

## SOUTH EASTERN HEALTH AND SOCIAL CARE TRUST

### **Minutes of a Public Meeting of the South Eastern Health & Social Care Trust Board held on Wednesday 27 January 2021 at 2 pm in Meeting Room, Trust HQ, Ulster Hospital, Dundonald and via Zoom**

**PRESENT:** Mr J Patton, Chairman (Acting)

**PRESENT IN A  
REMOTE LOCATION:** Mr S McGoran, Interim Chief Executive  
Mr C Martyn, Medical Director  
Ms B Campbell, Director of Children's Services & Executive  
Director of Social Work  
Ms W Thompson, Director of Finance and Estates  
Ms N Patterson, Director of Primary Care, Older People &  
Executive Director of Nursing  
Mr N Brady, Non-Executive Director  
Mrs H Minford, Non-Executive Director  
Dr M Briscoe, Non-Executive Director  
Mr M Mawhinney, Non-Executive Director  
Ms J O'Hagan, Non-Executive Director

**IN ATTENDANCE IN A  
REMOTE LOCATION:** 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

**IN ATTENDANCE:** Mrs M McNally, Assistant Director, Risk Management and  
Governance & Board Secretary  
Mr S Martin, Executive Support Services Manager (minutes)

**APOLOGIES:** None

### **Commencement of Meeting**

**The Chairman**, Mr J Patton, extended a welcome to all present and attending remotely. **The Chairman** paid tribute to all staff colleagues for their ongoing efforts as the Covid-19 surge continues stating that Trust Board were incredibly grateful of their diligence in the face of unprecedented pressures. **The Chairman** outlined a number of housekeeping points noting that today's meeting was taken place via Zoom and welcomed two trade union colleagues who had registered to observe proceedings. **The Chairman** asked Members to indicate if they had any items of Any Other Business not previously notified to him before proceeding to the items of today's agenda. No Members having indicated, **the Chairman** concluded by asking everyone to speak clearly to ensure their points are captured and responded to directly.

### **01/21 DECLARATION OF POTENTIAL CONFLICT OF INTERESTS WITH ANY BUSINESS ITEMS ON THE AGENDA**

No conflict of interest with any business on the agenda was declared.

**02/21**      **CHAIRMAN'S BUSINESS**

Members received, for information, and noted Paper No. SET/01/21 Chair's Report which had been circulated with the papers for the meeting.

**03/21**      **CHIEF EXECUTIVE'S BUSINESS**

**Mr McGoran** noted that there were no items to raise not already part of the agenda.

**04/21**      **MINUTES OF THE PREVIOUS MEETING HELD ON 25 NOVEMBER 2020**

Members were content for the minutes of the Public Meeting held on 25 November 2020, having been previously circulated, to be taken as read and signed as a true and accurate record.

**05/21**      **MATTERS ARISING FROM THE PREVIOUS MINUTES**

There were no matters arising from the previous minutes.

**06/21**      **NEW BUSINESS ITEMS**

**For Discussion and/or Approval**

**FINANCE REPORT FOR THE PERIOD ENDED 31 DECEMBER 2020**

Members received, for information, Paper No. SET/02/21 Finance Report for the period ending 31 December 2020. **Ms Thompson** advised Members of the new format of the report and highlighted a number of key issues including increased spend on domiciliary care and PPE costs within Hospital Services. **Ms Thompson** also noted that the Trust continues to perform well against statutory financial performance targets though there remains the challenge of the underlying recurrent deficit. **Ms Thompson** advised in relation to media coverage of unspent monies by the Northern Ireland Executive every effort had been made both regionally and locally to avail of as many opportunities to secure additional resources as possible with the challenge being that the timing of the notification. **Ms Thompson** gave a short update on the current draft NI Executive budget settlement which demonstrated a flat cash position and that it was currently still in an early consultation stage.

**Mr Brady** welcomed the new format of the report which had incorporated many of the suggestions made at the Finance and Performance Committee. In addition, **Mr Brady** commended the Prompt Payment performance which in his view was vital for SMEs and the local economy. **Mr Mawhinney** commended Ms Thompson and the Finance team for the new format which he said would be of great assistance with the introduction of traffic lights and succinct explanations contributing to a much improved report.

**Mrs O'Hagan** asked what challenges remain in recording Covid-related spend and was there a need to refresh guidance given the vaccination roll-out in light of

NIAO guidance to closely monitor Covid spend more generally. **Mrs O'Hagan** also asked around the possibility of deploying any additional in-year funding towards the deficit. **Ms Thompson** stated that in terms of capturing Covid spend, our systems had become more refined over time and in particular with regards the Vaccine Centre those costs were very much being captured with total Covid costs to date in year of circa £74m up from an initial estimate of circa £66m. **Ms Thompson** noted that with staff redeployment has had an impact on forecasting and PPE spend remained challenging to predict with a significant increase in recent months. In relation to the deficit, **Ms Thompson** advised that a request has been made to HM Treasury to carry over underspend into the next financial year but this would not assist with the recurrent position.

07/21

## **PERFORMANCE MANAGEMENT REPORTS**

Members received, for discussion, Paper No. SET/03/21 Scorecard together with supplementary report as tabled. **Ms Coulter** summarised the Scorecard noting services continue to endeavour towards rebuilding in line with regionally agreed targets despite ongoing pressures with staff vacancies and absence as a result of Covid-19. Within Hospital Services, Unscheduled Care attendances at Emergency Departments had decreased but 12 hour breaches remain high mainly due to availability of inpatient beds. From 11 January 2021, all outpatient appointments across all sites have been cancelled and work is being progressed regionally to investigate the potential to utilise independent sector providers to assist with urgent red flag outpatient appointments. **Ms Coulter** stated that a dedicated system has been established to closely track those with a confirmed diagnosis. Downe Day Procedure Unit activity had been paused to permit staff redeployment to support the care of inpatients and the Lagan Valley DPU remained open operating on a reduced number of theatre lists with a priority on diagnostic cancer work for the region. Endoscopy services remain temporarily paused but diagnostic imaging continues as normal and fracture performance remains strong with 72% completed in 48 hours and 100% within 7 days. **Dr Robinson** added the data for December 2020 was in line with December 2019 despite the Covid challenge and while some cancer activity had been downturned the team continued to make best use of capacity using a regionally agreed formula in a proportionate and agile manner.

**Ms Coulter** noted that within Adult Services out of Trust referrals for acute mental health wards remained paused and there had been a decline in outpatient performance again to facilitate staff redeployment to inpatient wards. Within Children Services, **Ms Campbell** advised that resumption of short break provision is planned for February 2021 but this would be risk assessed beforehand and the Directorate was leading an improvement initiative to reduce the number of unallocated cases which had grown in recent months.

**Mrs Minford** stated that the update was heartening and it was fantastic to hear what teams are continuing to do in unprecedented times. **Dr Briscoe** asked for

additional information on access to radiotherapy and chemotherapy as well as confirmation as to whether additionality provided by the independent sector qualified as Covid-19 spend. **Dr Robinson** responded that teams participate in daily conversations regionally to ensure patients are prioritised and their treatment journey actively managed. **Dr Robinson** advised the McDermott Unit continues to provide chemotherapy as well as other treatment options on a very much business as usual basis save for additional Infection Prevention Control measures in situ with the BHSCT pathway for radiotherapy also available. In terms of independent sector co-operation, **Dr Robinson** noted that currently its scope was minimal and **Ms Thompson** confirmed that the associated spend qualified as Covid-19 related expenditure.

**Mrs O'Hagan** advised Members of a recent SQE Leadership Session which she and Ms Thompson participated in with Allied Health Professional colleagues and noted what came across strongly was that staff had been innovative in addressing the local challenges presented by the pandemic and in a way she hoped could be sustained into the future. **Dr Briscoe** commented on the current KPIs as tabled and stated she was pleasantly surprised that there was very little change which reflected in her view that the work that is continuing is of a high standard. **Mr Martyn** advised that some of the mandatory requirement reporting is not currently in place as a number of the SQE KPIs have been stood down.

08/21

#### **COVID-19 UPDATE**

**The Chairman** invited Executive colleagues to provide Members with a verbal update on Covid-19. **Mr Martyn** stated that all staff were particularly busy as we are very much in the middle of Surge 3 with ICU facilitating many patients and Hospital Services assisting the region on a regular basis. **Dr Robinson** confirmed that there were 110 lab positive inpatients as of this morning which compares with a peak of 73 inpatients at the height of Surge 2. **Dr Robinson** advised that adjustments have had to be made to wards to assist with step-up and non-invasive ventilation advising that the current state of play would likely remain for at least the next few weeks. There were 16 in ICU Thursday and Friday of last week and 12 currently. In addition to non-Covid patients, every ward is at or near maximum capacity. **Ms Patterson** wished to record her thanks to those nursing staff working in ICU and from a community perspective reported an improved position with 7 facilities currently in red and 14 in amber category. The Care Home Vaccination Team were now in the process of completing a final sweep to ensure complete coverage and district nursing outreach to those aged over 80 years old and housebound is due to commence tomorrow. **Mr McGoran** concluded that the understandable focus is on Hospital Services and nursing staff but the pandemic had impacted all services so he paid tribute to all staff for their ongoing commitment.

**Dr Briscoe** asked what was the percentage of care home staff now vaccinated. Responding, **Ms Patterson** stated that it was variable across the region and within each Trust and the expectation would be that the ongoing Care Home

sweep would capture more staff colleagues with a regional piece of work having also been commissioned via PHA.

**Ms Coulter** provided a brief update on the vaccination programme recognising the exceptional team involved and thanked EMT colleagues for their involvement. The Trust has been the first to complete its roll-out to all 109 care homes within the locality with a total of 191,000 doses having been administered regionally with the plan being to vaccinate all those 18 years and over. **Ms Coulter** advised that the lead nurse in the Vaccine Centre had received a telephone call from HRH Prince William and Translink is due to launch a PR campaign with photographs of colleagues involved in the programme placed on all buses as a gesture of public solidarity. **Ms Coulter** paid particular tribute to Dr Briscoe for having stepped in to vaccinate including when shifts needed covered. Responding, **Dr Briscoe** stated the real pleasure has been meeting staff colleagues who she had been so impressed with noting it has been a wonderful experience to have worked alongside them.

**Mrs Minford** recorded her congratulations to everyone on the tremendous progress made to date and enquired about the anticipated extension of the vaccine programme to those aged 65-69 using the Pfizer vaccine. **Ms Coulter** explained next steps in terms of the roll out given additional supply had become available. **Mr McGoran** noted media coverage today on vacant slots and explained the approach taken to avoid wastage highlighting that the Trust's current level of just 0.14% was a testament to the remarkable efforts of the team.

**Mrs O'Hagan** asked what efforts had been undertaken to ensure staff wellbeing and what indicators were being used to monitor. **Mrs O'Hagan** also asked about maximising media communications especially given the examples heard about today. **Mr McGoran** provided assurance that the Trust would continue to take as many opportunities as possible. **Mrs Weir** outlined a number of staff wellbeing initiatives with staff reminded twice weekly of the range of supports available.

#### **09/21 UPDATE ON IHRD ACTIVITY WITHIN THE SOUTH EASTERN HSC TRUST**

Members received, for information, Paper No. SET/04/21 Update on IHRD activity within the South Eastern HSC Trust as tabled. **Mr Martyn** provided a brief update and highlighted the clear pathway structures contained within the report. Members noted the contents of the report.

#### **10/21 UPDATE ON TRUST ACTIVITY IN PREPARATION OF AND RESPONSE TO EU EXIT**

Members received, for information, Paper No. SET/05/21 Update on Trust Activity in Preparation of and Response to EU Exit as tabled. **Mrs Weir** advised that a number of emerging issues were being worked through regionally. In response to a query from **Mrs O'Hagan**, **Mrs Weir** noted the recognition of professional qualifications as proving a challenge with separate registration more

likely though a three month grace period had been of assistance.

**11/21 ANNUAL REPORT ON INFECTION PREVENTION & CONTROL 2019/20**

Members received, for information, Paper No. SET/06/21 Annual Report on Infection Prevention & Control 2019/20 as tabled. **Ms Patterson** confirmed the Annual Report was for noting and paid tribute to the team's efforts during an extraordinary year. **The Chairman** commented that the report was comprehensive, detailed and very well put together

**12/21 REPORT AND MINUTES OF THE FINANCE AND PERFORMANCE COMMITTEE MEETING HELD ON 16 DECEMBER 2020**

Members received, for information, Papers No. SET/07/a&b/21 in relation to the Minutes of the Finance and Performance Committee Meeting held on 16 December 2020 chaired by Mr Mawhinney, Non-Executive Director.

**Mr Mawhinney** stated there were no issues to bring to the attention of Members.

**13/21 ANY OTHER BUSINESS**

**Retirement of the Director of Human Resources & Corporate Affairs**

**The Chairman** advised Members that the Director of Human Resources and Corporate Affairs had signalled her intention to retire. **The Chairman** paid what he said would no doubt be the first of many heartfelt tributes by Members and colleagues to Mrs Weir thanking her for her service and friendship. **Mrs Weir** thanked the Chairman for his kind words.

**14/21 DATE AND VENUE OF NEXT MEETING**

**The Chairman** thanked everyone for their participation today and confirmed that the next Public Trust Board meeting will be held on **Wednesday 24 February 2021 at 2pm at Trust Headquarters, Ulster Hospital, Dundonald via Zoom.**