Northern Health and Social Care Trust

Minutes of the One Hundred and Forty Fifth Trust Board Meeting held on Thursday 25th August 2022 at 10:00am, Boardroom Trust Headquarters/Via Videoconference

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 Paul Corrigan	**Non-Executive Director**
Mr William Graham	**Non-Executive Director**
Mrs Suzanne Pullins	**Executive Director of Nursing, Paediatrics, Women's Services & Corporate Support**

In attendance:

Mrs Wendy Magowan	**Director of Operations**
Mrs Jacqui Reid	**Director of Human Resources and Head of Office**
Mr Nick Carson	**Head of Communications**
Dr Petra Corr	**Interim Divisional Director of Mental Health, Learning Disability and Community Wellbeing**
Mr Paddy Graffin	**Interim Director of Integrated Care**
Mrs Diane Spence	**Interim Director of Community Care**
Mrs Audrey Harris	**Interim Director of Medicine & Emergency Medicine**
Mrs Karen O'Kane	**Executive Office Manager**
Mr Aaron Carey	**Boardroom Apprentice**
Ms Sarah Williamson	**Assistant Director, Performance, Innovation and Quality Improvement**
Mrs Ciara McKillop	**Assistant Director, Child Health, Development and Emotional Wellbeing**
Ms Lynne McCartney	**Assistant Director, Surgical and Clinical Services**

Members of the Public:

Michelle Weir	**Journalist**

TB89/22 Apologies

Apologies were received from Glenn Houston, Non-Executive Director, Maura Dargan Director of Social Work and Divisional Director of Children and Young People's, Mr Seamus O'Reilly, Executive Medical Director, Wendy Magowan, Director of Operations, Kevin McMahon, Interim Director of Surgical and Clinical Services and Neil Martin, Interim Director of Strategic Development and Business Services.

TB90/22 Conflicts of Interest/Declarations of Interest

There were no conflicts of interest declared.

TB91/22 Chairman's Report

Mr McCann began by reminding members that one of the key objectives of Trust Board was to manage risks to health and social care. Chairs of NHS Bodies in England, Wales and Northern Ireland had come together to write to the Chancellor of the Exchequer, United Kingdom Government, regarding the cost of living crisis. The letter asked for decisions to be made on the energy crisis and rising inflation to try to mitigate the risks to public health and health outcomes. Mr McCann said the service was facing an unprecedented situation whereby services and health outcomes could be detrimentally impacted.

TB92/22 Chief Executive's Report

Mrs Welsh thanked Mr McCann for the correspondence issued to the Chancellor and added that she shared his concerns about the impact of the cost of living crisis on public health outcomes and on staff. Trade Unions were currently balloting their members on strike action, partly in response to the increases in the cost of living. Mrs Welsh will keep Trust Board informed.

Mrs Welsh also mentioned the recent media story on the overspend facing the Health Service.

Mrs Welsh thanked her colleagues for the work undertaken to bring forward the business cases for the additional 48 beds. This will provide Antrim Hospital with much needed bed capacity.

Mrs Welsh finished her update by advised that a Design Plan for the Health and Social Care Service would be drafted to consider the way ahead. The Trust had an initial meeting with the Department of Health (DOH) and Trust Board will be updated further in due course.

TB93/22 Account of Patient Experience

Dr Corr introduced Gareth Farmer, Assistant Director, Learning Disability, Kim Jackson, Team Leader, Community Mental Health Services, Joanne Grimes, Operational Manager, Positive Futures and Mrs J, parent of SJ, and gave a short brief on SJ's experience with the Trust.

Gareth Farmer then gave an introduction to SJ and her story of transition from Children's Services to Adult Services before asking Kim Jackson to outline SJ's experience with Positive Futures. Kim Jackson outlined the challenges and successes with moving SJ, with the support of Positive Futures, into her own home. She said the key to success was family and staff engagement and that it was an exciting programme. Joanne Grimes then explained that SJ had been treated as an individual and was at the centre of all decisions made about her care. This was a new service and was not without its challenges, including staffing and identifying appropriate housing. The establishment of a routine was key and learning how to manage SJ's behaviours. Joanne also said that the relationship between Positive Futures, the Trust and the family was crucial. There have been great changes in SJ in the past year and her team of staff have proved resilient in dealing with issues in a new service provided in a new geographical area. Finally, SJ's mother spoke and said that previously there had been some issues in Children's Services but the transition to adult services was smooth. Mrs J said that SJ's quality of life had improved and she was well settled into her new home. It has also been easier for the wider family as SJ is now physically closer to home.

Mr McCann thanked all attendees, but especially Mrs J for sharing her child's story.

There are photographs and a video of SJ available, which will be shared with Trust Board members following the meeting.

TB94/22 Minutes of Meeting held on 23rd June 2022

The minutes of the previous meeting were agreed as a fair and accurate record on the proposal of Mr McCall and seconded by Mr Corrigan.

TB95/22 Matters Arising

There were no matters arising.

TB96/22 Performance Report as 31st July 2022

Sarah Williamson presented the Trust Board Performance Report as at 31st July and said the primary focus at present was on returning services to pre-pandemic levels. Ms Williamson outlined the challenges with data collation. The following matters where then discussed:

Learning Disability Day Centres:

Dr Corr reported that all adult centres were now open and offering places. Some service users have not returned post-Covid-19 and some service users are having their care needs reassessed. Dr Corr said it was challenging to get to pre-Covid-19 levels but the target was met in July and the Trust was working with the Strategic Planning and Performance Group (SPPG) of DOH to make the target more meaningful. Dr Corr was pleased to say that the model of service was attuned to the needs of individuals.

Community Care:

Mrs Spence reported a similar position to Learning Disability, in that all centres were now open. The attendances were still below pre-Covid-19 levels but similarly some service users had decided not to return. Community Care staff were also looking at reablement and working with families and individuals to ensure places are utilised. Mrs Spence did not foresee any difficulties in getting to 100% by Autumn. Again, staff were liaising with SPPG to make the monitoring and data collation more meaningful.

Allied Health Professionals:

The target for physiotherapy new contact was 80% of 2019/20 levels, the Trust achieved 63%. The level achieved for review patients was 53%. Ms McCartney provided an update and explained that in 2019/20 there was a full complement of staff and locums in place. At present, the service has 78% of staffing in place and Ms McCartney was hopeful of further staff in Autumn, but she did not believe there would be an immediate improvement in performance.

Mr McCann referred to the improvement in Allied Health Professional (AHP) performance early in the year and noted that it had dipped in June and July. He asked what the reason for this was. Ms Williamson said that staff absence, the effects of Covid-19 and workforce issues had affected performance. Mrs Spence added that whilst there had not been as much of an impact on Podiatry, the Occupational Therapy service had struggled to meet its targets due to sickness absence, Covid-19 absence and other leave. It was under continual monitoring and other ways of working were being considered.

Mrs Harris confirmed that dietetic services were almost back to normal but the service had been impacted by Covid-19 absences in May and June. There are still a number of vacant posts and new ways of working are being considered, especially for paediatric dietetics.

Inpatient/Day Cases:
The Trust had achieved 79% against a target of 80% of the 2019/20 outturn position. To improve further would be a challenge. Mr McCann again remarked on the June and July drop in performance. Ms McCartney advised that there had been an increase in Covid-19 absences, which had affected anaesthetics and theatres. The service also had unfilled vacancies. It takes three months to get theatre nurses inducted and trained and getting back to full capacity would be dependent on filling vacancies. The number of inpatient theatres lists had increased but there are still some day case theatres to get up and running.

Endoscopy:
The Trust had exceeded its target in July and Ms McCartney explained that there had been a huge amount of work done by using nurse endoscopists. Mr Corrigan remarked that the Trust was still short of its Service and Budget Agreement (SBA) target and asked why this was. Mrs Welsh informed Trust Board that the Trust continued to have discussions with SPPG regarding SBAs and it was accepted that they require review and that the focus should be on actual capacity. At present SPPG were focusing on monitoring service delivery trajectories.

Unscheduled Care:

Trust Board noted the Trust's performance on weekend discharges in both Antrim and Causeway Hospitals. Mrs Harris said this was very challenging and had increased focus on weekend working. Mrs Harris has a group established to look at how teams work at the weekend and there are pre-weekend multi-disciplinary meetings on Friday afternoons. Mrs Harris would bring an options paper to Senior Management Team to develop an innovative approach to weekend working. The Trust is not currently commissioned for 7-day working but unscheduled care is dependent on a number of other services, speech and language therapy for example.

There was also discussion on length of stay and Mrs Harris said the length of stay for all specialties was above the target set and this might be a more useful metric. This was a reflection of the hospitals working over capacity and instances where patients were waiting on admission to other hospital facilities. There are processes in place to ensure that all stays are reviewed regularly. The re-admittance rate has started to increase and this is reflective of the acuity of patients.

Mrs Welsh indicated that the Service Delivery Plans would be monitored through the Performance and Transformation Executive Board (PTEB) and that there had been significant discussion at regional meetings. There was a recognition that the template was a 'live' document and that whilst it was more beneficial in some areas than others, a commitment had been made to use this format. The data submitted for the report being considered today was uploaded earlier in the month than normal and there are some reporting mechanisms that still need clarification.

Mr Graham referred to the Health and Social Care Board Performance Report, which would have been previously shared with Trusts and asked if this would be replaced. Mrs Welsh advised that the proposal was for Service Delivery Plans to replace the performance report and these would come to PTEB. Mrs Welsh agreed to share these with Non-Executives members for review.

<u>Child and Adolescent Mental Health Services:</u>
Mrs McKillop introduced herself as the Assistant Director for Child Health, Development and Emotional Wellbeing, which covered both the Child and Adolescent Mental Health Services (CAMHS) and the Early Intervention Service. Mrs McKillop took Trust Board members through her presentation and outlined the process for managing

waiting lists. Mrs McKillop outlined the staffing challenges faced and said the service were looking at new ways of working.

Mr McCall reflected that this was a hugely challenging area and that the Trust was acquitting itself well, however staffing is still an issue. Mrs McKillop responded that the Mental Health Strategy does recognise staffing as a concern and that CAMHS has a programme to develop its own staff, its workforce is the most stable in the region and the Trust is considered the employer of choice in this field. Dr Corr concurred with Mrs McKillop's comments and added that significant investment was still required.

TB97/22 Finance Report as at 31st July 2022

Mr Harkin presented the Financial Position as at 31st July 2022. He informed Trust Board that some areas of the report would not contain detailed information as the finance systems had been shut down for a period as a precautionary measure due to a regional cybersecurity incident. The reporting will be back to normal for the next month's report.

The Trust was projecting a £43.1million deficit, but funding of £7.5million had been confirmed, leaving a gap of approximately £36million. The Trust continued to work with DOH and SPPG on the financial position and would continue to review and monitor costs associated with, for example, Covid-19 and energy. Mr Harkin commented that the Minister of Health was not minded to take major decisions so the Trust would continue to manage finances as best as it could in the absence of an agreed budget. Mr Harkin would continue to take any opportunity to reduce discretionary spend.

Mr Harkin then summarised the risks to the financial position before speaking on a number of regional issues. The service is waiting on a decision on pay awards and on the use of agency staff. Mr Harkin said action on both of these was likely to be taken later in the year. The Trust has re-established its Locum Scrutiny Group and continues to monitor and manage non-contract agency spend. The overall health and social care finances are to be reviewed.

Mr Harkin's main messages were to control expenditure, maintain services and decrease discretionary spend where possible.

TB98/22 Approval of Business Cases

- Installation and replacement of lifts in service users home environments
  Mrs Spence spoke to this business case and said the Trust had an obligation, under the strategy to maintain service users in their own homes, to install lifts and hoists where required. An increase in the number of older people and physically disabled service users, coupled with costs pressures, has meant that spend in this financial year has increased. There is a robust assessment of need in place and senior management oversight of the process. Mr McGivern referred to the 16-week target and asked was this achievable. Mrs Spence said she was confident this would be met but would check.

  Mr McCann asked if a regional contract was in place. Mr Graffin responded that it was a national framework agreement but that a regional contract would be looked at. Mr McCann further asked if there were any steps the Trust could take to maintain or reduce costs. Mr Graffin agreed that there were some things that could be done, including a more realistic estimate of the number of lifts, but that most of the increase in costs came from the cost of steel manufacturing. Mr McCall asked if the lifts were recycled, Mr Graffin and Mrs Spence said they were, where possible.

  Trust Board approved the business case.

- Mid Ulster Eye Centre
  Mr Harkin presented this business case and advised that this was for a regional service, supported by SPPG. The cost of the preferred option was £965,000.

  Trust Board approved the business case.

- Main CT Replacement Causeway Hospital
- Mobile CT Scanner Causeway Hospital
  Mr Harkin spoke to these two business cases, which are both funded from the regional imaging service. The new equipment would be more modern and fit for purpose for a hospital of Causeway's size. Mr McGivern asked why the current scanner was being moved to Mid Ulster Hospital. Mr Harkin said this was because it was still suitable for the less complex scans carried out there.

The new mobile scanner would provide resilience for the radiology service.

Trust Board approved the business cases.

- Mid-Ulster Health Care, Cookstown – Accommodation to Facilitate the Expansion of GMS in the Practice
  Mr Harkin reported that this was a modular build, fully funded by SPPG, which would enable Trust Services to move and free up space for General Practitioner accommodation.

  Trust Board approved the business case.

- Conversion from Oil to Gas, Cookstown
  Mr Harkin said the benefits of converting from oil to gas were outlined in the business case and it would provide efficiency savings for the Trust. The total cost was £281,000, with £245,000 provided from a regional Invest to Save scheme.

  Mr Corrigan asked if this included the ambulance station at Westlands. Mr Graffin confirmed that the station was on a separate heating system. Mr McCann asked if it was the correct decision to move to gas now. Mr Harkin advised that it was a long-term decision and gas was cheaper in this context, and there are environmental benefits to using gas. This would include decreases in carbon taxes.

  Trust Board approved the business case.

- Interim Beds Antrim Area Hospital – Full Business Case
  Mr Harkin said this was a very exciting development for the Trust and the outline business case had been previously approved by Trust Board. The full business case was presented for approval and an award of tender was pending. The revised capital cost was £23.1million. A Critical Friend Review had recommended a change to the optimum bias used in the business case, and this had been actioned. The Trust was planning a January or February 2023 delivery date and was working closely with prospective tenderers, DOH and the Construction and Procurement Delivery – Health Projects Unit (CPD) of the Department of Finance.

Mr Harkin added that there were some risks to the project, mainly around supply and staffing. Mrs Harris would be leading on the staffing of the unit. Mrs Harris commented that it was a very exciting development, which would add efficiencies as well as additional beds. The staff strategy would be to add to existing teams rather than create new teams and Mrs Harris said working with staff is the priority and to become the employer of choice.

Mr McCann and Mr McGivern welcomed the news of the development.

Trust Board approved the business case.

- Purchase of MACS Building, Dundrod – for noting
  This business case was previously approved in a reserved session of Trust Board due to commercial confidentiality. The building has been purchased and the Trust's plan was to use it for relocating out of area placements. The Trust would work with SPPG on the funding of the £1.1million revenue costs.

  Mr McCann welcomed the name given to the new facility – Malin's Wood.

TB99/22 Section 75 Annual Progress Report & Equality Newsletter

Mrs Alison Irwin presented the Section 75 Progress Report and reminded Trust Board that the Trust had a legal duty to update the Equality Commission on its implementation.

Mrs Irwin drew attention to a few issues, including that Dr Darshan Kumar had received a Good Relations Award and that Mrs Magowan was leading on the Trust's Equality, Diversity and Inclusion Group. The Trust had also worked with AccessAble to develop signage for disabled users on the Antrim and Causeway Hospital sites.

Mr McCann commended the work reflected in the report and the Equality Newsletter and asked Mrs Irwin if staff from minority ethnic groups felt valued in the Trust. Mrs Irwin responded that the Trust had begun a journey, led by Mrs Welsh and Mrs Magowan, to increase engagement with staff from minority groups and whilst there was good work ongoing, there was still some way to go.

Trust Board approved the Progress Report.

TB100/22 Property Matters: Disposal of Holywell Reservoir

Mr Harkin reminded Trust Board that the property had been agreed for disposal in 2017 but had been postponed for remedial work to be completed. This is now finished.

Trust Board approved the disposal.

TB101/22 Annual Accounts including Annual Report 2021/22

Trust Board noted that the Annual Accounts and Annual Report had been published and laid before the Assembly. It was further noted that the Trust now had a turnover of over £1billion. Overall, the Trust had received a clean audit report.

TB102/22 Audit Committee Annual Report 2021/22

For noting. Mr Corrigan advised that DOH had initiated a process of inviting Audit Committee Chairs to observe the departmental Audit Committee. He would be attending in September.

TB103/22 Capital Programme – position as at 31st July 2022

The Capital Programme was noted. Mr Harkin drew attention to some of the larger projects. General capital is over-committed at present but this will be closely monitored, along with post project evaluations and pressures.

TB104/22 Update on Mental Health Inpatients Service Capital Development

Dr Corr presented the update for noting and reported that there had been some delays in relation to Mechanical and Engineering aspects of the development. These will be picked up by CPD. It is anticipated that the full spend of £11m will be made in-year. There are some risks to the project, which will also be kept under review.

TB105/22 Committee Minutes

Committee Minutes:

- Minutes of Performance & Finance Committee – 28th April 2022

Trust Board noted the approved minutes.

- Minutes of Charitable Trust Funds Committee – 19th January 2022

  Trust Board noted the approved minutes.

TB106/22 **Contract Award Report**

Trust Board noted the Contract Award Report.

TB107/22 **Use of Trust Seal**

Trust Board noted the instances where the Trust Seal was used.

TB108/22 **Any Other Business**

Mr McCann concluded the meeting by noting that this was Aaron Carey's last Trust Board as Boardroom Apprentice. He wished Mr Carey well for the rest of his career and noted that Martina Bradley would join the Board in September as the apprentice for 2022/23.

Mr Carey thanked Trust Board for what had been a very beneficial experience.

TB109/22 **Public Questions**

There were no public questions.

TB110/22 **Date of Next Meeting**

The next meeting will be held on Thursday 27th October 2022 at 10am.