

Minutes of a meeting of the Western Health & Social Care Trust Board held on Thursday, 2 February 2023, in Omagh Hospital and Primary Care Complex

PRESENT

Mr S Pollock, 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
Mr M Gillespie, Acting Director of Acute Services
Mrs D Keenan, Interim Executive Director of Nursing/Director of Primary Care and Older People's Services
Dr E Brady, Interim Director Adult Mental Health and Disability
Ms E McCauley, Director of Finance, Contracts & Capital Development
Mrs T Molloy, Director of Performance and Service Improvement
Mrs K Hargan, Director of Human Resources

IN ATTENDANCE

Mr O Kelly, Head of Communications
Mrs M McGinley, Executive Officer to Chair/Chief Executive
Mr D Gibson, Consultant Orthopaedic Surgeon and Ms N Glass, Service User (for agenda item 2/23/8 only)

2/23/1

CONFIDENTIAL ITEMS

2/23/2

CHAIR'S WELCOME AND INTRODUCTION

The Chair welcomed everyone to the February Board meeting. He referred to a report of his business from the previous meeting.

- The Chair was delighted to advise that the DoH has approved the reappointments of Mr Hegarty, Mrs Laird and Dr McPeake, Non-Executive Directors, for another 4 year term.

- Since the last meeting the Chair advised that he had visited a number of Trust facilities. On 11 January the Chair visited the Laundry and Estates Departments on the Altnagelvin site and on 23 January he visited the Gateway Team, Adult Safeguarding Service and the Children's Department within the Women and Children's Directorate.
- During the month the Chair advised that the Staff Recognition Awards final panel concluded the shortlisting for the Staff Recognition Awards on 9 March. He said over 300 nominations had been made which made shortlisting difficult as all nominations were worthy winners.

2/23/3

APOLOGIES

There were no apologies received.

2/23/4

DECLARATION OF INTERESTS

There were no declarations of interests.

2/23/5

MINUTES OF LAST MEETING – 5 JANUARY 2023

The minutes of the meeting held on 5 January were proposed by Mrs Laird, seconded by Dr McPeake and unanimously approved by the Board as a true and accurate record of discussion.

2/23/6

MATTERS ARISING

There were no matters arising.

2/23/7

CHIEF EXECUTIVE'S REPORT

Mr Guckian referred to a report of business since the previous meeting. Beginning with general pressures, Mr Guckian advised that the Trust's hospitals, and many other services, remained under intense pressure. He said the Full Capacity and Escalated Bed protocols had been invoked, however, the number of patients was still

a challenge. Mr Guckian said he wanted to apologise if the timeliness of our care was not at the standard our patients or clients would expect.

Mr Guckian joined the Chair in congratulating Mrs Laird, Mr Hegarty and Dr McPeake on their reappointment to the Board and said he looked forward to continuing to work with them in the coming years.

Mr Guckian referred to the Trust's consultation on Emergency General Surgery Changes at the South West Acute Hospital. He said the Trust had embarked on a consultation process which included 7 public facing engagements spread across the geography of Fermanagh and West Tyrone and an additional 2 online consultation events. He said the events were being held to cater for anyone who may use any of our services at South West Acute Hospital and who wish to contribute in person to the consultation process.

Mr Guckian advised that the Trust worked with Fermanagh and Omagh District Council colleagues in the planning for these events. He said to ensure everyone in the area gets the opportunity to have their voices heard, the Trust is offering a public event in each of the 7 Fermanagh and Omagh District Council 'District Electoral Areas'. In addition, the Trust is also hosting 2 online sessions for anyone who is unable to attend the 7 face to face events, providing the opportunity to attend either a daytime or evening online engagement. This significant series of consultation engagements can cater for a potential attendance of over 4,000 people.

Mr Guckian said it was very important to note that access to the public facing events must be by ticket only to ensure public safety and assured members that the online registration at Eventbrite had been simplified for ease of use. He said the Trust had worked with colleagues in Fermanagh and Omagh District Council to review venue capacity and ensure that the Trust manages attendance at each event according to that capacity. Mr Guckian added that for those who may find it difficult to register online, the Trust will hold some manual tickets and further information will be provided on this in the coming days on how to access these. Mr Guckian said in addition to the list of consultation events there is also an online questionnaire which is available for the public to complete and inform the Trust of their views and to feedback on the consultation documents. Mr Guckian assured members that the Trust will continue to keep the matter under review as the consultation events progress.

Mr Guckian advised members that the Trust held its first consultation public meeting on Monday, 30 January in Enniskillen. He said approximately 190 people attended and unfortunately it was difficult for the Trust to make its presentation or to answer some questions, due to the level of noise from some in the crowd. He said the second event, held in Lisnaskea, was a much more constructive event and the Trust was able to listen to the concerns expressed by the local population and answer all questions in an environment of respectful challenge. There was approximately 80 people in attendance.

Since the last update to Trust Board, Mr Guckian said the Trust continued to experience further industrial action. He said this included both strike action and action short of strike with the most recent strike taking place on 26 January which involved UNISON, NIPSA and UNITE members. Members were advised that further strike days have been notified by UNITE on 16 and 17 February and 23 and 24 February.

Mr Guckian said all of this action was having a very significant impact on a wide range of Trust services and in the recent full day strike on Thursday, 26 January, a number of services faced very significant challenges in maintaining services. He said domiciliary care services faced particular challenges, as did some of the Trust's surgical services, with 3 red flag surgeries cancelled. Mr Guckian added that a very wide range of other appointments and procedures were cancelled and a number of Trust services were only able to operate bank holiday levels of service.

Mr Guckian said once again there was a very significant amount of management time diverted to contingency planning and negotiation of derogations with trades unions. He noted that trades unions worked collaboratively with HR and service managers in the lead up to the strike day to negotiate derogations and to try to secure staff to maintain services. However Mr Guckian said this did not work in all cases and in some areas the Trust was not able to secure staff to work to derogated staffing levels and services were affected.

Mr Guckian noted that the Trust had recently received an update from payroll shared services confirming that 1,491 staff across the Trust participated in the strike action in December.

Mr Guckian said the Trust has continued to provide updates to the Department of Health and SPPG on the impacts of the industrial action on Trust services and seek updates on what action is being taken nationally to seek to resolve the dispute.

On 18 January Mr Guckian said the Trust was delighted to launch its regional overnight elective stay centre at South West Acute Hospital, with the first procedures occurring in the coming weeks. He said this was a very positive step forward in the development of the overnight elective care centre and confirmed the commitment of the Trust to fully utilise all of the theatre capacity across SWAH to benefit the growing numbers of patients on waiting lists.

During the month Mr Guckian said the Trust welcomed the fifth cohort to the Safety Quality West Quality Improvement Programme. He said 55 staff will work together in 17 multi-disciplinary teams to embark on projects that will aim to maximise capacity and improve access to Trust services.

Mr Guckian advised that staff, relatives and patients came together on 20 January to celebrate the newly named North West Centre for Neurological Rehabilitation Centre, formerly Spruce House.

He said this Centre, a specialist facility situated on the grounds of Altnagelvin Hospital, is a unique and modern centre specifically designed to assess and evaluate the needs of patients who have acquired brain injury or neuro-disability. He said over the past 5 years the service had been reformed and had evolved into a Centre for “Neurological Rehabilitation” with a consultant led service and specialist multi-professional teams. Mr Guckian said the rebranding of the Centre was to support the modernisation of the service and to ensure that the facility’s name reflected the invaluable work that takes place there.

Concluding his report, Mr Guckian said during the month the Trust was delighted to welcome the Chief Nursing Officer, Maria McIlgorm, to the South West Acute Hospital, along with Dale Spence, Midwifery Officer DoH. Ms McIlgorm and Ms Spence met with staff from maternity and neo-natal as well as Ward 3 and Emergency Department.

2/23/8

PATIENT STORY – ACUTE SERVICES

The Chair welcomed Ms Glass, service user, and Mr Gibson, Consultant Orthopaedic Surgeon to the meeting and invited them to share Ms Glass’s patient story.

Mr Gillespie made introductions and said throughout the Covid19 pandemic, the orthopaedic service had transformed the delivery of its service and moved many of its surgical procedures to day case to maximise efficiency.

Mr Gibson provided members with the background to Ms Glass’s surgery. He described the procedure and how with transforming the orthopaedic service it was possible to undertake Ms Glass’s surgery as a day case procedure which it would not have been previously been able to. Mr Gibson described how he and a colleague travelled to France to learn from how they provided their service and were able to bring this learning back and put into practice to benefit Western Trust patients. Mr Gibson said having transformed the service patients were experiencing a shorter waiting time for surgery. He described a changed surgical procedure and anaesthetic technique and said this allowed for earlier functional rehabilitation for the patient.

Ms Glass thanked the Board for the opportunity to attend. She said she has COPD and asthma and following her pre-operative assessment she was delighted she was deemed suitable for day case surgery. Ms Glass provided members with an outline of her patient journey and said she had her surgery in June 2022 and her recovery

had been fantastic. She thanked Dr Gibson profusely and said she looked forward to having surgery on her other foot.

Mr Guckian paid tribute to the orthopaedic surgeons for transforming their service and acknowledged that the service had been severely impacted as a result of Covid as it was not able to offer inpatient surgery to their patients. He said they were to be congratulated for being innovative and inventive for the benefit of their patients.

Mr Gillespie also acknowledged the role of Mrs Cathy Glass, Nursing Services Manager, and Ms Nichola Cairns, Assistant Nursing Services Manager, for their support in transforming the service. Mr Gibson supported these comments and said while the clinician team had the vision, Mrs Glass and Ms Cairns turned the vision into reality. He commended them for their clinical engagement with the entire clinical team.

Mr Hegarty noted that every single procedure makes a huge difference to someone. He said he was delighted to meet Ms Glass and paid tribute to Mr Gibson.

Members were advised that Ms Glass has agreed to participate as a patient representative for the trauma and orthopaedic service. The Chair thanked Mr Gibson and Ms Glass for attending today's meeting and wished Ms Glass well with her future surgery.

2/23/9

CORPORATE RISK REGISTER AND ASSURANCE FRAMEWORK

Dr Lavery referred members to the Trust's Corporate Risk Register and Assurance Framework and said as approved at Trust Board on 5 January 2023 there were 20 risks on the register.

Dr Lavery shared with members proposals for approval to:-

- merge and revise risks ID1213 and ID1316;
- amend risk title and description of risk ID284; and
- escalate risks ID1409 and ID779 to CRR.

Dr McPeake referred to risk ID779 and sought clarity on service impacts arising from performance issues with regard to recruitment. Mrs Hargan advised that she has been updating Corporate Management Team in respect of issues raised and a number of actions are being taken forward and added that Human Resources Directors meet BSO on a weekly basis to discuss the resolution of problems. Mrs Hargan also advised that in October 2022 a new software went live and this had not

proved successful. However, Mrs Hargan assured members that the Trusts' retained recruitment teams at local levels are working with BSO to identify blockages in the system and seek resolutions. Mrs Hargan said the DoH is aware of the current challenges. Mrs Hargan said in addition some Trust managers have added to delays.

Mrs Hargan referred to the regional review of recruitment which is being led by herself and said a new model of mixed recruitment delivery is being recommended.

Mrs Laird referred to internal audit assignments on regional shared services and the challenges are long standing and said her concern was that Trust are paying for a service that does not deliver. She said the challenges need to be brought to the attention of the Permanent Secretary. Mr Guckian assured Mrs Laird that the Permanent Secretary is fully aware of the issues.

Mrs Laird referred to risk ID284 and said she welcomed how the risk would be described going forward.

Canon Rev McGaffin welcomed the escalation of risk ID779 and it was clarified that medical and dental and senior executive recruitment are retained in-house.

Following discussion the proposals were proposed by Mrs Laird, seconded by Prof McKenna and carried unanimously by the Board.

2/23/10

INFECTION PREVENTION AND CONTROL UPDATE

Dr Lavery referred members to an update on Infection Prevention and Control issues within the Trust. He advised the Infection Prevention and Control Team continued to be significantly involved with the management of any suspected or confirmed cases of COVID19 and outbreak management, whilst also managing the rise in Influenza, Respiratory Syntical Virus (RSV) and Group A Streptococcus cases. He noted the rise in these infections had increased the workload for the Team and this had been compounded by the current IPC Nursing workforce challenges. He said this was resulting in the IPC team being challenged in attending to other routine work whilst recruitment is ongoing.

Dr Lavery said the Department of Health has not yet issued new reduction targets for healthcare-associated infections in 2022/23. He said year to date there had been 70 cases of *C. difficile* with 41 being classified as healthcare-acquired or associated. The remaining 29 cases are classified as community acquired. It was noted that this year's performance had already exceeded the total number of *C. difficile* cases recorded in 2019/20. Dr Lavery noted that since the beginning of April 2022, 7 MRSA bacteraemia cases had been reported. He said 3 were categorised as community-associated as they occurred less than 48 hours after admission to

hospital and 4 were categorised as healthcare-associated. He noted that this year's performance had already exceeded the total number of MRSA bacteraemia cases recorded in the whole of 2019/20.

Dr Lavery provided members with an update in respect of Covid19, mandatory training, critical care device-associated infection surveillance and Legionella.

2/23/11

PUBLIC CONSULTATION DOCUMENT ON THE TEMPORARY CHANGE TO EMERGENCY GENERAL SURGERY SERVICES AT SOUTH WEST ACUTE HOSPITAL

Mrs Molloy reminded members that at its Trust Board meeting on 5 January 2023, Trust Board approved moving to public consultation on the temporary suspension of Emergency General Surgery at South West Acute Hospital (SWAH). She said the public consultation commenced on Tuesday, 17 January 2023 and is open for a 12-week period ending on Monday, 10 April 2023.

Mrs Molloy advised that to promote the consultation, the Trust had:

- Publicised the consultation across its Social Media Platforms with a reach of over 90,000 people;
- Worked with media to announce the launch of the consultation;
- Written to statutory partners and informed them of the consultation and invited responses;
- Updated Trust senior staff at Senior Leaders Forum; and
- Engaged with, and informed, over 2,200 within the Trust's consultee list of the launch, and how to respond to the consultation.

Mrs Molloy said the public is directed to the Trust's website where they can access all the relevant documents including the consultation document, Equality Impact Assessment and Rural Impact Assessment. She added that paper copies are available on request and the Trust is also working to provide an easy read version of the consultation document. It is expected to have this published on the Trust's website in early February 2023.

Mrs Molloy advised that the Trust has worked closely with Fermanagh and Omagh District Council (F&ODC) to plan the public consultation events. She said the Trust will host 9 public events, 1 in each of the 7 District Electoral Areas in F&ODC area, and 2 online events. She said across all 9 public engagement events, there is a potential attendance of over approximately 4,000 people. Mrs Molloy added that the Trust has engaged 2 independent facilitators to support the the events.

Mrs Molloy said at each event a presentation will be provided outlining the background and actions taken to date. She said a panel with representation from the Corporate Management Team will provide a response to queries or comments at each event. She noted that panel members include the Chief Executive, Director of Performance and Service Improvement, Director of Acute Services, Medical Director and a representative from the Communications Team. British and Irish sign language will be available at each event. Mrs Molloy added that the Trust is working with the Patient Client Council and the independent facilitators on the itinerary and approach to the online events to ensure maximum participation, particularly across Section 75 groups.

Mrs Molloy said the public are asked to respond to the consultation through an online Consultation Questionnaire. She said a paper copy is also provided within the Consultation Document which has been developed in Citizen Space. Mrs Molloy said the Trust has received 26 responses up to 24 January 2023 and said the responses received in Citizen Space will be collated under specific themes and will be amalgamated with the Consultation events report to provide a robust recording of the public engagement and will provide the information for final Consultation Outcome report to Trust Board.

2/23/12

QUALITY IMPROVEMENT MONITORING REPORT – FALLS

Mrs Keenan referred members to the quarterly quality improvement monitoring report in respect of Falls.

Mrs Keenan said falls continue to be the highest reported incident within the Trust and said work was ongoing to raise awareness regarding the prevention of falls throughout the Trust. She said this work was being supported by the Professional Nursing Team and the Falls Integrated Pathway Co-ordinator (FIPC) through the Trust Slips, Trips and Falls Group. Mrs Keenan added that it is recognised that one dedicated FIPC is not sufficient to meet the demands of the entire Trust and for that reason a business case is being developed to enhance the service and provide more support and education to inpatient areas.

Mrs Keenan advised that the number of falls occurring within inpatient settings continues to be reported to the PHA. She said all Trusts submit shared learning templates from fall incidents that have resulted in moderate and above levels of patient harm to the PHA. She added that this year there had been an increase in the rate of falls occurring within inpatient settings when compared with previous rates of falls data and said this was likely due to a multitude of reasons, including single patient rooms, more complex patients, more requests for enhanced care and workforce issues.

Mrs Keenan advised that the FIPC continues to support new ward managers with completing post falls reviews where fall incidents have resulted in moderate and above levels of harm within inpatient settings. She said the themes emerging from the post fall reviews are used to inform improvement work being taken forward within the Task and Finish Group.

Mrs Keenan advised the PHA has requested that both Emergency Departments and Maternity inpatient settings begin to report any moderate and above harm falls via the shared learning template. She said work is well under way within both these areas to begin this process and risk management is amending the electronic Datix system to allow this to be captured.

Mrs Keenan noted that the Falls Bundle Key Performance Indicator (KPI) continues to be audited and compliance with same reported to the PHA. She said results of audits are recorded on the Nursing Share Point site and these audits are completed monthly as requested. Mrs Keenan said compliance with the bundle appeared relatively static in most areas, and said areas that had poor compliance were discussed at local level and at Directorate governance meetings for assurance that actions are taken and monitored to show improvement. Mrs Keenan added that she was creating a new process for reviewing KPIs with senior nursing staff where failing or problematic KPIs will be addressed.

Members were advised that the Trust has recently appointed a senior lead nurse for assurance and quality who is working alongside the PHA and regional colleagues to review and update current KPIs. Mrs Keenan said the Falls Bundle was one of the KPIs that was being reviewed by this team and as part of this work a regional guidance document to accompany the Falls Bundle audit was being developed to support staff with this audit. She added that the Falls Co-Ordinators regionally are involved in work streams with Encompass to ensure falls documentation is embedded into the system.

Mrs Keenan advised that the Trust continues to experience severe workforce challenges and nursing dependency challenges, which has impeded much of the quality improvement work that had begun previously. She said work had begun to re-establish the falls learning collaborative which focused on taking forward improvement work within ward settings, and was also used as a shared learning space for lead nurses to highlight areas of good practice and areas of concern.

Mrs Keenan updated members on the work of the Falls Integrated Pathway Co-ordinator in respect of training, collaboration with care homes and communities, and provision of falls awareness sessions. She also noted that regional work to produce a Falls Awareness e-learning training package was now complete and available for all staff on the HSC E-learning platform.

Prof McKenna thanked Mrs Keenan for her informative report and said falls could be catastrophic and this was made clear within the report. He said he had a number of

questions and asked could the report going forward show how the Trust compares with other Trusts; in terms of single rooms, was the outcome for the patient worse the longer the patient had been lying; could further detail be provided on trends across Trust sites; and if industrial action increases are we likely to see an increase in falls.

Mrs Keenan advised that for the next report she would add regional trends. She advised that in relation to single rooms she would look at this but she suspected this may be difficult to quantify. Referring to trends across Trust sites, Mrs Kennan said this was examined through the Trust Slips Trips and Falls Group and was being taken forward with lead nurses. In respect of industrial action, Mrs Keenan said she was mindful of this but she was not hearing any concern to date. She said however she would ask lead nurses to review this and suggested perhaps an idea would be to look at number of falls on these days to determine if there is an increase. Mrs Keenan said she would add this information to the next report.

2/23/13

DECLARATION AND REGISTER OF INTERESTS – OUTSIDE INTERESTS **2022/23**

The Chair advised members that the Trust's Register in respect of Outside Interests for 2022/23 had been updated and is available for viewing from the Chief Executive's Office.

2/23/14

FINANCIAL PERFORMANCE REPORT FOR MONTH 9

Ms McCauley referred members to the Trust's financial performance report for month 9, ending 31 December 2022.

Ms McCauley began by advising that the Deputy Secretary wrote to Trusts on 23 December 2022 to confirm the budget settlement for 2023/24 was likely to provide the HSC with significantly less funding in real terms that was required in the 2022/23 financial year. She said early indications were that the system would need to develop plans to spend less next year and she added that this would be particularly challenging given the drive to increase productivity, minimise direct or immediate impact on services and ongoing industrial action.

Ms McCauley advised that the Director of Finance, SPPG wrote to the Trust on 3 January 2023 and set out the financial planning principles for 2023/24. She said clarification was provided on key financial planning principles which included pay and non-pay inflation, energy costs, service pressures/growth 2023/24 and Covid19 pressures. Ms McCauley said it was expected that the Trust would continue to have a level of slippage or other easement opportunities which would support the Trust

deficit and the Trust would be expected to support efficiency and savings plans as outlined in the letter from the Deputy Secretary.

Ms McCauley said Month 9 was a pivotal month in the Trust's financial position. She said in respect of financial performance the Trust had been able to maintain its position and said the Trust's forecast had not changed for this month. Ms McCauley said this was down to the work happening in all Directorates where there had been a focussing on controls.

Ms McCauley referred to the Trust's financial performance targets and said Directorates overspend at 31 December was 5.6% which was an increase of 0.4% on the 2021/22 overspend. She noted that the Trust had spent £45.5m to 31 December on agency and locum staff with the average expenditure for 22/23 having increased by 20.3% on the average spend last year. Ms McCauley added that the average expenditure for flexible staffing had increased by 16% on the average spend last year.

Ms McCauley advised that the Trust paid 83.43% of its undisputed invoices with suppliers within 30 days at 31 December 2022. She added that 1.03% of invoices were disputed with 79% being subsequently paid within 30 days.

Mr Hegarty referred to medical and nursing agency spend and said this was reflected in the issues associated with workforce. He said this has been a trend for the year and was factored into the Trust's year end projections.

Ms McCauley referred members to table 3, projected deficit for 22/23.

Ms McCauley referred to table 5, financial performance summary by Directorate and said Directorates were reporting an overspend of 5.6% for the period against the prior month reported budget variance of 5.8%. She added that the bottom line position for the Trust was an overspend of 1.0% against budget.

Ms McCauley continued by leading members through pay and non-pay expenditure internal and external, flexible staffing expenditure and capital expenditure.

Concluding her report Ms McCauley recapped on key messages within her report. She said the Trust was projecting a deficit of £6m for 2022/23 and reporting a financial deficit of £6.8m at 31 December 2022. She said savings profiled to deliver in the final quarter would reduce this deficit to the projected outturn. Ms McCauley said Directors had been briefed on the detail of the key planning assumptions which contribute towards the end of year forecast position and a priority focus was on controlling expenditure within planned levels, taking action across key overspending areas and delivering against savings targets. Ms McCauley added that the Acute and Primary Care and Older People's Directorates had made a positive impact against prior month expenditure growth but the focus must remain on financial control measures in order to further reduce expenditure.

Concluding her report Ms McCauley said Service Directorates had made a further improvement in the development of plans against the agency savings target of £2.4m. She said plans of £2.2m have been developed with actual savings of £523k having been achieved at 31 December. Ms McCauley said the Acute Directorate has a planning gap of £150k and action must be taken to address this as a matter of priority.

2/23/15

FINANCE AND PERFORMANCE COMMITTEE

Minutes from the Finance & Performance Committee held on 1 November 2022

Mr Hegarty referred to the notes of the above Committee meeting held on 1 November 2022.

Verbal update report from Finance & Performance Committee meeting held on 31 January 2023

Mr Hegarty referred to the above meeting and said discussion focussed heavily on the finance and performance issues which members had been briefed on today. He said Committee received more detail in order to provide assurances as required.

2/23/16

ENDOWMENT & GIFTS COMMITTEE

Minutes from the Endowment and Gifts Committee meeting held on 6 September 2022

Canon Rev McGaffin referred to the notes of the above Committee which she had provided a verbal update on at the last Board meeting.

Verbal update from Endowment and Gifts Committee meeting held on 6 December 2022

Canon Rev McGaffin referred to discussion at the Committee meeting held on 6 December 2022. She said most of the discussion was building on discussion from the previous meeting on issues including the Committee's work plan particularly in relation to reducing fund balances. She said Committee approved 4 expenditure proposals 2 of which related to the staff support fund.

Canon Rev McGaffin advised that the Harlequin system is now fully operational with staff having been trained. She noted that work is underway to complete the final 2 months of a parallel run for October and November with Harlequin being

implemented as a standalone Trust funds system from 1 December 2022. She said a closure report will be brought to the Committee's February meeting for discussion.

Canon Rev McGaffin provided an update on the Staff Health and Wellbeing Fund Tranche 1. She said a set of principles had been agreed to move applications forward and that a number of applications had been merged into a Trust wide scheme.

Canon Rev McGaffin said the Committee had identified a need to train staff in writing proposals.

2/23/17

PERFORMANCE MANAGEMENT INFORMATION FOR QUARTER ENDED DECEMBER 2022

Mrs Molloy led members through the performance report for the period October – December 2022. She said the report provided progress on acute and community services against activity trajectories as set out in the 2022/23 HSC Service Delivery Plan and performance against the Commissioning Plan Direction access targets. Mrs Molloy advised that based on the percentage of metrics recorded as “red” the Western Trust had the lowest percentage reported during November and December 2022, and the Trust's cumulative position for quarter 3 was one of 2 Trusts with the lowest percentage of metrics recorded as red.

Mrs Molloy shared with members the services and areas where performance had improved or been maintained and areas where monthly performance was more than 5% below the SDP target. She added that in December there had been 3 services where the RAG assessment had deteriorated to “red” when compared to the previous month and these services were Cancer 14 day activity, outpatients and adult day care.

Mrs Molloy referred to the previous briefing on the impact of industrial action across Trust services and said the services which saw performance impacted included outpatients, inpatients and day care. She referred members to Appendix 1 which provided a detailed assessment of the December 2022 and quarter 3 SPPG expected target and activity delivered for each service area.

Mrs Molloy continued by referring to the SDP overall RAG assessment. She said the Trust was working closely with SPPG on some areas where the Trust is challenged and advised that a meeting took place on 11 January. Mrs Molloy added that the Trust had also received investment for improved cancer tracking.

Mrs Molly referred to Outpatient activity and said as a result of the validation exercise, over 4,000 patients had been removed from outpatient waiting lists across

a number of specialties. She said the Trust was the only Trust to have exceeded day case targets.

Concluding on acute services, Mrs Molloy said Emergency Department attendances were higher in December 2022 compared to previous years however performance against the 4 hour Ministerial targets had worsened due to overall pressures in hospital flow.

Moving to community care indicators, Mrs Molloy said particular focus had been given to day care. She said the December performance was impacted by a number of factors including Christmas closures, inclement weather, staff training days and industrial action. She added that the increase in December underperformance was also impacted by the comparison to February 2020 baseline which was not affected by seasonal centre closures.

Mrs Molloy referred to domiciliary care and said performance had remained strong against the SPPG expected target.

Moving to Mental Health Services, Mrs Molloy advised that performance against the Ministerial targets remained challenging. She said in December 2022 the number waiting longer than 9 and 13 weeks increased within adult mental health, child and adolescent mental health, dementia and psychological therapies compared to the previous month. However, Mrs Molloy added that despite the December 2022 performance, improvement was noted within the child and adolescent mental health service. Mrs Molloy said these challenges were being experienced across the region and are reported to the Permanent Secretary's Performance and Transformation Executive Board.

Mrs Molloy referred to the district nursing service and said this service continued to exceed the expected targets. She said the stable workforce and delivery of virtual clinics continued to support this level of delivery. Again, Mrs Molloy advised that regionally the Western Trust is the only Trust to continue to exceed the expected targets.

Mrs Molloy concluded her report and said that she was pleased to report overall that the Trust is in a very good position despite the issues experienced in December. She said that she was also pleased to see the Trust is getting recognition from the region on its activity levels.

The Chair thanked Mrs Molloy for her informative report and asked members for questions.

Dr McPeake sought clarification on the difference between performance and activity in relation to the 14 day breast cancer access target. Mrs Molloy advised that activity was the number of cases referred and seen by the service, and performance was the number of patients actually seen within 14 days. She said a red indicator for

this target was less relevant because the 14 day breast cancer access target service is a demand led service.

Mrs Laird remarked the excellent performance delivered across a range of services amidst the challenges that had been faced and asked that this be formally recorded. On behalf of members, the Chair supported this comment.

2/23/18

MEDICAL AND DENTAL EDUCATION & TRAINING ACADEMIC REPORT

Dr Lavery shared with members for information the Medical and Dental Education and Training Academic Report for period ending July 2022. Dr Lavery commended the report and said it showcased the innovation and quality in medical and dental education and training that is taking place across the Trust.

Mr Guckian paid tribute to Dr Corrigan who is due to retire in April for his leadership to Medical Education.

Members commended the excellent report. Prof McKenna referred to the many partnerships the Trust has with Universities and Royal Colleges and asked with different types of students and annual intakes, did this create challenges. Dr Lavery said the Trust had in place leaders who were able to provide an education role and commended our staff for delivering such an excellent service.

Mr Guckian said the report will be used in meeting with the Northern Ireland Medical and Dental Training Agency going forward and for developing other opportunities in expanding services. He said the report also evidenced excellent feedback from students.

Mrs Laird suggested the report should be used as part of recruitment literature.

Dr Lavery suggested that he would liaise with Communications so that a press release is developed highlighting key points within the report.

2/23/19

ANY OTHER BUSINESS

There were no further items of business.

2/23/20

DATE OF NEXT MEETING

The next meeting of the Western Health and Social Care Trust Board will take place on 3 March 2023, at 11 am in the South West Acute Hospital, Enniskillen.

Mr Sam Pollock, CBE
2 March 2023