

SOUTH EASTERN HEALTH AND SOCIAL CARE TRUST

Minutes of a Public Meeting of the South Eastern Health & Social Care Trust Board held on Wednesday 31 May 2023 at 2.40pm in the Analyse Room, QIIC Ards, Ards Community Hospital, Newtownards

- PRESENT:**
- Mr J Patton, Chairman of Trust Board
 - Ms R Coulter, Chief Executive
 - Dr M Briscoe, Non-Executive Director
 - Mrs C-M Dickson, Director of Primary Care & Older People's Services
 - Mrs R Gibbs, Director of Adult Services & Prison Healthcare
 - Mr C Martyn, Medical Director
 - Mrs H Minford, Non-Executive Director
 - Mrs H Moore, Director of Planning, Performance & Informatics
 - Mr M Neil, Director of Unscheduled Care, Medicine & Cancer
 - Mrs J O'Hagan, Non-Executive Director
 - Ms M Parks, Director of Surgery, Elective Care, Maternity & Paediatrics
 - Mrs L Preece, Director of Children's Services & Executive Director of Social Work
 - Dr D Robinson, Executive Director of Nursing, Midwifery & AHPs and Director of Patient Experience
 - Mrs C Smyth, Director of People & Organisational Development
 - Ms W Thompson, Director of Finance and Estates
- IN ATTENDANCE:**
- Dr P Donnelly, Consultant Cardiologist & Clinical Director for Research* (for presentation only)
 - Mrs M McNally, Assistant Director, Risk Management & Governance (Board Secretary)
 - Mr S Martin, Executive Support Manager (minutes)

OPENING REMARKS

The Chairman welcomed everyone present to the meeting including Dr Donnelly attending to address Members on behalf of the Research & Development Oversight & Review Sub-Committee as well as a member of the public observing today's proceedings.

The Chairman welcomed two new Members attending their first Board meeting since taking up their respective posts namely Ms Clare-Marie Dickson as Director of Primary Care & Older People's Services and Mr Marc Neil as Director of Unscheduled Care, Medicine & Cancer. **The Chairman** congratulated both and wished them every success for the future.

In addition, **the Chairman** congratulated both Dr David Robinson on his new role as Executive Director of Nursing, Midwifery & AHPs and Director of Patient Experience and Mrs Claire Smyth on her appointment as Director of People & Organisational Development.

The Chairman concluded by covered a number of house-keeping items before introducing Mr Martyn in advance of today's presentation.

PRESENTATION:
RESEARCH & DEVELOPMENT OVERSIGHT & REVIEW SUB-COMMITTEE

Mr Martyn introduced Dr Donnelly to outline the new direction being taken to enhance the profile of research activity across the Trust. **Dr Donnelly** thanked Members for the opportunity to address on the Sub-Committee's goals which include the development of a Trust Research & Development Strategy to increase capacity and capability for the delivery of research activity across all Directorates, disease areas and specialisms. **Dr Donnelly** highlighted this would involve the identification of suitable accommodation on the UHD site to ensure safe and effective service provision for research patients but also to enable the service to better profile the Trust as a 'research active' organisation.

Dr Donnelly outlined how the Sub-Committee would support future proofing, succession planning and assurance of organisational memory and intelligence within the Research & Development team of 25 staff to ensure service resilience and consistency. **Dr Donnelly** explained how the service had completed a restructure to aid retention and create a stable infrastructure by assuring permanency for core staff. **Dr Donnelly** laid out his vision for a transition from the current model of research governance and activity to the more embedded process of capacity and capability (C&C) assessment and confirmation in order to ensure effective patient access to novel treatments and interventions. **Dr Donnelly** concluded by requesting Board support in this change in trajectory and agreement to receive an annual end of year Sub-Committee briefing so they can be briefed on progress made in this critical area.

Dr Briscoe stated she was fully supportive of the Trust becoming a 'research active' organisation. **Dr Briscoe** asked what the balance was currently between local, national and international opportunities and were they largely based on calls for research. **Dr Briscoe** also asked for clarity on the role of the Central Governance Office and its links with the Public Health Agency (PHA). **Dr Donnelly** replied traditionally most activity had had a local focus and explained a number of reasons for why this had been. **Dr Donnelly** explained he considered there had previously been an imbalance in the Trust's relationship with academia noting the importance of asking where the benefit was in terms of fulfilling the Trust's priorities. **Dr Donnelly** stated there was a need to engage more on both the national and international level and this would be a key focus over the next eighteen months. **Dr Donnelly** provided further detail on the links with the PHA and how staff were seconded under an existing SLA. **Mrs O'Hagan** raised the issue of Job Plans and a drive to move from desirable to essential on accreditation by the Royal Colleges. **Mrs O'Hagan** asked if the Trust was factoring this into other Job Plans if the Trust was planning on approaching this corporately. **Mrs O'Hagan** also asked if the team were looking at revenue streams, partnership working as well as ethical concerns given the current budgetary situation.

Dr Donnelly replied that in respect of Job Plans the Trust had been very forward thinking by embracing amongst the Medical tier the opportunity to support research activity where practicable. **Dr Donnelly** explained his team now had 4 PAs arising from the Recovery Group in the last year alone which equated to financial resource never before available. Dr Donnelly stated that in terms of other professional groups there was a level needed to be achieved in terms of research before consideration should be given to inclusion within Job Plans but this formed part of the journey needed to ensure most of our research activity arises from direction by the Trust with maintaining strong links with local academia. **Dr Donnelly** remarked historically as a region Northern Ireland had been underinvested in despite local charities delivering more than anywhere else nationwide though this had begun to change over the last

decade. **Ms Coulter** added it had been very useful to hear more about the focus being given to research and to hear all the good work across the Trust.

The Chairman thanked Dr Donnelly for his presentation and confirmed agreement to the Board receiving an annual report from the Sub-Committee.

Dr Donnelly left the meeting at 3.10pm.

1.0 APOLOGIES

Apologies were noted for Mr Mawhinney and Mr Brady (Non-Executive Directors).

2.0 DECLARATION OF POTENTIAL CONFLICT OF INTERESTS

There were no declarations of interest made at this juncture or during the meeting.

3.0 CHAIRMAN'S BUSINESS

Members noted **SET/39/23 Chairman's Report** which had been prepared in a new format. **The Chairman** advised this was one of a number of changes he would be making following his appointment which also included the implementation of a new Trust Board document cover sheet designed to align with the HSC Board Member Handbook and NIAO Board Effectiveness Good Practice Guide. **The Chairman** stated the new cover sheet would highlight key details to inform decision-making as well as issues of risk and quality improvement.

4.0 CHIEF EXECUTIVE'S BUSINESS

Ms Coulter highlighted a number of Staff Achievements including the new BBC programme 'Peninsula Nurses' profiling the Ards Peninsula District Nursing team, the Celebration of Achievement Awards and Chairman's Awards ceremonies and the Permanent Secretary's recent recognition of LVH DPU.

5.0 MINUTES OF THE PREVIOUS MEETING HELD ON 29 MARCH 2023

The minutes of the Public Trust Board meeting held on 29 March 2023, having been previously circulated, were agreed as a true and accurate record subject to incorporation of a number of minor amendments requested by Ms Thompson.

6.0 MATTERS ARISING

Members noted **SET/40/23 Matter Arising Sheet** with one matter to be completed during the course of today's meeting.

7.0 ITEMS FOR APPROVAL

7.1 SEHSCT DISCHARGE OF DELEGATED STATUTORY FUNCTIONS & CORPORATE PARENTING ANNUAL REPORT

Members received, for approval, **SET/41/23 SEHSCT Discharge of Delegated Statutory Functions & Corporate Parenting Annual Report** with **Mrs Preece** providing an overview of the Report which addressed

how the Trust had discharged its Directed Statutory Functions within social care. **Mrs Preece** stated the Trust continued to experienced workforce pressures particularly in recruiting qualified social workers which was an issue noted on the Trust's Corporate Risk Register. **Mrs Preece** added a lack of medical provision continued to impact the Trust's ability to meet its legislative responsibilities under the Mental Capacity Act (NI) 2016. **Mrs Preece** noted Unallocated Cases had benefited from being a Quality4All Strategic Priority with work focused on governance processes through the scaling of the Collaborative Unallocated Progress (CUP) process across Trust Safeguarding teams and Children's Disability Service.

Mrs Preece stated delays in Reviews of Child Protection Case Conferences (RCPCC) and Looked After Children (LAC) Reviews were being monitored to maximise capacity. **Mrs Preece** outlined how Foster Care Provision for Children Looked After had been impacted by challenges in the recruitment and retention of new foster carers leading to an over reliance on private agency foster placements, increased pressure on the residential care provisions and the need for more bespoke placements. **Mrs Preece** explained the Trust was also accommodating 30 Separated or Unaccompanied Asylum Seeking Children - an increase of 18 during the year. **Mrs Preece** stated Lakewood Regional Secure Care Centre faced challenging demands for secure beds and work was ongoing to develop a commissioning framework for future secure provision.

Within Adult Services, **Mrs Preece** updated on the impact created by the lack of certainty on the future of Muckamore Abbey Hospital within Adult Disability Services. **Mrs Preece** highlighted a high level of unmet need within Primary Care & Older People in the provision of Domiciliary Care packages though significant reform had reduced the need by 10% over the reporting period with eco-mapping used to inform priorities and strategic planning. **Mrs Preece** concluded the draft Report had been submitted to SPPG pending Board approval.

Dr Briscoe stated the Report clearly outlined the significant risks across all services particularly the difficulties being experienced at the interface between Mental Health and Learning Disability. **Dr Briscoe** added when considered alongside both the Integrated Performance Monitoring Report and the recent NIAO Report on Mental Health Services which had highlighted the inherent risks in delivering the Mental Health Strategy the outlook was bleak. **Mrs O'Hagan** asked for an update on the regional social work recruitment drive. **Mrs O'Hagan** also referred to feedback to the Audit Committee highlighting different definitions used when referring to Unallocated Cases had potential to affect the numbers recorded and asked for clarification on why that might be. **Mrs Preece** confirmed 45 student Social Workers had recently been offered permanent contracts of employment and all bar one had accepted with the other having accepted

a temporary contract which would reduce the current 25% vacancy rate. **Mrs Preece** undertook to check how the appointments might affect the overall vacancy rate. On Unallocated Cases definitions, **Mrs Preece** advised different terminology had been used previously to describe similar matters but the use of the phrase 'Unattended Cases' had been discontinued to ensure clarity and there had been no impact on overall figures. **Dr Briscoe** acknowledged efforts made in relation to CUP and asked in terms of quality improvement and the definition of Unallocated Cases if the timeline commenced on Day One. **Mrs Preece** confirmed this was the case with governance arrangements in place from when each case entered the system.

Mrs Minford noted the significant increase in the number of Unaccompanied Asylum Seeker Children and asked if there was still a rota system operating regionally. **Mrs Preece** confirmed the rota remained in place and provided detail on the picture regionally including operation of the National Transfer Scheme under the auspices of the Home Office.

At this juncture, **the Chairman** sought and obtained approval for the draft Report as tabled.

The Chairman then adjourned proceedings at 3.32pm before recommenced business at 3.39pm.

8.0 ITEMS FOR DISCUSSION

8.1 FINANCIAL POSITION

Members received a verbal briefing on the current **Financial Position** with **Ms Thompson** providing context for the 2023/24 period with confirmation of an indicative HSCNI allocation representing a largely flat cash position of £7.3 billion equating to a funding gap of £732m. **Ms Thompson** noted DoH had previously instructed HSC Trusts to progress identified low and medium impact measures which if delivered would leave a £472m gap. In addition, **Ms Thompson** explained DoH had assessed HSC Trusts should identify a further £100m of savings equating to a further £11m for the Trust to find together alongside the existing £17m savings target. **Ms Thompson** explained DoH had therefore retracted £28m from indicative funding. **Ms Thompson** highlighted this did not account for local pressures and there was not yet a plan to address the remaining deficit though she would be bringing a budget forward for approval in due course.

Mrs Minford asked if Ms Thompson was hopeful of any change in the position in the near future. **Ms Thompson** replied there was an acceptance the residual deficit was a shared problem arising from inescapable pressures facing the HSC sector but there had been no indication of additional funding being made available. **Mrs O'Hagan** asked

when would consideration be given to measures requiring consultation and what engagement had there been with Trade Union colleagues.

Ms Thompson advised DoH had confirmed high impact measures would require Ministerial approval so cannot be progressed at this time with the regional focus on how to achieve more savings within the low and medium impact measures. **Mrs Smyth** advised there had been no agreement in relation to this year's pay award with Trade Union colleagues continuing to engage with both DoH and NIO.

8.2 INTEGRATED PERFORMANCE MONITORING REPORT

Members received, for discussion, **SET/42/23 Integrated Performance Monitoring Report** with **Mrs Moore** advising that the 2022/23 Year End position for all metrics monitored had been included in the appendix. **Mrs Moore** confirmed 2023/24 metrics for monitoring were currently being considered by SPPG.

Mrs Moore highlighted a number of areas including how for 2022/23 the Trust had consistently met its 4 hour Unscheduled Care target for both the Downe and Ards MIU sites, UHD ED was the highest performing ED of the Big 5 hospitals in relation to how quickly patients are seen, assessed and treated with 68% commencing treatment within 2 hours of triage compared to a regional average of 56%. **Mrs Moore** stated the UHD 4 hour performance and ambulance handover times continued to be impacted by the number of people waiting for a bed in an inpatient ward and flow throughout the wider system.

Mrs Moore stated there had been improvement in waits under 13 weeks in relation to In-Patient and Day Case Waits with cancer cases prioritised though there remained significant challenges within Adult Mental Health which had been recently discussed in-depth by the Finance & Performance Committee. **Mrs Moore** added the slide deck from that meeting would be useful for other Members to see and she would arrange to circulate noting in summary the Trust continued to respond as best we can with the resources available.

Dr Briscoe referred to Elective Waiting Times and stated given the constraints both regionally and locally it was very concerning to read the Routine Outpatient wait for General Medicine/Gastroenterology for March 2023 was 442 weeks with Dermatology at 359 weeks and other areas also very high. **Ms Coulter** replied the budgetary outlook would limit the Trust's ability to fundamentally tackle pressures without systematic change to the outpatient model.

Mrs O'Hagan mentioned Complex Discharges and asked when might there be outworkings from investment in this area. **Ms Dickson** replied the Trust was on a journey in relation to Complex Discharges and

Domiciliary Care with Care Home Provision and Availability being key catalysts given the Trust was currently limited to approximately 20 care home beds available every day tracked closely to make the 48 hour target. **Ms Dickson** added her team were reviewing the Domiciliary Care model ahead of this coming winter.

Mrs Minford referred to previous discussion around Waiting List validation in order to assist in eliminating duplication and therefore assisting with overall Waiting Times and asked for an update. **Ms Parks** replied efforts continue noting it required extensive work to clinically validate so would take time. **Ms Dickson** added within the Speech and Language/AHP Waiting List, validation had contributed to significant reductions.

8.3 PROGRESS REPORT: ENCOMPASS PROGRAMME

Members received, for discussion, **SET/43/23 Progress Report: Encompass Programme**. **Mrs Moore** advised of a recent Risk Summit and explained how the next key marker was the first Go-Live Readiness Assessment (GLRA) which would commence at the 150 day mark on 8 June 2023 and followed by additional GLRA's every thirty days until the Go-Live Date.

Mrs Moore highlighted the update focused on activity within Social Work and Social Care providing an overview of communications, good Super User uptake as well as efforts relating to both the Northern Ireland Single Assessment Tool and Understanding the Needs of Children in Northern Ireland (UNOCINI) pathways. **Ms Coulter** added Programme momentum was gathering pace with engagement scheduled next week with the new Programme Director and the COO of Royal Marsden Foundation Trust.

Mrs O'Hagan referred to previous Audit concern in relation to Cyber-Security and given staff would be focusing on Encompass implementation more intensely in the time ahead what support was being put in place to maintain existing ICT infrastructure. **Ms Coulter** replied there would be a need to prioritise Business as Usual activity only and to consider pausing any new project supports in order to reduce staff pressures.

8.4 PROGRESS REPORT: QUALITY4ALL STRATEGIC PRIORITIES

Members received, for discussion, **SET/44/23 Progress Report: Quality4All Strategic Priorities** with **Mrs Moore** providing an overview of improvement work within Domiciliary Care, Unallocated Cases and Unscheduled Care.

Mrs Moore also provided two additional updates in relation to Trust representation at the recent International Forum on Quality & Safety in Healthcare and the upcoming QI Academy Presentation Panels.

9.0 ITEMS FOR NOTING

9.1 DoH CIRCULAR: REVISED HSC DELEGATED LIMITS & REQUIREMENTS FOR DEPARTMENTAL/DoF APPROVALS

Members noted **SET/45/23 HSC(F) 20-2023: Revised HSC Delegated Limits & Requirements for Departmental/DoF Approvals**.

9.2 NI AUDIT OFFICE (NIAO) PUBLICATION: MENTAL HEALTH SERVICES IN NORTHERN IRELAND

Members noted **SET/46/23 NIAO Publication: Mental Health Services in Northern Ireland** issued on 23 May 2023. **Dr Briscoe** stated the Report made for sobering reading given the budgetary situation and the risks associated with the Mental Health Strategy leaving Mental Health services in a difficult place both locally and regionally.

9.3 ANNUAL REPORT: CELEBRATION OF NURSING & MIDWIFERY

Members noted **SET/48/23 Celebration of Nursing & Midwifery Annual Report**. **The Chairman** stated it was excellent to read what had been achieved during the previous year and asked that the Board's thanks be communicated to those involved in the Report's production.

10.0 COMMITTEE BUSINESS

10.1 REPORT FROM THE INAUGURAL MEETING OF THE PEOPLE & CULTURE COMMITTEE - 30 MAY 2023

Members received an update on **the inaugural meeting of the People & Culture Committee held on 30 May 2023** with **Mrs O'Hagan** as Committee Chair advising the first meeting had considered what was meant by People and Culture and to review the draft Terms of Reference. **Mrs O'Hagan** advised amendments had been suggested with no Assistant Directors required to attend at this stage and no provision for deputising urging Members to prioritise attendance. **Mrs O'Hagan** highlighted a need for a review of all Committee Terms of Reference given recent governance and structural changes. **Mrs O'Hagan** stated Members agreed the People Plan was the key corporate document for the Committee to review to and benchmark against but it was not clear it captured all aspects of the Committee's remit. **Mrs O'Hagan** explained Members had discussed how best the Committee should monitor progress against actions with the aim of steering away from generic updates to improve effectiveness.

Mrs McNally advised the revised draft Terms of Reference would be tabled for Board approval once approved by the Committee. **The Chairman** stated he was open to a holistic review of all Terms of Reference and asked **Mrs McNally** to take this forward. **Mrs Minford** stated Members had raised more questions than answers but it had been a good meeting aimed at ensuring

time was invested in adding value rather than creating a forum for discussion only. **Ms Coulter** stated she welcomed the feedback received and now was the right time to have such discussions to ensure the work and remit of the Committee can be meaningful. **Mrs O'Hagan** concluded the establishment of the Committee was a requirement in terms of closing the gap identified with existing governance arrangements.

10.2 APPROVED MINUTES: AUDIT COMMITTEE - 2 FEBRUARY 2023

Members noted **SET/49/23 Approved Minutes of the Audit Committee held on 2 February 2023.**

10.3 APPROVED MINUTES: AUDIT COMMITTEE – 13 APRIL 2023

Members noted **SET/50/23 Approved Minutes of the Audit Committee held on 13 April 2023.** The Chairman asked if there were any items for escalation from the Audit Committee. **Mrs O'Hagan** advised there was one item which would be brought forward to the next Board meeting.

10.4 APPROVED MINUTES: GOVERNANCE ASSURANCE COMMITTEE – 21 DECEMBER 2023

Members noted **SET/51/23 Approved Minutes of the Governance Assurance Committee held on 21 December 2023.** The Chairman asked if there were any items for escalation. **Dr Briscoe** advised there were none. **Dr Briscoe** also recorded thanks to Mrs McNally for her efforts on the draft Integrated Governance & Assurance Framework.

10.5 APPROVED MINUTES: FINANCE & PERFORMANCE COMMITTEE – 20 FEBRUARY 2023

Members noted **SET/52/23 Approved Minutes of the Finance & Performance Committee held on 20 February 2023.** The Chairman asked if there were any items for escalation. In the absence of both Mr Brady and Mr Mawhinney, **Ms Thompson** advised there were none.

11.0 ANY OTHER BUSINESS

Mr Martyn advised of news received earlier today from a former senior colleague of the successful roll-out of an initiative piloted within the Trust which would involve eight hundred patients in Birmingham.

12.0 DATE AND VENUE OF NEXT MEETING

The Chairman advised the next Public Trust Board meeting would be held on Wednesday 28 June 2023 at 2.30pm in the Recreation Hall, Trust Headquarters, Ulster Hospital, Dundonald.

The Chairman thanked everyone for their participation and declared the meeting closed at 4.17pm.