

SOUTH EASTERN HEALTH AND SOCIAL CARE TRUST

Minutes of a Public Meeting of the South Eastern Health & Social Care Trust Board held on Wednesday 26 August 2020 at 2.05 pm in the Lecture Theatre, Trust HQ, Ulster Hospital, Dundonald

PRESENT IN QIIC: Mr J Patton, Chairman (Acting)
Mr S McGoran, Interim Chief Executive
Mr C Martyn, Medical Director
Ms B Campbell, Director of Children's Services & Executive
Director of Social Work
Mr P Morgan, Interim Director of Finance and Estates
Ms N Patterson, Director of Primary Care, Older People &
Executive Director of Nursing

VIDEO CONFERENCE Mr N Brady, Non-Executive Director
Dr M Briscoe, Non-Executive Director
Mr M Mawhinney, Non-Executive Director
Ms J O'Hagan, Non-Executive Director

IN ATTENDANCE: Mrs M O'Kane, Interim Director of Adult Services & Prison
Healthcare
Ms R Coulter, Director of Planning, Performance & Informatics
Mrs M Weir, Director of Human Resources & Corporate Affairs
Dr D Robinson, Interim Director of Hospital Services
Mrs V Walker, Assistant Director, Risk Management and
Governance & Board Secretary
Mr S Martin, Executive Support Services Manager
Ms K Hutchison, Personal Assistant
Mr J White, Assistant Director, Health Promotion and Wellbeing
(Service User Story only)
Ms L McAllister, H.O.P.E Team Leader (Service User Story
only)
Mrs S Thompson, Equality Manager (Annual Equality Report
only)

APOLOGIES: Mrs H Minford, Non-Executive Director

OPENING REMARKS

At the outset, **the Chairman** welcomed everyone to the meeting and a particular welcome to Mr J Large, Trade Union representative for attending today.

59/20 SERVICE USER STORY

Ms Campbell welcomed **Mr White** and **Ms McAllister** who were attending to brief Members on the work of the HOPE team during the Covid emergency.

Mr White outlined that the team had been established in 2009 as an employability service for care leavers aged 18-21 and two years ago changed to the H.O.P.E Service (Holistic Outcomes through Positive Experiences for Children and Young

People) - a wraparound service with an expanded scope and target age range.

Ms McAllister highlighted the team's work with young care leavers aged 15-21 to provide development opportunities by helping them to feel supported and connected despite the challenges oftentimes of social isolation and poverty. The team developed helpful coping strategies, organised challenges, supported the young people to create their own nutrition/fitness plans, recipes, songs, poems, activities and positive stories. All staff worked outside their 9-5 hours and used online resources to provide support, evening and weekend, provided a weekly newsletter via email, organised social activities, wellbeing check-in calls, designed a 6 week course booklet in one day and accessed funding for IT equipment to help combat digital poverty as well as advice on individual job support and wellbeing.

The team received over 50% increase in referrals during lockdown and are currently providing one to one support to 70+ young people. As a result of increased isolation, loneliness, low mood and anxiety, funding had been secured through the Covid charitable funds to deliver an outdoor well-being programme which facilitated 12 young people who have a range of issues, ACE, trauma history, NETE, MH problems and also a diverse range of academic ability levels which proved really positive.

Ms McAllister stated she felt proud to have been part of such an innovative needs led programme where service users were at the centre of every decision and concluded by introducing a video produced by young people involved.

Discussion ensued and a number of Members congratulated the team on an excellent presentation commending the dedication of the young people in the development of their projects. In response to a query from **Mr Brady** on the pressures on young people during Covid, **Ms McAllister** shared that many had benefited from time at home but there had been challenges such as loneliness and uncertainty around exam results to overcome.

The Chairman expressed his appreciation for the HOPE team and the value of today's presentation to Trust Board.

60/20 DECLARATION OF POTENTIAL CONFLICT OF INTERESTS WITH ANY BUSINESS ITEMS ON THE AGENDA

The Chairman invited declarations of any potential conflicts of interest. **Dr Briscoe** noted an interest in the item relating to the Review of Leadership & Governance at Muckamore Abbey Hospital as a former Director of Mental Health, Disability and Older People at the Department of Health prior to her retirement.

61/20 CHAIRMAN'S BUSINESS

The Chairman confirmed that the Chairman's Business has been tabled and available in the papers for Public Trust Board. If there are items for further discussion or clarification, Members are invited to bring to the Chairman's attention outside of this forum.

62/20 **CHIEF EXECUTIVE'S BUSINESS**

The **Chairman** invited **Mr McGoran** to update members on Chief Executive's business. **Mr McGoran** had no items of discussion to raise that were not already part of the main agenda.

63/20 **MINUTES OF THE PREVIOUS MEETING HELD ON 24 JUNE 2020**

Members were content with the minutes of the Public Meeting held on 24 June 2020, having been previously circulated, to be taken as read and signed as a true and accurate record.

64/20 **MATTERS ARISING FROM THE PREVIOUS MINUTES**

There were no items for discussion under this section.

65/20 **ANNUAL EQUALITY REPORT 2019/20**

Members received, for approval, Paper No: SET/39/20 Annual Equality Report 2019/20, which had been circulated with the papers for the meeting. **Mrs Weir** welcomed Mrs Thompson to present the Annual Equality Report 2019/20 and associate papers. During the detailed presentation, Mrs Thompson highlighted the following points:-

- The Trust had successfully completed Year 2 of the 5 Year Action Plan and work continues regionally and locally to address agreed actions.
- During 2019/20 the total number of interpreting episodes provided was 8693 with the top four languages being Arabic, Polish, Lithuanian and Romanian.
- A total of 3152 staff had been trained on relevant courses – a 4% increase on the previous year.
- The Team had been leading on the Regional Development of Guidance for Trust Board Members and had played a central role providing support during the Covid-19 emergency e.g. redeployment, HR helpline, equality screening.

Looking forward to the year ahead, **Mrs Thompson** noted key initiatives such as the promotion of an e-learning module, collaboration with all Trusts on the establishment of regional services and providing continued support to Rebuild Workstreams as plans are developed and implemented. During discussion, the Report was commended by Members. Some suggestions were made by Members and these were duly noted for action by Mrs Thompson.

In conclusion, **the Chairman** thanked the Equality Team for their efforts then sought, and received, Trust Board approval for the Annual Equality Report 2019/20.

66/20 **FINANCIAL REPORT FOR THE PERIOD ENDING 31 JULY 2020**

Members received, for discussion, Paper No: SET/34/20 Finance Report for the

period ending 31 July 2020 which had been circulated with the papers for the meeting. In presenting the paper, **Mr Morgan** referred to a year end projected deficit of £18.3m compared to £11.7m deficit for the same period last year. This consisted of a savings target and unfunded new/existing pressures with particular uncertainty this year on the overall impact of Covid costs.

In relation to the forecast year end deficit, **Mr Morgan** advised that Directorates have identified £9.117m of savings in year which could be achieved through low impact measures. He added that he believed that there may be further savings in relation to downturn in activity due to the impact of Covid. **Mr Morgan** added that he believed there may be further savings/reductions in expenditure in year depending on the behaviour of the virus and the impact that this would have on the Trust's ability to fully re-establish services.

A short discussion ensued. **Mr Brady** asked if staffing costs were increasing in year and about the current profile of capital expenditure given that spend appeared behind where it may be expected to be at this stage of the financial year. Responding, **Mr Morgan** noted that it had been a 5-week month in July (Month 4) which accounted for a portion of the variance and with the balance largely attributed to the impact of recent pay awards. **Mr Morgan** noted that a number of capital projects had been delayed due to Covid but pace had increased though this could be affected by a potential second surge

67/20 PERFORMANCE MANAGEMENT REPORTS – SCORECARD/DASHBOARD

Members received, for discussion, Paper No: SET/35/20 Scorecard and SET/36/20 Dashboard which had been circulated with the papers for the meeting. In presenting the papers, **Ms Coulter** summarised the Reports as follows:-

- Staff continue to plan on how to manage activity during the Rebuild phase working in partnership with HSC colleagues to ensure consistency of approach and remain on track to meet Departmental deadlines.
- There are ongoing conversations with the Board and DoH on the status of Trust Delivery Plans given the current context which will have a material impact on how we plan financially if the associated objectives are suspended.
- Red flag activity continues to prioritise with the use of virtual clinics proving successful. All urgent cases are being progressed though Hospital Services are monitoring the reduction in referrals which reduced by circa 70% during the Covid emergency.
- Eight specialities are not yet achieving target but as with the 14 day and 31 day targets the context has changed significantly and it is no longer a case of comparing like with like as the fundamentals have now changed.
- Demand for domiciliary care placements had reduced significantly but are now on an upward trajectory again and being taken forward at pace.

Discussion took place regarding the presentation. In response to **Mrs O'Hagan** seeking clarification on the current commissioning targets and how any changes could be communicated to the public and elected representatives, **Ms Coulter**

emphasised that the targets had not been set aside but rather rolled forward with discussion ongoing about how to reframe in the context of Covid and that she would review elected representative communications to see how this could be inputted.

Dr Briscoe advised that Non Executive access to run charts was beneficial and asked for the figures relating to BH&SCT delayed discharge to be incorporated going forward. Referring to the Scorecard and the Quality Improvement section **Dr Briscoe** sought clarification on the performance figures particularly in Year 3. **Ms Patterson** confirmed this is reflective of the overall regional picture but there is an opportunity to reset and refresh as we continue to endeavour to improve.

68/20 HSC REBUILD

Members received, for information, Paper No: SET/37/20 HSC Rebuild Monitoring Report July 2020 which had been circulated with the papers for the meeting. In presenting the paper, **Ms Coulter** highlighted the following points:-

- Phase 2 rebuild plans have been submitted to HSCB and DoH including a composite data annex for publication alongside Trusts' Delivery Plans for July to September 2020. The focus now will be on planning for winter pressures for submission on 23 September 2020 which is being actively developed.
- A Regional Surge Framework is being developed with a section on winter pressures also to be published.
- No More Silos is currently focused on examining options around the future provision of emergency care.
- Dr Robinson is co-chairing the Regional Elective Care Group alongside Ms Rosie Hall which will engage across all work streams and is a significant appointment in light of the recent announcement by the Minister that Lagan Valley Hospital will be the location of the first Regional Day Elective Care Facility.

A short discussion ensued. **Dr Briscoe** highlighted that the regional statistics vary significantly and wondered if a shared approach where pressures can be better identified and remedied could prove beneficial. **Mr McGoran** responded that there is a clear preference for a more consistent regional approach. There had been much learnt from the Phase 1 experience with resources now assigned at Departmental level to build out and support the regional networks. **Dr Robinson** outlined work on a number of possible initiatives for example the feasibility of a regional booking system of patients.

Mrs O'Hagan asked with the Management Board leading on Rebuild should Trust Board review its programme of work to focus on other services. **Mr McGoran** stated progress had been made around engaging and incorporating feedback from front line services. In order to deliver upon the No More Silos approach, the Minister had agreed to put the appropriate networks in place to demonstrate how

this could be delivered so it is necessary to build and support the networks in the first instance and then review what this might mean across existing services.

In conclusion, **the Chairman** concurred with Mr McGoran's comments and wished to record his appreciation for the work that is ongoing.

69/20 RURAL NEEDS ACT 2017 – ANNUAL MONITORING REPORT

Members received, for approval, Paper No: SET/38/20 Rural Needs Act 2016 Annual Monitoring Report, which had been circulated with the papers for the meeting. In presenting the paper, **Ms Coulter** advised that this is the second annual monitoring return required to demonstrate that due regard is paid to patients/clients in rural areas when planning new services.

A short discussion ensued. **Mr Mawhinney** asked who holds responsibility for rural proofing the regional HSC Rebuild proposals. **Ms Coulter** advised that ultimately the responsibility would lie with the host Trust of each project but that there will also be a clear role for the Patient and Client Council.

The **Chairman** sought, and received, Trust Board approval to the Rural Needs Act 2016 Annual Monitoring Report for 2019/20.

70/20 ANNUAL REPORT ON DELEGATED STATUTORY FUNCTIONS AND CORPORATE PARENTING 2019/20

Members received, for approval, Paper No: SET/40/19, Annual Report on the Discharge of Delegated Statutory Functions and Corporate Parenting 2019/20, which had been circulated with papers for the meeting.

In presenting the paper, **Ms Campbell** said that the scheme provides the overarching assurance framework for the discharge of statutory social care functions and outlines the powers and duties delegated to the Trust; the principles and values underpinning the delivery of statutory services; the policies, circulars and guidance to which the Trust must adhere to in the discharge of such functions; and the organisational assurance arrangements in respect of same. The scheme requires the Trust to produce this annual report addressing how it has discharged those statutory functions pertaining to social care services. Throughout this reporting period the Trust has sought to effectively discharge delegated statutory functions across all directorates. Information presented in the individual directorate reports provides detailed analysis of compliance and controls assurance arrangements.

Of note:

- Unallocated carers – there has been a slight increase in the number of children waiting for services from 151 at 31 March 2019 to 164 at 31 March 2020. A business case has been agreed for resources to address this issue in 2020/21.
- Foster care provision for children in care – there has been an increase in the number of children in care by 54 in this reporting period.
- Placement provision – there has been an increase in children waiting for

appropriate placement provision from 14 at 30 September 2019 to 17 at 31 March 2020. Over the reporting period there has been an overall decrease of 2.

- Kinship assessments – the Trust has 56 kinship foster care households which is a slight decrease from 61 at 31 March 2019. Assessments have not been completed within appropriate timescales and there was a failure to notify HSCB of a number of unregulated placements though subsequently there has been systems established across safeguarding and cared for services to monitor and ensure appropriate reporting takes place.
- Children and young people with a disability – the services continues to be under immense pressure with demands exceeding services provision with the complexity of cares and lack of specialist provision compounding already stretched resources within teams.
- Adult Mental Health Services – challenges remain relating to the provision of social supervision due to the recruitment of new team leaders within the reporting period. All team leaders are now in post. A Trust Approved Social Work (ASW) strategy is being progressed to address additional workforce challenges for this professional staff group.
- Domiciliary Care Services – the reform of care and support services to address recruitment issues and increasing demand has been successfully implemented in four areas across the Trust

Discussion ensued. **Dr Briscoe** asked about the possibility of a role for the Adoption Advisor in terms of kinship placements but also about whether or not there will be flexibility around the completion of DOLS/MCA assessments. **Dr Briscoe** noted the continued pressures across care services and thought it might be useful to discuss further either outside of the meeting or as part of a Workshop. **Mrs O'Hagan** agreed and sought clarification of the main challenges facing statutory functions as well as what defines reasonable compliance.

Responding in relation to DOLS/MCA assessments, **Mrs O'Kane** noted a six month extension was under consideration. More generally, **Ms Campbell** commented that she was satisfied how her team is currently delivering on its legislative responsibilities. In terms of unregulated placements, the process has been reviewed and strengthened with a number of follow-on issues having been identified and progressed. Challenges remains due to historic lack of investment versus need and structural workforce issues leading to a necessary but unfortunate reliance on agency assistance but with work being progressed there is a confidence that improvements will become clear within the next reporting period.

Mr Brady commented that today's agenda was too heavy and suggested thought be given to how to clear certain items either prior to the meeting or via other agreed mechanisms particularly since the role of the Non-Executive Director may well be evolving following the establishment of the Management Board.

Responding, **the Chairman** suggested this could form part of the discussion at the upcoming Workshop with the need to strike a constructive balance.

The Chairman then sought, and received approval to, the Annual Report on

Delegated Statutory Functions for 2019/20 for onward transmission to HSCB.

71/20 **DRAFT REPORT ON THE BOARD ASSURANCE FRAMEWORK AND CORPORATE RISK REGISTER 2020/21**

Members received, for consideration and approval, Paper No: SET/41/20, draft paper on the Board Assurance Framework and Corporate Risk Register 2020/21, which had been circulated with papers for the meeting. In presenting the report, **Mrs Weir** said the paper provided an update on the Board Assurance Framework, the outcome of the Corporate Risk Register for 2019/20 and a position report on the new 2020/21 Corporate Risk Register. It also provides a suite of Datix Reports which illustrates progress on the implementation of the action plans (per individual Corporate Risk Register pro formas).

Members noted that the Trust is required to have a Board Assurance Framework (3 year framework) and Corporate Risk Register (annual basis) in place which are updated and presented to the Trust Board on a regular basis (normally June and November each year). A new three year Board Assurance Framework and Risk Management Strategy (2018/2021) were developed and approved by the Trust Board at its meeting on 11 February 2019. Members also noted that the Executive Management Team had discussed the 2019/20 Corporate Risk Register pro formas in detail and action plans updated and closed off as appropriate. Agreement was also reached for items to be carried forward into 2020/21 and any new items for inclusion in the register. The outcome of this exercise was that 19 items are on the Corporate Risk Register for 2020/21. 18 of the existing Corporate Risk Registers (2019/20) were carried forward into the 2020/21 Corporate Risk Register with new action plans developed. Two items were closed and/or remitted to management at Directorate Risk Register level namely EU Exit and Industrial Action.

One new item was added to the register namely Covid-19 following approval at the Governance Assurance Committee at its June meeting. This is a 'living document' and can be added to at any time by Executive Management Team members. **Mrs Weir** responded to Members' queries and agreed to take forward a suggestion by **Mr Brady** that version control of documents be reviewed to ensure consistency.

Following discussion, the **Chairman** sought, and received approval for, the draft paper on the Board Assurance Framework & Corporate Risk Register for 2020/21.

72/20 **UPDATE – COVID-19**

Mr Martyn provided Members with a detailed verbal update on the Trust's ongoing Covid-19 response noting that at present there are a relatively small numbers of lab positive cases, thirteen current suspected cases and no patients in ICU with one death since early July 2020. **Mr Martyn** cautioned the need for continued vigilance, appropriate social distancing and hand washing with face coverings being used in communal areas. **Mr Martyn** outlined the staffing challenges ahead particularly as we move into winter but paid tribute to all staff throughout the organisation for their continued efforts.

Ms Patterson provided a summary of efforts within the community setting and

gave a snapshot of the current daily outbreak report as well as the activity being undertaken through the rolling programme of testing within nursing and residential care facilities. Ms Patterson also updated Members on guidance on face coverings with the Trust due to take delivery of sufficient supply to distribute two face coverings per employee commencing next week.

Responding to a question from **Mr Brady** on the overall direction of travel with Covid-19 transmission, **Mr Martyn** noted that the focus on clusters has been important but continued preparation was essential due to the likelihood of a deteriorating picture as winter approaches.

73/20 **REVIEW OF LEADERSHIP & GOVERNANCE AT MUCKAMORE ABBEY HOSPITAL**

The **Chairman** advised that Trust Board had met immediately prior to this meeting to discuss some items of confidential business and had received a briefing in relation to this item. Members noted that the HSC Leadership Centre has been engaged to consider what proposed actions may need to be taken forward by HSC Trusts and agreed to receive a further update when this had been completed.

74/20 **ANNUAL REPORT ON COMPLIMENTS & COMPLAINTS 2019/20**

Members received, for information, Paper No: SET/44/20 Compliments and Complaints Annual Report 2019/20, which had been circulated with the papers for the meeting. **Mrs Weir** stated that the draft report had been approved by the Corporate Control Committee and Executive Management Team.

75/20 **UPDATE – ARMS LENGTH BODIES PARTNERSHIP AGREEMENT**

Members received, for information, Paper No: SET/45/20, Revised Management Statement/Financial Memorandum and ALBs Partnership Agreement, and associated documents which had been circulated with the papers for the meeting. **Mrs Weir** advised Members to note for future reference it is no longer a requirement to produce the Management Statement Financial Memorandum.

76/20 **PERSONAL & PUBLIC INVOLVEMENT REPORT 2019/20**

Members received, for information, Paper No: SET/46/20 Personal & Public Involvement Report 2019/20, which had been circulated with the papers for the meeting. **Ms Coulter** stated that the report would be on the agenda for the next scheduled meeting of the Personal & Public Involvement Sub-Committee in September 2020.

77/20 **REPORT AND MINUTES OF THE CHARITABLE FUNDS COMMITTEE MEETING HELD ON 26 JUNE 2020**

Members received, for information, Paper No: SET/47/a & b/20 Report and Minutes of Charitable Funds Committee held on 26 June 2020, which had been circulated with the papers for the meeting. There were no queries or concerns

raised at the meeting.

78/20 REPORT AND MINUTES OF THE AUDIT COMMITTEE MEETINGS HELD ON 22 MAY 2020 AND 26 JUNE 2020

Members received, for information, Paper No: SET/48/a & b/20 Report and Minutes of Audit Committee meetings held on 22 May 2020 and 26 June 2020, which had been circulated with the papers for the meeting. There were no queries or concerns raised at the meeting.

79/20 REPORT AND MINUTES OF THE FINANCE AND PERFORMANCE COMMITTEE MEETING HELD ON 4 MAY 2020 AND 23 JUNE 2020

Members received, for information, Paper No: SET/49/a & b/20 Report and Minutes of the Finance & Performance Committee meetings held on 4 May 2020 and 23 June 2020 which had been circulated with the papers for the meeting. There were no queries or concerns raised at the meeting.

80/20 REPORT AND MINUTES OF THE GOVERNANCE ASSURANCE COMMITTEE MEETING HELD ON 17 JUNE 2020

Members received, for information, Paper No: SET/42/a & b/20 report and minutes of the Governance Assurance Committee held on 17 June 2020, which had been circulated with the papers for the meeting. There were no queries or concerns raised at the meeting

81/20 SCHEDULE OF DATES FOR TRUST BOARD MEETINGS 2021

Members received, for information, Paper No: SET/43/20 Schedule of Dates for Trust Board Meetings 2021, which had been circulated with the papers for the meeting. The **Chairman** advised Members that venues are indicative at this stage and subject to change in the context of Covid-19. Members were asked to note the dates in their calendars and Mrs Walker will formally issue post today's meeting and also make available on the Trust's website.

82/20 ANY OTHER BUSINESS

(a) NIAO Report on Alcohol and Drug Abuse

Mr Mawhinney referred to a recent NIAO Report on Alcohol and Drug Abuse which outlined the cost of Emergency Department attendances during 2018/19 as a consequence of alcohol and drug misuse and Time spent. **Mrs O'Kane** undertook to contact Mr Mawhinney outside of the meeting to brief him directly on the Trust's input into the draft Substance Abuse Strategy being developed.

83/20 DATE AND VENUE OF NEXT MEETING

The Chairman confirmed that the next Public Trust Board meeting will be held on **Wednesday 30 September 2020 at 2pm in the Lecture Theatre, QLIC.**