

## **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 September 2023 at 2.55pm in the Recreation Hall, Trust Headquarters, Ulster Hospital, Dundonald**

- PRESENT:** Mr J Patton, Chairman of Trust Board
- Dr D Robinson, Deputy Chief Executive, Executive Director of Nursing, Midwifery & AHPs and Director of Patient Experience
- Mr N Brady, Non-Executive Director\* (attending remotely)  
Dr M Briscoe, Non-Executive Director  
Mrs C-M Dickson, Director of Primary Care & Older People's Services  
Mrs H Minford, Non-Executive Director  
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  
Mrs C Smyth, Director of People & Organisational Development  
Ms W Thompson, Director of Finance and Estates
- IN ATTENDANCE:** Mr B Darling, Associate Medical Director, Corporate Governance, Safety & Quality Improvement (obo Mr Martyn)  
Mrs M McNally, Assistant Director, Risk Management & Governance (Board Secretary)  
Mr S Martin, Executive Support Manager (minutes)

#### **OPENING REMARKS**

**The Chairman** welcomed those present and covered a number of house-keeping items noting Dr Robinson was deputising for the Chief Executive at today's meeting and Mr Brady was joining remotely.

#### **1.0 APOLOGIES**

Apologies were noted on behalf of Ms Coulter (Chief Executive), Mrs Gibbs (Director of Adult Services & Healthcare in Prison), Mr Martyn (Medical Director), Mr Neil (Director of Unscheduled Care, Medicine & Cancer), Mrs Moore (Director of Planning, Performance & Informatics) and Mr Mawhinney (Non-Executive Director).

#### **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/96/23 Chairman's Report** and **the Chairman** confirmed he had no matters to highlight at this stage.

#### **4.0 CHIEF EXECUTIVE'S BUSINESS**

On behalf of the Chief Executive, **Dr Robinson** updated Members on the implementation of the MIU move from Ards Community Hospital to the Ulster Hospital. At the Chairman's request, **Dr Robinson** provided a Covid update noting SET currently had between 20 and 30 Covid-positive in-patients and explained how the Autumn vaccination programme would progress. **Dr Robinson** welcomed recent Staff Achievements including Mrs McCreanor (Assistant Director, Employee Resources) receiving the HMPA UK President's Lifetime Achievement Award and the Communications Team being nominated in five NI Social Media Awards categories. **Dr Robinson** also highlighted forthcoming events including a Diversity in the Workplace event tomorrow evening, an event to mark World Mental Health Day on 10 October 2023 and the Annual Service of Remembrance in memory of children who have passed away before or after birth scheduled for 11 October 2023.

**Mrs Smyth** updated on recent Industrial Action noting the recent stoppage had particularly impacted Domiciliary Care, Laboratory and Pharmacy Services.

**Ms Parks** confirmed Safe Access Zones would go live later this week at both LVH and UHD with communications now issued to residents, staff and the media.

#### **5.0 MINUTES OF THE PREVIOUS MEETING HELD ON 30 AUGUST 2023**

The minutes of the Public Board meeting held on 30 August 2023, having been previously circulated, were agreed as a true and accurate record.

#### **6.0 MATTERS ARISING**

Members noted **SET/86/23 Matters Arising Sheet** with six Matters Arising completed or due to be during the course of today's meeting.

#### **7.0 ITEMS FOR DECISION**

##### **7.1 ANNUAL QUALITY REPORT 2022/23**

Members received, for approval, **SET/87/23 Annual Quality Report 2022/23** with **Mrs Dickson** advising SET produced an Annual Quality Report (AQR) to share the standards of care and improvement of Trust services. **Mrs Dickson** advised DoH were keen to support a SET trial for a new slimmed down version focused on how SET enables Quality Management through new reporting structures, learning networks, training teams and partnership working. **Mrs Dickson** noted Case Studies highlighted gains across the four Quality quadrants with links embedded to Assurance, Governance, Improvement and Audit Reports made available via an interactive Page Tiger.

**Mrs O'Hagan** asked if all Board Workshops had been completed and **Mrs Dickson** confirmed this was the case with an Action Plan focused on innovation developed for next year. **Dr Briscoe** stated the AQR was an excellent report welcoming its cross-referencing with other publications and asked how RQIA's GAIL model (Governance, Assurance, Improvement & Learning Framework) linked with SET Integrated Governance arrangements. **Mrs McNally** undertook to liaise with Dr Briscoe around specific details. **Mrs Dickson** added the GAIL journey would develop, launch and implement tools for wards to access via a

platform to maintain assurance and guide next steps to improved performance. **Mrs O'Hagan** asked how SET would define 'innovation' and would this include measurable information on outcomes and narrative on improvement achieved with **Mrs Dickson** explaining the process whereby this would be developed.

At this point, **the Chairman** sought and obtained approval for the AQR Report.

*Mrs Dickson left the meeting at 3.11pm.*

## 8.0 ITEMS FOR DISCUSSION

### 8.1 ENCOMPASS UPDATE

Members received, for discussion, **SET/89/23 Encompass Update** with **Dr Robinson** highlighting a number of key developments as follows:

#### Readiness

- **Go-Live Readiness** – 60-Day Go-Live Readiness Assessment (GRLA) took place on 14 September 2023.
- **Patient Flow Day** – Held on 13 September 2023 to examine the complex integrated workflows to ensure they fitted together.
- **Manual Data Migration** – All manual data migration activities had commenced before culminating in the weekend prior to Go-Live.
- **Bedded Cutover** – Cutover is the process of ensuring every inpatient at Go-Live has the appropriate data aligned to them. Two of the three Dry Runs have taken place with Lessons Learned captured for Dry Run 3.

#### Technical Updates

- **Build Configuration** - Build Completion stands at 97% of expected 100% for core workflow with 73% against 98% of overall build completed.
- **Data Migration** – Full-scale validation extended to 29 September 2023 to account for a technical outage.
- **Interfacing** – Core-LIMS scheduled to Go-Live remains a key risk with mitigations reviewed if deadline missed.
- **End User Devices** – Technical Dress Rehearsal pilot commenced on 21 August 2023 in preparation for the Full Technical Dress Rehearsal on 4 September 2023. Initial Pay it Forward Pay it Back resources were not fully available with the shortfall bridged using agency and SET staff with further mitigation being progressed. Device deployment continues in parallel to Technical Dress Rehearsal.
- **Medical Devices** – 100% of devices installed with testing continuing.

#### Business Change and Training

- **Super User Training:** 89% of staff had booked onto one or more courses with 65% having attended training.
- **End User Training:** 60% of staff had booked onto one or more courses with 22% having attended training.
- **Mitigations to increase Training Uptake:** Training Academies set up (DH/LVH/UH). Communications – regular Staff Communication by

Directorate. Training Clinics – setup to resolve issues. Encouraging registration and training attendance through Professional and Operational lines. Learning from other Go-Lives

- **Workforce Transition:** Redeployment process now agreed with new roles relating to scanning, MyCare and data quality to be determined.
- **Change Impact:** This will require completion in a short window to ensure the safest possible Go-Live and completion of mitigations in parallel such as training and the updated Standard Operating Procedures. The first critical workflows were being reviewed by the relevant Operational Readiness Groups and work is ongoing on the remaining workflows.
- **Communication and Engagement:** Training communications ongoing with Handbooks for Super Users and Floorwalkers under development.
- **Benefits:** Benefits reviewed and returned to the Regional Team.

### Other Work Areas

- **Go-Live Planning:** Planning Committee in place supplemented by four Sub-Groups - Super Users/Floorwalkers, Command Centre, Helpdesk and Operational Impact/Readiness Group.
- **Business Continuity:** Device rollout continues with support from third party organisations to deploy printers and Uninterruptible Power Supplies to allow for Technical Dress Rehearsal. A HSCNI Downtime Policy and Procedure was being reviewed with a Downtime drill planned.
- **Lessons Learned Event** with Royal Devon and Exeter on 12 September 2023 proved successful with RDE keen to partner going forward.

**Dr Robinson** thanked Mr Brady for joining the Day 60 GLRA adding SET continued to mobilise at pace. **Mr Brady** stated he had maintained an active interest in Encompass throughout raising on many occasions the need for preparedness. **Mr Brady** advised he had been utterly impressed with the progress made adding he had engaged with DoH Chief Digital Information Officer who also recognised the benefits would be transformational. **Mr Brady** stated the team were clear-sighted on risk management noting Board support would be key to success and explained he had received all the answers he had wanted. **Dr Briscoe** asked if the necessary level of staff training was achievable. **Dr Robinson** acknowledged SET was not yet where it needed to be but there was a clear focus on achieving the training target by Go-Live. **Mrs Minford** asked if there had been any change with respect of impact on services. **Dr Robinson** replied planning were ongoing to mitigate where possible given it may take nine weeks to return to pre-Go-Live activity with staff training the key mitigation in terms of recovery time. **The Chairman** stated external partners had been impressed commending staff for their efforts to date.

## **8.2 INTEGRATED PERFORMANCE MONITORING REPORT**

Members received, for discussion, **SET/90/23 Integrated Performance Monitoring Report (August 2023)** with **Dr Robinson** providing an overview of the statistical information contained within the Report.

**Dr Briscoe** welcomed inclusion of the positive ambulatory care hub statistics, sought assurance on efforts to address the variable Do Not Attend (DNA) rates across specialities, asked why C.Diff incidents were increasing and enquired

what could be done to address a lack of care home leadership staff impacting Complex Discharges. **Dr Robinson** noted HCI levels were similar to 2021/22 but reduced social distancing and hand washing had had an impact. **Dr Robinson** provided detail on trusted assessors for care homes noting it was easier to influence outcomes within SET facilities compared to the Independent Sector. On DNA rates, **Ms Parks** highlighting a new text reminder system was now operational adding the LVH DPU had impacted SET figures as patients from other HSC Trusts had been consolidated there – many having waited a number of years and may consider they no longer required the procedure.

### **8.3 WINTER PLAN 2023/24**

Members received, for discussion, **SET/91/23 Winter Plan 2023/24** with **Dr Robinson** explaining DoH had requested locality-based plans focused on Maximising Ambulance Capacity, Reducing Time Spent by Patients in Emergency Departments Awaiting Clinical Decision and Next Stage of Care and Timely Hospital Discharge for Patients who are Medically Fit for Discharge. **Dr Robinson** explained SET had submitted a final draft plan to DoH who had indicated plans should be operational by 1 October 2023 with the Locality Plans incorporated into a wider Regional Winter Preparedness Plan due to be launched next month. **Dr Robinson** stated the Winter Plan alongside Encompass implementation would have significant resource implications.

**Mrs O'Hagan** asked if the Winter Plan was irrelevant if HSC cannot achieve what was needed all year round asking how it might address overarching need. **Dr Robinson** welcomed the inclusion of Elective Care while the focus remained on Unscheduled Care, NIAS capacity, Patient Flow and Discharge. **Dr Robinson** stated DoH previously released funds to support the Winter Plan and this was no longer the case making delivery more challenging. **Mrs O'Hagan** asked if SET had sent a response adding the Plan could impact other important targets such as for Cancer and Mental Health. **Dr Robinson** replied there was a template being worked on noting DoH previously released funds to support the Winter Plan and this was no longer the case making delivery challenging.

### **8.4 FINANCIAL REPORT**

Members received, for discussion, **SET/88/23 Financial Report** with **Ms Thompson** stating SET now had a YTD deficit of £9.27m and full year forecast deficit of £22.69m with increased demand for nursing staff wards due to the levels of undesignated beds which will likely lead to increases in agency staffing costs which are being closely monitored. Real time information on the booking of shifts is showing the use of off-contract nursing and nursing assistant roles had ceased in line with the new framework but fill rates for shifts were improving which will likely lead to increased on-contract agency costs. Current CRL funding stood at £24.4m having received additional CRL for Elective Care Equipment (£704,000) and 'Task & Finish: Mental Health Inpatients Ward 12 LVH' (£330,000). Members also noted Prompt Payment Target of 98.57% against a target of 95% of suppliers within 30 days together with a summary of progress made against specific savings targets. **The Chairman** asked Ms Thompson to update on the Mid-Year Accountability Meeting they had both attended with the Chief Executive. **Ms Thompson** advised the Permanent Secretary focused on how each Directorate is held accountable in respect of

finance and performance with the clear message being all HSC Trusts must optimise their financial position. **Ms Thompson** concluded it was a positive meeting and **the Chairman** added Mr May had been complimentary on a number of matters including Encompass preparation.

**Mrs O'Hagan** asked for an update in relation to undesignated beds and specifically the additional 45 beds stood up in UHD 18 months ago. **Ms Thompson** advised these were 50% partially funded leaving a funding gap of circa £4.5m with no current funding arrangements likely until the regional bed capacity review concludes. **Mrs O'Hagan** asked if the beds related to Mental Health services and **Ms Thompson** replied these were general medicine beds adding the performance and activity data supported a case for funding these recurrently and appropriately. **Ms Thompson** emphasised overall savings required remained challenging.

## **9.0 COMMITTEE BUSINESS**

### **9.1 TERMS OF REFERENCE: PEOPLE & CULTURE COMMITTEE**

Following discussion, Members deferred further consideration of **SET/92/23 People & Culture Committee Terms of Reference** until a future meeting.

### **9.2 APPROVED MINUTES: CHARITABLE FUNDS COMMITTEE – 15 JUNE 2023**

Members noted **SET/93/23 Charitable Funds Committee Approved Minutes - 15 June 2023**.

## **10.0 ITEMS FOR NOTING**

### **10.1 INFECTION PREVENTION CONTROL (IPC) ANNUAL REPORT 2022/23**

Members noted **SET/94/23 IPC Annual Report 2022/23**.

### **10.2 LAUNCH OF PUBLIC CONSULTATION: RECOMMENDATIONS FROM THE INDEPENDENT REVIEW OF CHILDREN'S SOCIAL CARE SERVICES**

Members noted **SET/95/23 Launch of Public Consultation: Recommendations from the Review of Children's Social Care Services**.

## **11.0 ANY OTHER BUSINESS**

There were no further items of business.

## **12.0 DATE AND VENUE OF NEXT MEETING**

**The Chairman** advised the next Public Board meeting would be held on Wednesday 29 November 2023 at 2.30pm in the Recreation Hall, Trust Headquarters, Ulster Hospital, Dundonald. **The Chairman** thanked everyone and declared the meeting closed at 4pm.