

South West Acute Hospital (the South West Acute Hospital) Strategic Development Group (SDG)

Held on 19th July 2024 in Boardroom, South West Acute Hospital and via Microsoft Teams

Present:

Neil Guckian, Co-Chair (Chief Executive, Western Trust);
 Judi McGaffin, Co-Chair (Non-Executive Director, Western Trust Board);
 Mark Gillespie (Director of Planned Care, with overall responsibility for the South West Acute Hospital and Omagh HPCC, Western Trust);
 Dr Brendan Lavery (Medical Director, Western Trust);
 Jim Wilkinson (Department of Health, Deputy Secretary, Healthcare Policy Group);
 Cllr John McClaughry (Chair, FODC);
 Prof Monica Monaghan (Divisional Clinical Director of Medicine, Southern sector, Western Trust);
 Donna Keenan (Director of Nursing & PCOP, Western Trust);
 Tomas Adell (Department of Health – Director of Elective Care and Cancer Policy);
 Dr Laura McDonnell (Director, South West GP Federation)
 Alison McCullagh (Chief Executive, FODC);
 Carol Reid (Asst Director of Nursing the South West Acute Hospital & Omagh H&PCC);
 Paul Doherty (Asst Director of Operations the South West Acute Hospital & Omagh H&PCC);
 Chris Curran (Public Affairs/Relations, SPOC MLAs, MPs, lead on the South West Acute Hospital All Party Group, Western Trust);
 Geraldine McKay (Director Unscheduled Care, Cancer, Diagnostics & Medicine, Western Trust);
 Bernie McCrory (Independent Community Stakeholder);
 Jenny Irvine (Independent Community Stakeholder)
 Prof Ronan O'Hare (Deputy Medical Director, Western Trust);
 Maura O'Neill, (Interim Director of Community and Older People's Services)
 Dinah Shortt (Independent Service User, User Involvement)

Apologies:

Teresa Molloy (Director of Performance & Service Improvement, Western Trust);
 Joanne McClean (Independent Expert Health Advisor, Director of Public Health, PHA);
 Oliver Kelly (Head of Corporate Communications, Western Trust);

In Attendance:

Michelle Gilmore (Business Support)
 Michelle McKinley (Planning & Performance Manager, Community & Older Peoples Services);

Welcome

Mr Guckian, Co-Chair, welcomed all present and apologies were noted; he also took opportunity to conveyed apologies for no meeting in June (election period). Mr Guckian also noted that we were now past election period.

Notes taken from previous meeting were addressed and agreed and there were no matters arising noted today.

Update from Western Trust CEX

Mr Guckian provided an update to the group on engagement with the Regulation and Quality Improvement Authority (RQIA) advising they were mid review. It was noted that the field work element of their work was complete. They now wished to speak to a random sample of 25 patients with contact being made to same. Brief discussion was had regarding the QR codes that RQIA had provided, as a means of engaging with affected patients; these have appeared in local shops etc. encouraging general public to raise concerns. The Trust have no control where these are placed however RQIA are aware.

Mr Guckian shared detail regarding Western Trust's recent Reset week. He advised we had brought professional people in from outside the Trust to help look at patient flow across the hospital sites and how to better manage and improve flow. Mr Guckian referred, in particular, to the ring fenced surgical beds, from outliers of medical ward patients, highlighting that this has helped fundamentally to improve pathways.

Mr Guckian acknowledged that there remains a core capacity issue at Altnagelvin. A brief discussion followed regarding expanding on community capacity/homes with Mr Guckian confirming that to the best of our ability, progress on this is well advanced. This should further improve flow as patients reach the end of their inpatient journeys. For the first time in five years the Trust is able to actively engage with Care Home owners, addressing capacity and expansion opportunities; it will be the first time the Trust is able to commission further bed capacity in Homes in the Community.

Mr Guckian concluded his update positively reporting that the Hospitals are thriving currently and we have the evidence base to show the improvements and progress across sites.

At this juncture, Mr Guckian took opportunity to welcome and introduce Mr John McClaughry, the new Chair of Fermanagh and Omagh District Council. Brief discussion regarding creating a sub work-group of this larger Strategic Development Group took place. The sub-group would focus on a future vision for SWAH, potential positive ideas and developments, looking at a more 'on the ground' approach over the next year with aspirations as to what more we can achieve.

Update Presentation on SWAH (and Omagh HPCC) overall activity

Mr Gillespie delivered a comprehensive update on the overall activity of SWAH and Omagh HPCC. A copy is attached below for reference. The salient points Mr Gillespie highlighted included;

- ♦ Reinforced the information of 97/98% of patients continue to be seen and treated at SWAH
- ♦ Admission levels up. This is a regional trend also.
- ♦ Outpatient numbers remain stable
- ♦ Physios, OT's and various other MDT's doing out patients
- ♦ In relation to Obstetrics and Gynae, there are no significant shifts with regards to live birth figures
- ♦ In process of reviewing the Overnight Elective Stay Centre pathways and processes – these will be brought through Governance and brought back to update.
- ♦ Patient experience and patient journey being given careful consideration.
- ♦ RQIA review continues. We have provided them with significant data throughout
- ♦ The WHSCT has been incrementally building activity in SWAH throughout 23/24 in alignment with recruitment and training activities.
- ♦ SWAH is now in a position to schedule 19.5 sessions per week
- ♦ Omagh Day Procedure Unit is now in a position to schedule 30 sessions per week.
- ♦ New Surgical and Gynae Consultant appointments.
- ♦ Moving to Trust wide working.
- ♦ Tier 4 Restructuring of the new Directorates includes new commissioned lead post for Omagh DPC.
- ♦ Outpatients with procedure, flexible cystoscopy coming out of day case theatres in Omagh to an outpatient environment which is freeing up additional elective capacity.
- ♦ Some focused work on Cancellation data.
- ♦ Continued relations with NIAS.
- ♦ Very focused work around Ring fenced beds, Reset was very important for this. Great progress in this area however important to remember surgeons will always base decisions on clinical need.
- ♦ New Flow Hub in Altnagelvin Hospital.
- ♦ Anticipate to be at a full tier of Consultant surgeons late autumn.
- ♦ Plans underway and arrangements in place for Doctor Colleagues to travel to India as part of recruitment exercise.
- ♦ Infographic – this is now published on a quarterly basis and published on website; this will be including direct to bed data going forward.

Some brief discussion regarding the Surgical Ambulatory unit – it was noted that some patient publicity regarding availability and means of accessing the surgical ambulatory unit would be really beneficial.

Dr McDonnell wished to note the recent publicity in relation to trainees and voiced excellent publicity with regards junior doctor Grace Kettle. Dr McDonnell felt this was such positive coverage and really shows the importance of medical junior training. Grace Kettle is mentored by Dr Michael Mullan, who continues to be a huge asset to the Trust and continues to do rotational work in SWAH and Omagh.

It is noted that the Trust are always keen to showcase what we can do and it is acknowledged that the medical students here really appreciate and benefit from exposure to consultants in SWAH.



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Update SWAH SDG Fi

Update on Primary Care Trust Run GP Practices

Mrs Michelle McKinley provided an update on Trust run GP practices. Mrs McKinley confirmed the Trust now currently manage 4 GP practices. Brief discussion had re the reported global outage this morning; Mrs McKinley confirmed all 4 practices were affected and have reverted to business continuity plans.

It was noted there are challenges to get Locum GP's and Trust are mindful we need to be proactive. Mrs McKinley advised we are engaged with recruitment agency in England; a number have been interviewed and a number identified. Trust has met with BMA; they have endorsed job description and Terms & Conditions are progressing this – will be in a position to recruit in coming weeks.

Mr Guckian noted that the Western Trust is the only Trust that has GP practices taken on for longer term.

It was confirmed the Trust would be appointing Clinical Leads within the practices. These Leads will undertake the governance role that a GP partner would normally have.

Ms McCullagh queried if it was anticipated that the Trust would continue with the 4 practices until there were other arrangements. Mr Guckian confirmed that yes that was the case, for the medium to longer term at present.

Mr Wilkinson noted they had been seeing an increase in taking over GP practice right across region, for various reasons including cost pressures, retirements, younger GPs looking for different work setups, demographics and workload.

Update from the Department of Health

Mr Wilkinson noted in relation to the GP practices there was an increased focus this year on looking at strengthening workforce, interfaces and Multi-disciplinary team working. He added they were looking at this in conjunction with GP federation, and trust colleagues. Dr McDonnell echoed Mr Wilkinson call for focus on multi-disciplinary working as this really stabilises the work of the practice where multi-disciplinary working exists.

Mr Wilkinson reflected on challenges regarding budgets.

Mr Wilkinson shared that Minister Nesbitt has indicated a very clear strategic direction he wants to take and laid out this early direction as follows;

- wants to look at how we reduce waiting lists
- Ensuring using/utilising all capacity
- Greater focus on Mental Health
- Addressing health inequalities, identifying a few pilot areas; target and address health inequalities with a focused period of action.

It was noted the Dept. would be engaging with Professor Bengoa in the coming weeks, not regarding another review but rather to reflect on what has been achieved to date.

Update from Fermanagh and Omagh Council

Mr McClaughry reiterated that presentation delivered today will be really reassuring at Council meeting next week along with the latest Infographic, providing welcome updates.

Mr McClaughry referred to previous invites to the Health Minister to visit Fermanagh and Omagh Council, citing invites to previous Minister Swan. John referred invites to Jim Wilkinson and queried follow up in relation to the new Minister visiting,

It was noted Mr McClaughry raised the Co-created Frail Elderly event on 7th June highlighting this was a very positive event.

Mr McClaughry wished to make reference to and acknowledge the Staff Awards that took place since last meeting. He wished to extend congratulations to staff in receipt of awards and to commend all the staff celebrated noting an extremely positive event and one the council felt privileged to attend.

Any Other Business

There was no other business tabled today.

Actions and Next Steps

The Strategic Development Group is to consider setting up of a new Sub-Group of this larger Strategic Development Group which would focus strategically and specifically on a future Vision for SWAH. The sub group would look at potential developments, ideas which would enhance the hospital and take a more 'on the ground' approach over the next year with aspirations for what more we could achieve.

Mr Guckian requested that Mr Curran would engage with members and stakeholders in the group individually to discuss and review the first year of the group and provide feedback accordingly at future meetings.

Ms Irvine discussed patient feedback and specifically a patient journey in respect of EGS at SWAH and asked could this be considered also as part of the engagement process. Following discussion, Mr Guckian requested that Mr Curran would meet the patient highlighted by Ms Irvine as part of the engagement exercise.

Date of next meeting

Thursday 21st November 2024, 10am in the Boardroom, SWAH and/or Virtually.