

**Minutes of the One Hundred and Forty Eighth Trust Board Meeting
Thursday 26th January 2023 at 10:00am**

Via Video-Conference/Boardroom, Trust Headquarters, Bretten Hall

Present:

Mr Robert McCann	Chairman
Mrs Jennifer Welsh	Chief Executive
Mr Owen Harkin	Executive Director of Finance/Deputy Chief Executive
Mr Jim McCall	Non-Executive Director
Mr Gerard McGivern	Non-Executive Director
Mr William Graham	Non-Executive Director
Mrs Suzanne Pullins	Executive Director of Nursing, Paediatrics, Women's Services & Corporate Support
Dr Dave Watkins	Executive Director of Medicine
Maura Dargan	Executive Director of Social Work

In attendance:

Mrs Jacqui Reid	Director of Human Resources and Head of Office
Mr Neil Martin	Director of Strategic Planning, Performance and ICT
Mr Kevin McMahon	Director of Surgical and Clinical Services
Mrs Karen O'Kane	Executive Office Manager
Martina Bradley	Boardroom Apprentice
Mr Nick Carson	Head of Communications

Members of the Public:

Michelle Weir	Journalist
----------------------	-------------------

TB1/23 Apologies

Apologies were received from Mr Paul Corrigan, Non-Executive Director and Mr Glenn Houston, Non-Executive Director. The Trust's operational directors; Mrs Wendy Magowan, Mrs Audrey Harris, Mrs Diane Spence and Dr Petra Corr also sent apologies as they were dealing with the impact of Industrial Action.

TB2/23 Conflicts of Interest/Declarations of Interest

There were no conflicts of interest declared.

TB3/23 Chairman's Report

Mr McCann remarked on his Christmas Day visit to Antrim Hospital, which was the first one carried out since the Covid-19 pandemic began, and noted that the service had been much busier than before

and it was very much a normal working day. Staff were undertaking enormous effort to ensure discharges took place in order to free up beds.

Mr McCann and Mrs Welsh had attended a Mid-Year Accountability Meeting with Mr Peter May, Permanent Secretary, Department of Health (DOH). Mr May was very appreciative of the tremendous efforts made by Trust staff. Mr McCann said it was a very productive meeting but challenges remain, including increasing financial pressures and the need to ensure that Trust services are as productive and efficient as possible.

TB4/23 Chief Executive's Report

Mrs Welsh began her report by noting that the Trust Board was meeting in the midst of a prolonged period of industrial action. There were days of action in December and Mrs Welsh added that three different Trade Unions were involved in today's action and further action was planned in February, including two periods of 48 hour strike action, as well as the ongoing action short of a strike. There would inevitably be an impact on services. With regard to the situation on 26th January, there were contingency plans in place and the Trust had worked closely with the Trade Unions to protect critical services and to mitigate disruption, as far as possible. It remained the case, however, that thousands of service users were impacted, with many vulnerable people who require support not receiving domiciliary care calls and adult day centres for those with learning disabilities were closed. Pharmacy, Laboratories, Catering, Portering and other services were also affected with knock on impacts on some elective care services and on flow through the hospital. Mrs Welsh reiterated the words that she and her Chief Executive colleagues said in a joint statement in December. Staff are not just the backbone of health and care services; they are colleagues and friends. Working in the Health and Social and Care System (HSC) is a way of life. The HSC is a family because of the incredible work that takes place on a daily basis, often including additional service over and above normal duties. The Chief Executives obviously want to see all staff properly rewarded for their work. Staff have been impacted heavily by cost of living increases and the escalating pressures on Health and Social Care services. It was important society does not forget what staff in the HSC did for everyone all during the pandemic. Mrs Welsh acknowledged the dedication and commitment of all Trust staff and said she respected their right to take industrial action.

Mrs Welsh added that everyone is aware that the Health and Social Care System in Northern Ireland required a long-term funding settlement that would address service, workforce and pay pressures in a sustainable manner. The pressures in the HSC over the past few

months were evident for all to see. The system remains close to breaking point, where staff worked relentlessly in a daily struggle to meet the increasing demand. The current situation requires an urgent resolution whereby staff feel that they have no option but to take industrial action. Mrs Welsh acknowledged that this was not a situation the Northern Trust or indeed any Trusts could resolve. Discussions were required at a national level and Mrs Welsh urged those who could do something, to do so.

Mrs Welsh, continuing on the theme of pressures, said these have been most obvious in Unscheduled Care but pressures are evident across the system. Mrs Welsh thanked colleagues across the Trust for the significant efforts that they have made, for many months, but particularly in the past month. The Trust has improved its ambulance handover times, its discharge position and has been running with a large number of additional beds on both main hospital sites. The efforts of a great many people were recognised by Peter May, Permanent Secretary, DOH, when he made a visit to the Trust the previous week, meeting teams from urgent and emergency services, elective services and community services. Whilst the pressures continue, there has been a slight easing and much of this was down to the huge efforts by a great many staff. Mrs Welsh expressed her sincere thanks.

Mrs Welsh advised that she had reported at a previous meeting that these pressures were very prominent back in November 2022 when the Trust declared a major incident. A review of the incident has taken place and the Trust was in receipt of a draft report for factual accuracy checking. There are some amendments to be made. There are some useful recommendations, and the Trust welcomed those actions that were planned at a regional level.

Mrs Welsh referred to the ongoing public consultation on maternity services, which would close on 3rd March 2023. To date over 689 local groups and organisations have been contacted and 95 written responses received. All the information is available on the Trust's website and a workshop would be held in mid-March for the Trust's senior staff to review the feedback. There would also be another listening event on 8th February 2023.

Mrs Welsh then advised that members had been briefed previously in respect of the down turning of services at Whiteabbey Nightingale, with funding due to end in March. The non-recurrent nature of the funding had left the unit in an increasingly unsustainable position. Staff on temporary contracts, understandably sought permanent employment elsewhere and as 2022/23 progressed it became clear that this would affect the outcomes of the unit and its overall sustainability. Discussions held amongst policy leads at DOH were not successful in identifying a recurrent funding source. The unit,

therefore, was unsustainable beyond March 2023. The project board, which included representatives from DOH and other Trusts formally, endorsed the proposal for a phased wind-down and the unit will therefore close at the end of March 2023. Mrs Welsh was disappointed but acknowledged the funding challenges and expressed her sincere thanks to Mrs Magowan, Mr Martin, Mrs Harris and their staff, along with the Estate Services Team for all their hard work in preparing and maintaining the unit.

Mrs Welsh finished her report by conveying her delight that the Trust had achieved Silver level accreditation in Investors in People (IiP). The Trust was first recognised in 2018 and the reaccreditation took place between September and December 2022 and illustrated an increase in average ratings across all nine people measurements. This resulted in the higher-level Silver accreditation. Mrs Welsh was particularly delighted given the exceptionally challenging period of the last few years, with a worldwide pandemic and all of the challenges that Covid has brought to the whole HSC, as well as the unrelenting unscheduled and other pressures. Mrs Welsh and Mrs Reid had attended a feedback meeting with the IiP assessment team and were pleased with the verbal response received, as well as the formal report. Mrs Welsh said the accreditation showed that the Trust was on the correct path and would continue to pursue the objective of “Nurturing our People, Enabling our Talent and Building our Teams”.

TB5/23 Account of Employee Experience

Mr McCann introduced the Employee Experience and reminded Trust Board of the importance of hearing from both service users and employees. Maura Dargan welcomed Chantelle Hamill, Senior Social Worker, Children’s Gateway Service. Chantelle had presented at a workshop held recently as part of Professor Ray Jones’ Review of Children’s Services. Chantelle outlined her background as a frontline social worker from 2006 and detailed the challenges of recruiting and retaining staff in frontline Children’s Services. She also summarised how issues were dealt with and what worked well. Chantelle paid tribute to her team and said that whilst morale was good, it was changeable, and she did have concerns about the resilience and goodwill of staff.

Mr McCann thanked Chantelle for attending and sharing her experience. He asked where staff went when they left the service. Chantelle responded that it was to a number of other areas but the majority moved away from frontline services to other roles, which were less pressurised. Chantelle added that she was hopeful for the outcome of Professor Jones’ work but would await the recommendations.



TB6/23 Minutes of Meeting held on 26th January 2023

The minutes of the previous meeting were agreed as an accurate record on the proposal of Mr McCall and seconded by Mr McGivern.

TB7/23 Matters Arising

- There were no matters arising, not on the agenda.

TB8/23 Performance Report as at 31st December 2022

Mr Martin presented the Performance Report as at 31st December 2022 and advised that he would be concentrating on the Winter period. He noted that Emergency Department (ED) attendances were up 5%, with paediatric attendances up by 72% at Antrim Hospital from the same period in 2019/20 and Causeway paediatric attendances up by 27%. It was noted that bed occupancy in Antrim was well in excess of capacity, peaking at approximately 130%. The pressure on beds in Causeway remained over a longer period and it took the Causeway site longer to return to normal levels. Mr Martin noted that the capacity to discharge patients was lower on Christmas Day as this fell on a Saturday but he paid tribute to staff, in both the hospitals and community, who were able to increase the average number of discharges.

For the most part the Trust was achieving the three-hour ambulance turnaround time at Causeway and Antrim, with delayed discharges being just under the average.

In summary, Mr Martin said there had been high levels of demand and acuity in a system already under pressure and there had been relatively low levels of discharges on Christmas Eve. The Trust had placed significant focus on community flow and discharges and there had been a period of successful recovery and stabilisation, but the system remains under pressure.

Mr McCann mentioned that ambulance arrivals were discussed at the recent Mid-Year Accountability meeting and that the Northern Trust was the second busiest on a consistent basis. Even after the new beds are available, it would still be the same for ambulance arrivals versus bed numbers. Mr McCann further advised that, according to the NHS Confederation, busy Trusts in United Kingdom were measured by bed occupancy of 95% over a few weeks. All Northern Ireland hospitals were consistently over 100% and Mr McCann felt that this situation was not well enough recognised.

Mr McCall queried the current position on neurology recruitment. Dr Watkins responded that there were still issues and a regional approach would be needed as Trusts often go out for recruitment at the same time. Dr Watkins would be addressing this with his colleagues.

Mr Martin finished by outlining the impact from December's industrial action and noted that today's (26th January 2023) action would have a different impact. The impact would be felt less on outpatients and more on domiciliary care, day care and adult centres with approximately 2000 to 2500 users affected. Mr Martin said the figures would be updated in due course and added to the Trust's website.

TB9/23 Finance Report as at 31st December 2022

Mr Harkin presented the Financial Position as at 31st December 2022 and said there had been little change from the previously presented report. The Trust was currently projecting a small surplus but was likely to break-even at year-end. Mr Harkin and his team continued to monitor the impact of the recent pressures and were working closely with the Strategic Planning and Performance Group (SPPG) on cost containment measures. Taking account of costs associated with Covid-19, Personal Protective Equipment (PPE) and transformation, and with additional funding, Mr Harkin expected the Trust to break-even.

The divisional positions remain as expected and the financial pressures in Medicine and Emergency Medicine were mainly due to locum and agency costs. Reducing locum and agency costs would be the focus both locally and regionally in the coming financial year. Recruitment and retention, however remains a concern across all positions.

Mr Harkin noted that the Trust had achieved its savings targets, including Pharmacy savings and that £19.4million of Covid-19 costs had been fully funded. The challenge in the 2023/24 financial year would be to maintain these cost containment measures alongside any additional targets set out by DOH.

Engagement with DOH and SPPG will continue and Mr Harkin will keep Trust Board informed.

Mr McGivern referred to the table on page 11, which outlined the divisional spend on locum staff and asked what the 'other' category was as it was quite significant. Mr Harkin said he would look at this and provide an analysis. He assured Mr McGivern that all agency spend was reviewed and that the Trust Locum Scrutiny Group had been reinvigorated. The regional work on non-contract nursing

agency spend was continuing and a tender would be awarded in due course. Mr Harkin said the service was looking towards stabilisation of the workforce and reduced agency spend. There was also a review of locum medical spend. Mr McGivern then asked about the seven staff who had joined and left the service through the international nurse recruitment from Europe and if they were the same staff and if other Trusts had the same experience. Mrs Pullins said she would check on this and added that the Trust had a very good retention rate for non-European nurses.

TB10/23 TeamNORTH People Report

Mrs Reid noted the following main points of the People Report.

Absence Management:

It was noted that 69% of all managers had completed their mandatory training and the Trust's cumulative absence level was 7.31% against a target of 6.83%.

Resourcing/Recruitment:

The Trust had seen a spike in requests in November 2022 due to the recruitment of staff for the additional 48 beds in Antrim Hospital. There was some concern about the number of conditional offers, 383, still to be progressed by the Business Services Organisation (BSO) and this would be followed up. The Trust was also looking at the 310 posts where there is no supply. The Trust continued to take a risk-assessed approach to pre-employment checks.

Appraisal:

Mrs Reid noted that two of the main themes coming through the appraisal process were training and development, and staffing looking for agency in their jobs. The current rate for completed appraisals was 58% against a target of 75% and efforts would be redoubled to increase this percentage.

Investors in People:

Mrs Reid was delighted to confirm the Trust had received silver accreditation from Investors in People, being one of only 15% of organisation who achieved the level. Mrs Reid said the service would take time to celebrate this achievement.

Mr McGivern asked if the announcement by Belfast Health and Social Care Trust about the impact of Industrial Action on its' switchboard staff, would affect the Trust. Mr Martin said that Trust medical staff had been supplied with a list of direct contact numbers so he was not anticipating any problems. Mr McGivern further asked about the average days lost per employee, 10.24, and if this was skewed. Mrs Reid replied that long-term sickness could influence the average but the Trust was not out of kilter with the region. Mrs Reid will bring an update on this to the next presentation of the People Report.

TB11/23 Updated General Capital Management Policy

Mr Harkin presented an updated General Capital Management Policy, which proposed to bring the Trust into line with regional colleagues and bring business cases over £500,000 to Trust Board. This would help ensure business cases below this level proceeded in a timely manner. In instances where there were changes in the scope of a business case or increases over 10% of the original agreed value, these would come to Trust Board.

The policy would be kept under review and any further changes would be brought back to Trust Board, and Mr Harkin was confident the policy brought the Trust into line with the region.

Trust Board approved the policy.

TB12/23 Approval of Business Cases

- Creation of a Bereavement Suite for Antrim Hospital Maternity Services

Trust Board approved the resubmitted business case for a dedicated bereavement suite in Antrim Area Hospital. The costs had increased to £305,377 from a pre-tender estimate of £117,766.

- Psychiatric Intensive Care Unit (PICU)

Mr Harkin spoke to the resubmitted report, which was presented for retrospective approval. Due to the time critical nature of the work, the Chairman had approved the business case two weeks previously. There had been a significant increase in costs and the scope of the business case revised to include only the male PICU and the seclusion unit. Mr McCall endorsed the change in scope, as this was a critical service for mental health patients.

Trust Board approved the resubmitted business case.

- Implementation of Rapid Diagnosis Centre (RDC) in NHSC

Mr McMahon told Trust Board that this business case was for the capital component of the Rapid Diagnosis Centre at Whiteabbey Hospital, one of two announced by the Minister for Health. Mr McMahon outlined the process for patients referred to the centre, with a CT scan carried out on the day and, if required, MRI at a future date. The preferred option was in line with the Trust's strategic direction for MRI services, with capital provided for CT, MRI and enabling works on the Whiteabbey site. The Trust also planned to seek capital for enabling works on the Causeway site to enhance MRI provision.

The business case once approved would be submitted to DOH, with support from SPPG on any associated revenue tail. Mr McCann asked if this centre would accept referrals from any GP. Mr McMahon replied that originally, the unit was to serve the East Antrim area but he did not envisage referrals being turned away; bearing in mind that capacity would be limited at the initial stage.

Trust Board approved the business case.

TB13/23 Write Off of Losses

Mr Harkin presented a number of write offs for noting and one for approval. He explained that due to the value of some losses, these were approved by DOH before coming to Trust Board for noting. Mr Harkin added that there was a stringent process in place and his staff had focussed on dealing with losses, particularly with those associated with care home debts.

Trust Board approved the loss for write off and noted the remainder.

TB14/23 Draft Equality Action Plan and Disability Action Plan

Mr Martin welcomed Alison Irwin, Head of Equality to speak to the papers presented. Mrs Irwin informed Trust Board that the proposal was to move to a 12-week consultation on the regional draft Equality and Disability Action Plans. These plans were the out workings of a collaborative process by all six Trusts and co-ordinated by Northern Trust. The plans lay out the plan for the next five years. Engagement was carried out with the Trust's Equality, Diversity and Inclusion Steering Group and other stakeholders. Mrs Irwin reiterated that the Trust remained committed to working in partnership to deliver actions. Mr McCann asked if the Trust was able to maintain positive change, given the pressure on services. Mrs Irwin said she was very optimistic that her team and the wider Trust would be able to take forward actions and that these plans are over and above what the Trust already does.

Mr Graham referred to the Trust's support for carers and Mrs Irwin confirmed this was included in the plan and that at present the Northern Trust is the only Trust with a Carer's Hub. There are plans to expand the hub, if possible, through Charitable Trust Funds. This remains a key focus for the Trust.

Mr McCall praised the reports and asked if the Trust's rurality made planning more difficult. Mrs Irwin responded that this would be a

focus if reforming or changing service provision and rural needs assessments would be carried out. Again, this would be done in partnership with the Trust's community and rural networks.

Mr McCann commended Mrs Irwin and her team for the work they did and asked if there was a way to measure and evaluate their output and the lives made better. Mrs Irwin explained that it could be difficult to quantify improvements and that counting can sometimes remove focus but that relationships with partners were excellent. All Trust staff work extremely hard, supported by the Equality Unit, to improve the lives of service users. Mrs Irwin said that she would continue to consider how best to evaluate the differences made.

Trust Board approved the papers presented to allow the commencement of the 12-week consultation process.

TB15/23 Interim Directed Statutory Functions Report

Maura Dargan confirmed that the Interim Directed Statutory Functions Report was presented to Assurance Committee and discussed at the Trust Board workshop in December. Maura stated that the view of Professor Roy Jones was that the Children's Services were in crisis, due to pressures and workforce challenges. Trusts were examining a number of options and would continue to have discussions with DOH and relevant partners on the strategic priorities. Mr Graham asked if the challenges were recognised. Maura Dargan replied that they were and recommendations were being developed. Chief Executives were well sighted on Professor Jones' work and further workshops would be arranged for stakeholders.

Mr McCall enquired about unallocated cases. Maura Dargan confirmed these were monitored and reported as required. The Trust was doing as much as it could but may need to look at risk stratification of cases.

Trust Board approved the report.

TB16/23 Principal Risk Document

Trust Board noted the Principal Risk Document.

TB17/23 Adoption Panel Annual Report

Trust Board noted the Adoption Panel Annual Report.



TB18/23 Contract Award Report October to December 2022

Trust Board noted the contracts awarded to both independent sector and other providers

TB19/23 Capital Report as at 31st December 2022

Trust Board noted the Capital Report.

TB20/23 Update on Mental Health Inpatient Service Capital Development

Mr Harkin presented the update on the new Mental Health Inpatient Unit. Work continues at pace and there were still some risks with the project but these were closely managed. DOH were well sighted on potential inflationary pressures. The Stage III Report was due for completion in mid-July and planning permission for boundary works and a new road layout had been agreed. The Project Board hoped to consider options for naming the new unit at the next meeting. Mr Graham asked what the plan was for the Holywell site. Mr Harkin said the decommissioning of the site was part of the business case and this process would be developed in 2023/24. The Trust were aware of the importance of this aspect of the process.

TB21/23 Minutes of Committee Meetings:

Assurance Committee – 8th September 2022

Trust Board noted the minutes.

Charitable Trust Funds Committee – 3rd October 2022

Trust Board noted the minutes.

TB22/23 Use of the Trust Seal

Trust Board noted those instances where the Trust seal had been used.

TB23/23 Public Questions

There were no public questions received.

TB24/23 Date of Next Meeting



Northern Health
and Social Care Trust

The next public Trust Board meeting will be held on Thursday 23rd
March 2023 at 10am.