finite. The Chair said filling the GP rotas would take ever increasing effort and energy from our staff going forward.

Dr McPeake said he welcomed the inclusion of primary care on the risk register. However, he said it was focussed on one point however there was a second aspect in that there was the risk that we are being asked to take on more and more practices. He said there was a recognition that this is likely to increase and he indicated that it was important that this should be acknowledged.

Dr McPeake referred to the Lookback he is currently involved in and said the Lookback had not found any cases where a patient had come to harm. He said it is proposed that a full update on the Lookback will be shared with members at the September Board meeting. He added the SPPG has been helpful with regard to the Trust’s position however the Trust has signalled its desire for a long term solution to the challenge of supporting failing practices.

Following consideration of the proposals as outlined by Dr Lavery with regard to amendments and additions to the Corporate Risk Register these were unanimously approved by the Board.

6/24/10

ENVIRONMENTAL CLEANLINESS REPORT – JANUARY – MARCH 2024

Mrs Keenan referred members to the Environmental Cleanliness report for the period January – March 2024.

Mrs Keenan advised that audit compliance for quarterly audits had been 94% with compliance for the 6 monthly audits being 88%. She said the areas that had not completed their audits as per the schedule have been highlighted to the relevant Head of Service/Lead Nurse to address and action.

Mrs Keenan continued to advise that for this quarter Managerial Audit compliance had been 90%. She said the outstanding audits were cancelled due to the Trust being in Business Continuity Mode, and Industrial Action, with 22 areas not audited during 2023/2024.

Mrs Keenan advised that the schedule for managerial audits for 2024/2025 will focus on ensuring areas which did not have a managerial audit in 2023/24 are priority for the start of the new audit cycle and said 5 of these had already been completed at time of the report.

Mrs Keenan said focused work continued to address a number of minor outstanding estates jobs within Altnagelvin Theatre areas and the Emergency Department.

6/24/11

QUALITY IMPROVEMENT MONITORING – VTE

Dr Lavery referred members to the Quality Improvement Monitoring Report in respect of 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 has been endorsed by DoH and implemented in Northern Ireland and that assessing the risks of VTE and bleeding is a key priority for implementation of the guidelines.

Dr Lavery said compliance with completion of the VTE Risk Assessment within 24 hours of admission is a commissioning priority and Trust compliance is reported

quarterly to the PHA. He said the target to sustain improvement with VTE risk assessment across all adult inpatient hospital wards was to achieve 95% compliance throughout 2023/24. He said compliance reported to the PHA for 2023/24 was 95.4% on average.

Dr Lavery 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. He said this position 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 93.2% in April 2023. Dr Lavery said this position continued to improve throughout 2023/24 with the number of audits submitted ranging between 88.6% and 97.8%. However, 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. Dr Lavery assured members that a VTE Audit Escalation Process is in place to manage this which involves escalation to an Assistant Director in the first instance and onward escalation to Director and Medical Director for any continued instances of non-compliance. Members were advised that monthly reminder emails continue to be issued to the VTE Leads for all adult inpatient wards and compliance continues to be monitored as a standing agenda item by the Trust VTE Group.

Dr Lavery advised 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.

Dr Lavery referred members to the monthly compliance by ward as recorded in the run charts provided in the associated report.

6/24/12

**UPDATE ON PROPOSAL TO CONSULT - CHANGE OF SERVICE (PERMANENT)
- EMERGENCY GENERAL SURGERY, SOUTH WEST ACUTE HOSPITAL**

Mr Guckian advised members that this item had been deferred.

6/24/13

ENDOWMENT AND GIFTS COMMITTEE

13.1 Minutes of meeting held on 12 April 2024

Rev Canon McGaffin referred to the minutes of a meeting of the Endowment and Gifts Committee which had taken place on 12 April for noting. She said a verbal update had previously been provided to members.

13.2 Verbal update from meeting held on 7 May 2024

Rev Canon McGaffin provided members with an update on discussion at the Endowment and Gifts Committee meeting held on 7 May. She said discussion took place on:-

- Proposal for leadership festival
- Update on work being taken forward from staff support fund on team development and ethnic diversity
- Term of Reference – reviewed and updated
- Update on £3m staff fund and the work of the sub committee
- Brief provided on a grant from NHS charities of £180k with Belfast Trust as the lead organisation.

The Chair referred to the Dragon's Den session at the Leadership Festival and said it was an excellent session showcasing innovative submissions.

13.3 Revised Terms of Reference

Rev Canon McGaffin shared with members a revised Terms of Reference for the Committee. Following consideration, they were proposed by Rev Canon McGaffin, seconded by Mrs Laird and unanimously endorsed by members.

6/24/14

AUDIT AND RISK ASSURANCE COMMITTEE

14.1 Minutes of meeting held on 12 February 2024

Mr Telford referred to the minutes of a meeting of the Audit and Risk Assurance Committee on 12 February for noting. He said a verbal update had previously been provided to members.

14.1 Verbal update on meeting held on 13 May 2024

Mr Telford provided members with a verbal update on the Audit and Risk Assurance Committee meeting held on 13 May. He advised that:-

- The Committee was provided with an update on the Corporate Risk Register.
- The Committee approved a Committee self-assessment checklist 2023/24 – approved
- The Committee was briefed on 9 Internal Audit reports completed since February 2024 and received an update on the follow up report on the Management of Petty Cash.
- The Committee was joined by Mrs McKay who attended to discuss the work ongoing to address the medical job planning recommendations.
- Ms McCauley took Committee through the Trust's Draft Annual Report & Consolidated Accounts and Draft Charitable Trust Fund Accounts and also the Governance Statement and discussed significant internal control divergences.
- The Committee received a report on the Fraud position and noted the updated Bribery Policy and Response Plan which were approved through the Trust Policy Group.

Mr Telford advised members that he attended a meeting of the ALB ARAC Chair's Forum organised by the DoH on 29 May and said significant discussion had taken place on the health budget, Encompass and the role of Trust Audit and Risk Assurance Committees. He said he would provide a fuller update to the next meeting of the Audit and Risk Assurance Committee.

The Chair referred to job planning and said Mrs Laird had raised her concerns with regard to this Audit outside the Board meeting. Mr Guckian provided an assurance to members that the Corporate Management Team will be receiving an update report on this issue every fortnight and the position will be reviewed at the end of June with a report coming back to Trust Board. It was noted that the Trust is required to show an improved position by August.

Mr Telford said it was important that job plans are quality documents. Mr Guckian accepted this and said while some job plans are straight forward, some are complex because the Trust has changed services and pathways.

6/24/15

2023/24 PERFORMANCE MANAGEMENT REPORT – FULL YEAR

Mrs Molloy advised that late yesterday evening she was advised that the Auditors are insisting that “rounding” is corrected in the Trust’s year end performance report. She said that by doing this it would have changed the report previously shared with members however she assured the Committee that rounding would have no material difference on the Trust’s year-end report.

Mrs Molloy said she was presenting today the full 23/24 year performance to Trust Board. She said this was always a significant point in her reporting year to members as it summarised the outcome of a full year of work by all of the service teams and her performance and information teams, and gave Trust Board and the public an opportunity to hear about the successes and the challenges the Trust has experienced during the year being reported on. Mrs Molloy said the performance report focussed on the 64 Service Delivery Plan targets set by DoH SPPG at the outset of the year.

Mrs Molloy said her report could not fully reflect every service the Trust provides and said she wanted to acknowledge that, but it did provide the position on the targets which the Trust is specifically held to account for delivering in our Accountability processes with SPPG and DoH, which are primarily activity targets and based on fully recovering activity levels after the pandemic, and in a range of areas they are stretch targets over and above that. Mrs Molloy said the SPPG gives Trusts a RAG rating for each service target in its performance reports, and on a quarterly basis it goes further and identifies to DoH whether the delivery position which the Trust presents is deemed unacceptable.

Mrs Molloy said members would see, that based on the Service Delivery Plan activity targets for the year, the Trust had 39% of its targets remaining as “Red”, and 61% as “Amber or Green”. Regionally, Mrs Molloy said the Western Trust had the lowest number of “Red” areas, and the lowest number of areas where service delivery was deemed “unacceptable” and therefore the Trust will be seen as the best performing Trust as we enter formal accountability processes with DoH, which start next week with our Ground clearing meeting.

Mrs Molloy said her report provided, section by section, the position against the SDP targets, which had remained mainly activity based, and focussed on rebuild and moving to stretch targets. She said each section also provided Board members with the position against Commissioning Plan Direction ACCESS targets, giving the Board an insight to levels of timely access and numbers of patients breaching the Ministerial standards which pre-date Covid.

Mrs Molloy said there were a number of key messages:

- The report gives the Board an insight to the huge effort which service teams have made to maintain good performance or improve their performance from last year. Mrs Molloy said an additional table has been provided at section 3 which shows the progress over the full year in each service area and said from that members would see that a number of services started the year not meeting targets, but achieved a turnaround in their performance as the year progressed.

Mrs Molloy said this progress has been in the face of many challenges, not least dealing with very periods of industrial action, several severe weather events, a very difficult winter with many challenges to hospital and community in maintaining flow, and a range of other demands including maintaining financial stability and to manage shortages in workforce. Mrs Molloy commended the efforts of all staff, and their Directors in delivering this “best in Northern Ireland” performance.

- Mrs Molloy said there was also an important message that despite these efforts, the Trust’s waiting lists continue to grow, and that is an indication that even though we are performing at acceptable levels we cannot keep up with presenting demand. She said stark examples of this were in outpatients referrals where the Trust performed at >100%, yet the number of patients waiting more than 9 weeks grew by 8,000 patients to 61.5k patients; our imaging waiting lists grew by 6,000 patients despite well exceeding the target; and similarly our CAMHS services exceeded 100% yet their waiting list grew by 120 children. Mrs Molloy said this presented a worrying picture of demand the Trust cannot meet, even though we strive to be more productive and efficient, and will require more capacity to be commissioned or that the demand on services reduces.
- Mrs Molloy acknowledged that there were areas where the Trust remains very challenged particularly in unscheduled care, cardiac services, endoscopy, some areas of AHP, and antimicrobial consumption. However, she said there were equally areas where we have delivered an outstanding performance, and indeed supported other Trusts such as our breast cancer services, our 31 day cancer treatment, our reduction in unallocated children’s cases, and psychological therapy and AMH performance as well as our HCAI levels for C-Diff and MRSA. Mrs Molloy said the Trust should be rightly proud of those services which has given the population of the West the best performance in NI in these areas.

Mrs Molloy commended her report to members. She said it was a complex and detailed report but she hoped that it would give the Board a comprehensive picture and appropriate insight into the work of Trust services this year.

Concluding, Mrs Molloy once again acknowledged all of the efforts of the Trust teams as we formally conclude the year.

The Chair asked members if they wished to raise any issues.

Dr McPeake welcomed the report and said he found it very informative and liked that the Trust was not complacent about its performance. He asked what services were deemed unacceptable. Mrs Molloy said there were 17 areas, 12 were the full suite of unscheduled care targets however she assured members that the Trust was exactly in the same place as all Trusts in Northern Ireland; the other areas included the Omagh Day Procedures Unit in respect of productivity however she assured the meeting that this was on an improvement trajectory; Endoscopy; Cancer 62 day performance and 2 antimicrobial prescribing targets.

Rev Canon McGaffin said she spoke to Mrs Molloy this week on the Trust's year end performance and said it was worth noting that demand is outstripping provision. She echoed Mrs Molloy's comments that it is important that all teams and services are thanked and encouraged for the work they do. Rev Canon McGaffin said she particularly liked the last 3 pages of the report which she found very helpful.

Dr McGinley referred to unscheduled care and asked was there a mitigation plan to deal with performance against the unscheduled care targets. She alluded to the huge increase in pressure and asked how the Trust would manage this going forward.

Mr Guckian said one area where the Trust is red is in AHPs but said the DoH does not monitor this as it only monitors elective performance. However, Mr Guckian said the Trust's own internal accountability processes monitor this.

Mr Guckian said performance in respect of Occupational Therapy was discussed today and its performance is monitored against performance pre-Covid in 2019. Mr Guckian said it is the intention to share performance figures at the Trust's end of year accountability meeting.

The Chair commended Mrs Molloy on the detail of her report. He referred to deprivation and the battle with Treasury around needs based funding. He said the DoH needs to seek analysis to make a bid for additional funding on a reformed basis and that Universities should be asked to support this work as Trusts do not have the expertise or capacity to do it.

Mr Telford agreed with this suggestion and said the population continues to grow and people are living longer therefore Trusts need more funding to do more things as people are living for longer.

Mrs Laird said as a Board member she wished to pass on her congratulations to everyone on this performance. She said it was good to see evaluation that plays out the inequalities that we start with which are not factored in. She said the reduction in resources, deprivation and growing demand is a multi-dimensional challenge.

Prof McKenna said when the Vice-Chancellor of Ulster University visited Altnagelvin Hospital recently he got the message about deprivation and health inequalities and the University is very keen to have a Professor of Public Health and a Professor in Health Economics to examine this and the implications of this for people who live in areas of high deprivation.

Mr Cassidy said when you examine deprivation you will see the under 18 population has fallen. However, he said research shows that deprivation impacts on family and child care services and if you examine what social economic strata the birth rate has fallen he would suspect it is in the “high economic strata” of our community.

The Chair said it is important that this is included in the Trust’s Communications Strategy that deprivation is a huge issue in rural Ulster where people are isolated as they do not have their families around them. He said in addition providing domiciliary care service in rural Fermanagh is much more expensive than in a city.

6/24/16

CORPORATE PLAN 2023-27

Mrs Molloy reminded members that the Trust Board had been briefed at its last meeting on the progress to finalise the Trust’s Corporate Plan and an advanced draft was circulated at that time for feedback and comment. As previously outlined to Trust Board, she said this final draft plan reflected the findings from the engagement exercise as well as input from Trust Board and Corporate Management Team.

Mrs Molloy said a number of the Non-Executive Directors had provided comments since the last Trust Board meeting, and a common proviso was the challenging financial context ahead with a Corporate Plan that brought a healthy consistency in the strategic priorities, and the right balance of aspiration and ambition.

Mrs Molloy said as many of the Trust’s services are close to or exceed pre-pandemic levels of service delivery, the new Corporate Plan sees a shift to managing safety, quality and workforce risks, increasing productivity to improve access, and continuing to manage and deliver services through a period of significant financial constraints, increasing demand and limited or reduced capacity.

Mrs Molloy advised that the draft Corporate Plan 2024-2027 had now been finalised, and was being presented to Trust Board for approval. The design of the

presentation format plan has also been concluded and the document presented to Trust Board is in its proposed publishable format.

Mrs Molloy said subject to approval by Trust Board, it is proposed that the Corporate Plan 2024-27 will be launched at the end June/early July 2024 and a communication plan has been developed to support this.

Members discussed the Plan and following minor changes it was proposed by Dr McPeake, seconded by Rev Canon McGaffin and unanimously approved by the Board.

6/24/17

FINANCE AND PERFORMANCE COMMITTEE

17.1 Minutes of meeting held on 30 January 2024

The minutes of a meeting of the Finance and Performance Committee were noted. A verbal update had been given to a previous Board meeting.

17.2 Verbal update from meeting held on 4 June 2024

It was noted that this meeting did not take place.

6/24/18

ANY OTHER BUSINESS

The Chair said he was delighted to advise members that Dr McGinley had agreed to become an “advocate” for carers. He said he would now facilitate arrangements to put this role in place.

6/24/19

DATE OF NEXT MEETING

The next meeting of the Western Trust Board will take place on Monday, 15 July at 2.00 pm in Lecture Theatre, Trust Headquarters and via Teams.

Dr Tom Frawley, CBE
Chair
15 July 2024