

NORTHERN HEALTH AND SOCIAL CARE TRUST

Minutes of the Ninetieth meeting of Trust Board held on Thursday 25 June 2015 at 10.00am in the Lecture Theatre, Fern House, Antrim Area Hospital

Present:

Mr R McCann	Chairman
Dr T Stevens	Chief Executive
Dr C Ackah	Non-Executive Director
Mrs L Ensor	Non-Executive Director
Mr S Forsythe	Non-Executive Director
Dr K Lowry	Medical Director
Mr B Graham	Non-Executive Director
Ms P Montgomery	Non-Executive Director
Mr J Moore	Non-Executive Director
Mrs O MacLeod	Director of Nursing and User Experience
Professor D Whittington	Non-Executive Director

In Attendance:

Mrs P McCreedy	Deputy Chief Executive/ Director of Operations (Interim)
Ms B Donaghy	Director Planning and Performance Management(Interim)
Mrs U Cunning	Director of Primary and Community Care for Older People's Services
Mr O Donnelly	Director Mental Health and Disability Services
Dr B Hunter	GP Medical Director
Mrs M O'Hagan	Director of Acute Services
Miss M Crilly	Representing Director Finance
Ms B McConville	Representing Director of Children's Services
Mrs E Brownlees	Representing Director or Human Resources
Mrs M Mulholland	Head of Communications
Mrs M McDowell	Executive Assistant

Apologies:

Mr L O'Neill	Director Finance
Mrs M Roulston	Director of Children's Services/Executive Director Social Work
Mrs C Duffield	Director of Human Resources

Two members of Staff Side were present.

TB51/15 Conflicts of Interest

No Conflict of Interests were declared.

Chairman's Business

Mr McCann highlighted that this was the first meeting where papers had been issued electronically to improve governance and efficiency and he provided some guidance on how to maximise the use of this new system for members.

The Chairman referred to a letter dated 28 May 2015 which had been sent from the Commissioner for Older People to the Chief Executive of the Health and Social Care Board and copied to Trusts. In this letter, Ms Keatinge referred to the Trusts' Savings Plans for 2015/16 and highlighted the high proportion of proposed savings made to services where older people were substantial or majority users.

Ms Donaghy advised that all Trust proposals for savings would be subject to equality screening for any adverse impact on specific groups and said that proposals impacting on direct service delivery would be avoided, where possible. Professor Whittington highlighted the high percentage of older people within the Northern Trust area and the importance for the Trust to champion services for this group of clients.

The Trust Board confirmed its commitment to ensure that, whilst delivery of efficiencies was important for financial management, it would take account of the impact on older people's services.

Mr McCann advised that, with the Chief Executive, he attended the sod cutting for the new Supported Living Scheme, specifically designed for older people, on the site of Greenisland House. This had been attended by the Ministers for Social Development and Health, Councillors, representatives from key stakeholders and representatives from Oaklee Trinity Housing Association and the NI Housing Executive, the Trust's partners in this scheme.

With the Chairman being unable to attend the Qualifications and Credit Framework (QCF) event on 4 June, Mr McCann thanked Professor Whittington for hosting the ceremony on his behalf. Professor Whittington indicated that this had been a very enjoyable and successful event to celebrate the achievements of candidates and had been extremely well organised by the Trust's Organisational Development Team.

Members noted the update on the recruitment process for new Non Executive Director appointments to the Trust which was being undertaken by the Public Appointments Unit at DHSSPS.

Mr McCann also advised that the performance assessments for the Non Executive Directors for 2014/15 were being finalised and would be returned to the Public Appointments Unit by the due date of 17 July.

Further achievements of staff were reported by the Chairman. Mr McCann congratulated Mrs Phil Hughes, Assistant Director of Mental Health Services, for being awarded an MBE in the Queen's Birthday Honours List for her work with older people with mental health and dementia problems. He was pleased to advise that, in July, Dr O Buckley and Inspector A Marks from the Rowan Sexual Assault Referral Centre would each be receiving an honorary degree of Doctor of Science at the University of Ulster for distinguished service to the vulnerable in society.

An opportunity would be taken at the appropriate time to celebrate these achievements.

TB53/15 Chief Executive Report

Dr Stevens advised members of a range of activities he had undertaken since the previous meeting, which had showcased innovative and high quality work.

3 June:

The newly appointed Minister for Health, Mr Simon Hamilton, had visited the Emergency Department and Acute Assessment unit at Antrim Area Hospital and had acknowledged the innovative work and improvement being undertaken.

4 June:

Dr Stevens had been pleased to address the audience at the QCF ceremony and said that this had been a most uplifting event, acknowledging the real commitment and efforts of staff for personal development.

10 June:

Dr Stevens and Ms Donaghy had met with the members of the Causeway Campaign Group, accompanied by Mr Storey, MLA, and they had held useful exchanges and discussion on the health economy in the Causeway and Glens area.

16 June:

The Best Practice Sharing Conference for Allied Health Professionals had been a most interesting event to discuss and share initiatives which could be applied across all AHP services in the Trust.

17 June:

With Ms Donaghy, Dr Stevens attended the Annual General Meeting of the Board of the Robinson Memorial Hospital. This has been a productive meeting, focusing on the opportunities for reform, modernisation and local development of services.

19 June:

The Clinical Audit Symposium had been another excellent event bringing clinicians together to present their work on reform and modernisation and to provide opportunities to share good practice for the delivery of sustained improvements on safety and service quality.

23 June:

The Sharing the Learning Event on the Impact of Alcohol Programme, funded through Big Lottery Funding, was an excellent example of partnership working and community engagement. Dr Ackah spoke of her involvement in this project through a stakeholder organisation and she echoed the positive comments of the partnership working demonstrated by this programme.

TB54/15 Account of Patient/Client Experience

The Chairman welcomed Rev Jack Moore, Lead Chaplain, to the meeting to provide an insight into the work of the chaplains on the hospital sites.

Rev Moore explained that, through Mrs MacLeod, the chaplaincy service was operating a generic model where chaplains were allocated to a number of specific wards, irrespective of their denomination. He said that this system was working very successfully and was being viewed as the way forward for chaplaincy services in other Trusts. Rev Moore paid tribute to the support provided by Mrs MacLeod in this transformation process.

Members heard details of two personal stories which demonstrated the religious, spiritual and denominational needs of patients and how these had been addressed. They noted how the chaplaincy service was part of the holistic care system, building relationships with staff and offering the necessary support when required.

Members also heard how the chaplains addressed the needs of patients of different faiths and how they communicated to managers and staff on patient feedback they received through their duties.

Particular reference was made to the Thanksgiving Service introduced in April 2015 to remember those staff who had sadly died whilst working in the Trust in the previous year. It was noted how much this had been appreciated by the families and colleagues who had attended and this service would now be held on an annual basis.

Members recognised that importance of the role of the chaplaincy service and thanked Rev Moore and his colleagues for the significant part they played in patient care.

TB55/15 Minutes of Previous Meeting

The minutes of the previous meeting held on 28 May 2015 were approved, subject to one typographical error on page 6, under the heading Cancer Services . Last paragraph to be amended to read “**Ms Donaghy** reported an improved situation with regard to urology services as a result of the positive collaborative working with the Western Trust.”

TB56/15 Matters arising

- **Joint Advisory Group accreditation for the Whiteabbey GI Endoscopy Unit**

Dr Stevens provided a positive update on the position which had been recently agreed with officers from the Joint Advisory Group. He advised that issues on waiting lists were being resolved and a JAG visit was expected to take place towards the end of the year to reconsider accreditation. Members noted that there was no immediate risk to the continuity of the service at Whiteabbey Hospital.

- **Delegated Statutory Functions**

Mr Donnelly was pleased to advise of a very positive meeting held with officers from the Health and Social Care Board on 17 June when there had been acknowledgement of the very good practice across all Directorates in the Trust, as well as areas for both regional and local development.

It was noted that a workshop on Delegated Statutory Functions for Trust Board members would be arranged for the near future.

TB57/15 Performance Report

Ms Donaghy presented the Performance Report for May 2015, highlighting the main issues and challenges for the Trust.

- **Elective Care**

Members noted that the Service and Budget Agreement for 2015/16 with the Health and Social Care Board was being finalised and this would not only agree the volumes of activity for delivering elective care but would also determine a base line for activity in community services.

Ms Donaghy drew members' attention to the continuing rise in the number of patients waiting more than 9 and 18 weeks for their first outpatient appointment. She indicated that this position had been caused due to the increasing number of referrals, particularly red flag

referrals, and demand being significantly higher than capacity in a number of specialities. It was recognised that the position would become more challenging without additional elective access funding. Regional work was being undertaken on how to redesign services to meet the growing demand. The effects on unscheduled care with these current waiting lists were also acknowledged.

With regard to endoscopy services, members noted that the Trust was working with the Board to agree how best to address the competing demands from routine, red flag, planned and unscheduled patients. It was anticipated that the waiting time for new planned endoscopy procedures would increase to 18 weeks to allow the current waiting list to be addressed.

- **Unscheduled Care**

The challenges to continue to maintain the 4 hour target were noted, with performance noted as 60% at Antrim and 66% in Causeway during May 2015. It was noted that the 12 hour target continued to be maintained at Causeway Hospital since August 2013. Antrim maintained real improvement in the 12 hour target with 75 breaches had been reported during the last month and 5 breaches during June to date.

It was noted that, although demand and complexity of cases had increased from the same period the previous year, the Trust had been able to reduce the number of 12 hour breaches over this period and all efforts would continue to implement a wide range of actions to sustain improvements.

Whilst members noted an improved position on non complex discharges taking place within 6 hours of decision to discharge, Ms Donaghy advised of the difficulties still being experienced around complex discharges being completed within 7 days, with 17 delays being reported during May.

Members noted the reasons for this position, the main issue being associated with the difficulties in securing packages for domiciliary care. Discussion followed on some of the challenges of securing services from the independent sector, particularly the difficulties with recruitment of staff and the impact regarding registration for domiciliary care staff with the Northern Ireland Social Care Council. Mrs Cunning intimated that this issue was being considered on a regional basis. Members noted the effects on unscheduled care activity and acknowledged that creating capacity would be a slow process.

- **Cancer Services**

Members were pleased to note the continuing 100% performance on urgent breast cancer referrals being seen within 14 days.

With regard to the 62 day target, Ms Donaghy indicated that, although May figures had not been available for inclusion in the report, she expected an improvement, mainly due the improved performance in urology through the positive collaborative working with the Western Trust.

- **Children's Services**

Continued challenges in Child and Adolescent Mental Health Services were noted, with an increase of 8% in referrals compared to April 2014. The number of breaches of the 9 week target reported at May were 95 and there was concern that referral and acceptance rates would continue to increase. Ms Donaghy advised of the breach reduction plan which was being implemented but it was recognised that this plan would take some time to be embedded in the service and improvements to be seen.

Mr Donnelly advised members of an increase in the number of referrals being received across all mental health services.

- **Safe and Effective Care**

- **Stroke**

Mr Graham referred to the number of stroke patients suitable for lysis which had reduced from 16% in April to 9.2% for May. Mrs O'Hagan advised that previous months had shown improvement in the position and she undertook to report further on the position.

- **Patient Surveys on Experience**

The Chairman referred to the feedback received through patient surveys and highlighted two red areas on treatment and care in maternity wards. Mrs MacLeod advised that this feedback had been received from a very small number of patients focusing on specific issues and these were currently being addressed.

- **Emergency Hospital Readmission**

Dr Lowry and Dr Stevens agreed to examine the number of emergency readmissions within 30 days which had increased to 9.4% at April 2015, and they would report back to Trust Board.

- **Venous Thromboembolism**

Mrs MacLeod indicated that the major focus being given to this area was showing an improved performance since the same period the previous year.

TB58/15 Finance

Ms Crilly presented the report of the Trust's financial position as at 31 May 2015, advising that the current deficit after two months was £2.187m with a year end projected best estimate deficit of £341,000. She advised of a range of new cost pressures which were emerging and, in providing this projection, had assumed that these pressures would be fully funded by HSCB. However, members noted that the best estimate sensitivity forecast based on non support for the cost pressures and non delivery of outstanding savings targets showed that this would result in a projected deficit of around £15m.

Members noted the position with regard to the two savings targets which were required to be delivered in 2015/16 to ensure breakeven. These consisted of the carried forward outstanding target of the 2014/15 QICR savings of £5.450m and the 2015/16 savings target of £12.098m. Ms Crilly advised that the total outstanding at the current date across the Trust was £12.438m.

Ms Crilly drew members' attention to the budgetary positions within Directorates as at month 2 projected to 31 March 2016, to show how the £341,000 deficit had been determined.

Discussion followed on the main issues within each Directorate and specific reference was made to costs associated with the additional beds opened in December 2014 as a result of winter pressures. Whilst it was noted that these beds had been funded through winter pressure funding, Mrs MacLeod advised that funding was still required to support extra beds in wards to provide additional capacity on the Antrim site. Ms Donaghy advised that funding required for winter pressures for 2015/16 was being included in the Unscheduled Care Plan and was due for completion by the end of the month.

The allocation of £3m from the Commissioner for normative nursing levels in 18 medical and surgical wards in Antrim and Causeway Hospitals was noted and discussed. Mrs MacLeod advised members of the current position with regard to the recruitment process, pointing out that appointments had already been made to 40 new nursing posts. She indicated that this would bring stability to the nursing workforce and lead to improving safety and quality. Whilst allowances needed to continue for sickness, annual leave, maternity leave and training, Mrs MacLeod expected reliance on bank and agency staff to reduce once the shift to permanent recruitment had been fully implemented.

Reference was made to the new immigration rules for non EU workers earning less than £35,000 per annum and the concern that this would exacerbate the shortage of nurses across the UK.

Ms Crilly highlighted the key issues which had a significant element of estimation and could thus impact on the year end estimate. One of these issues was noted as Clinical Excellence Awards and members acknowledged that this issue was still under review by DHSSPS and meantime no accrual had been provided in the financial position.

Members recognised that the current year would continue to be a challenging one in terms of finance and all efforts would be made to ensure commitment towards the achievement of a break even position at 31 March 2016.

TB59/15 Capital Programme 2015/16

Members noted that the Ballymena Health and Social Care Centre and the Adult Orthodontics projects would be concluded during 2015/16. Given the challenging financial positions, DHSSPS expected only essential spend to be incurred and final expected required spend costings to be updated.

Ms Donaghy highlighted the capital spend of £1.742m which was needed to provide replacement for the PFI contract for the renal unit at Antrim Area Hospital which ended in April 2015.

It was noted that, as at 31 May 2015, the Trust had spent £3.591m, equating to 36.11% of the total CRL of £9.945m.

TB60/15 Statutory Residential Homes

Mrs A Irwin, Head of Equality, joined the meeting for discussion on this item.

Mrs Cunning presented the background to this item by advising that, in November 2013, the Health and Social Care Board (HSCB) had consulted publicly on proposed criteria that would be used by Trusts in assessing each of their statutory residential care homes. Following the consultation process the Trust applied the criteria to its homes and taking into consideration a needs assessment carried out by the Northern Local Commissioning Group (LCG) the Trust presented its proposals to HSCB and the LCG. The HSCB agreed at its Board meeting on 19 May 2015 that the Trust's proposals should proceed to consultation. Mrs Cunning presented the proposed consultation document "Making Choices" which set out the proposed changes in the provision of statutory residential care.

Members noted the proposals to continue to provide residential care at Lisgarel, Clonmore, Joymount and Rosedale and to resume permanent admissions to these homes once the consultation process had concluded. Due to the availability of suitable alternative accommodation, the Trust was proposing to phase out residential care provision at The Roddens, Westlands and Pinewood. Mrs Cunning

advised that at Westlands, there was potential to develop the site as a community health and social care hub and at Pinewood it was proposed to develop this unit as a rehabilitation facility to cover the Antrim and Ballymena areas. Although there were no alternative plans for the use of The Roddens in Ballymoney, in common with other statutory organisations, the Trust would be exploring all options in relation to sites which were no longer considered integral to the delivery of Trust services.

It was noted that, in these proposals, the Trust was supporting the former Ministerial commitment that existing permanent residents in statutory residential homes would be allowed to remain in their home as long as they wished and as long as their needs could continue to be met there.

Mrs Irwin advised that it was intended to undertake the consultation process over a 14 week period, to take account of the summer holiday period, and this would run from 26 June – 2 October 2015. In addition, an Equality Impact Assessment (EQIA) had been completed and would be part of the formal consultation to comply with the legislative requirements of the Section 75 of the Northern Ireland Act and the Human Rights Act.

The Chairman affirmed the Trust's commitment to open, transparent and meaningful consultation and indicated that feedback received would be carefully considered. He said that a feedback report would be considered by Trust Board and that final proposals would be considered by the Health and Social Care Board. It was noted that the final proposals would require Ministerial endorsement before implementation.

Members approved the consultation process to commence and noted that the documents would be published on the Trust website on 26 June 2015, with approximately 1500 organisations also being contacted directly.

TB61/15 Trust Delivery Plan 2015/16

Ms Donaghy presented the draft Trust Delivery Plan for 2015/16 which was the Trust's response to the Regional and Local Commissioning Plan 2015/16. She highlighted the main issues within each Section of the document.

Local context

Members' noted that the Northern Trust area had the greatest predicated growth of the 65 years and over population and 85 years and over in Northern Ireland and that the Commission Plan needs assessment had indicated the greater prevalence of a number of conditions in the Northern Trust.

With regard to capacity and demand, it was acknowledged that, with the increased growth in the Trust's population, the demand for services would continue to rise. It was essential for the Trust to focus on transforming the way services were delivered and to be more innovative, adopt best practice in terms of service delivery and work more closely with primary care colleagues, other statutory agencies, independent providers and service users to ensure that health and well being potential was being optimised and resources were being used effectively.

Delivery Plans

Members noted the Trust's responses to each of the 30 targets set by the Minister, the regional commissioning objectives, and the local commissioning objectives. This included a RAG rating for the achievement of the priorities identified.

Ms Donaghy referred specifically to the increasing capacity at weekends and the move towards 7 day working and highlighted the positive impact of this initiative on safety and quality outcomes.

Mr Moore referred to the Trust's undertaking to achieve between 80 – 85% in relation to the 4 hour target, noting that current performance at Antrim Hospital was 64%. Mrs O'Hagan referred to the sustained significant progress made to date and, with the continuation of the wide range of actions aimed at improving and sustaining the 4 hour performance, was hopeful that this target could be achieved.

Delivery Transformation

It was confirmed that the Trust was endorsing transformation through the development of the Reform and Modernisation Programme. This would establish arrangements to secure reform and provide a focus on continuous improvement which would lead to the development of services that prevented or reduced acute hospitalisation for appropriate conditions and circumstances.

The fiscal challenge in supporting the growing demand and service pressures evidenced in increasing elective waiting lists and maximum waiting times was again highlighted.

Regional Commissioning Objectives

Members noted the Trust's responses to the regional priorities which included improving and protecting population health and reducing inequalities, providing care closer to home, promoting independence and safeguarding the most vulnerable.

Local Commissioning Plan

Members noted the actions specific to the Northern Trust which had been set out by programme of care and a RAG rating provided against each action. This section also focussed on the transformation of services for the future.

Members noted that the various actions in this section were very ambitious but they set the scene for transforming services for the future and modernising services to deliver care in an alternative way.

They noted that these priorities were supported by strategies relating to finance, workforce, capital investment and governance. It was noted that the plans were subject to necessary engagement with users, carers and the community and appropriate stakeholders. The section in the Plan outlined how this would be taken forward in line with the Trust's PPI Strategy.

There was clarification that the Local Commissioning Group had been discussing with the Trust the deployment of the £5.5m demography funds provided by the Board this year for a combination of new initiatives and growth in demand. Members noted that some of these funds were required to deal with 2014/15 demand and anticipated demand in 2015/16 of care placements and domiciliary care packages. These discussions were on going.

Members recognised how the Trust Delivery Plan would be supported by the Trust's Reform and Modernisation Plan which was a three year strategic document. They acknowledged that the Trust Delivery Plan focused on the challenge to take forward change that would benefit patients and to engage in engagement for wider service transformation for services to be safe, sustainable and efficient.

Members approved the document presented to be forwarded to the Health and Social Care Board for consideration.

TB62/15 Annual Fire Report 2014/15

Ms Donaghy presented the Fire Safety Annual Report for 2014/15 which advised of the standards for fire safety within Trust premises and the progress being made to meet these standards. She advised of the continuous work had been undertaken since the formation of the Trust in 2007 which had resulted in no high risk buildings remaining and all 24/7 patient areas now compliant with Firecode.

Reference was made to the discussion at the previous meeting when a sum of £100,000 had been committed in the capital plan for Firecode work during 2015/16 and members had approved a business case for Trust wide work at a cost of £500,000 should further funding become available. It was noted that this was to continue with the strategic prioritised programme which had been agreed with the Fire and Rescue Service.

Ms Donaghy drew members' attention to the five reported fire incidents on Trust premises during the year and of the action being taken to

continue to manage the unwanted fire signals, which totalled 75 in 2014/15.

On noting that 63% of staff had attended the mandatory annual fire safety training in the previous year, the Chief Executive advised of some of the actions being considered by the Trust's Health and Safety Committee to improve performance on attendance and one of the initiatives taken was the inclusion in the staff appraisal system.

TB63/15 Trust Sub Committees

(a) Assurance Committee

Copies of the minutes of the Assurance Committee held on 26 February 2015 were circulated and noted. It was noted that this Committee had replaced the Governance Committee and all Non Executive Directors were members.

(b) User Feedback and Involvement Committee

Dr Ackah presented the minutes of the meeting of the Committee held on 20 January 2015. She indicated that the minutes of the latest meeting held on 15 April, to be agreed at the Committee's next meeting on 6 July, would be presented at the next Trust Board meeting.

(c) Audit Committee

Mr Moore presented the minutes of the meeting of the Audit Committee held on 23 April 2015. He highlighted the significant progress which had been achieved on the implementation of the actions arising from the Estates Services Investigation.

TB64/15 Use of the Trust Seal

The Chairman reminded members that, at the previous meeting held on 28 May 2015, there had been agreement that documents would be sealed on the approval of the Chief Executive and a record of the use of the seal would be presented at Trust Board meetings.

Ms Donaghy advised that the seal had been used on two occasions since the last meeting. These had been renewal leases for staff accommodation at Hillcroft School, Newtownabbey, and Naomi Centre, Ballymena.

TB65/15 Date of Next Meeting

It was noted that the next meeting of Trust Board would be held at 10.00am on Thursday 27 August 2015 in the Lecture Theatre, Fern House, Antrim Area Hospital.

