



**Minutes of a Virtual Trust Board meeting held on  
Thursday, 17<sup>th</sup> June 2021 at 2.00 p.m.**

**PRESENT**

Ms E Mullan, Chair  
Mr S Devlin, Chief Executive  
Ms G Donaghy, Non-Executive Director  
Mrs H McCartan, Non-Executive Director  
Mr M McDonald, Non-Executive Director  
Mr J Wilkinson, Non-Executive Director  
Mr P Morgan, Director of Children and Young People's Services/Executive  
Director of Social Work  
Ms H O'Neill, Director of Finance, Procurement and Estates  
Mrs H Trouton, Executive Director of Nursing, Midwifery & Allied Health  
Professionals.

**IN ATTENDANCE**

Mr B Beattie, Interim Director of Older People and Primary Care  
Mrs A Magwood, Director of Performance and Reform  
Mrs M McClements, Director of Acute Services  
Mrs V Toal, Director of Human Resources and Organisational Development  
Dr D Gormley, Deputy Medical Director for Governance and Safety and  
Quality Improvement (*for Dr O'Kane*)  
Dr A Diamond, Deputy Medical Director for Education and Workforce  
Development (*Item 8i only*)  
Mrs L Woolsey, Assistant Director of Mental Health and Learning Disability  
In-patients (*for Dr O'Kane*)  
Mrs J McKimm, Head of Communications  
Mr E McAnuff, Boardroom Apprentice  
Mrs S Judt, Board Assurance Manager  
Mrs S McCormick, Committee Secretary (*Minutes*)

**APOLOGIES**

Mrs P Leeson, Non-Executive Director  
Dr M O'Kane, Medical Director/Interim Director of Mental Health and  
Learning Disability Services

## **1. CHAIR'S WELCOME**

The Chair welcomed everyone to the virtual meeting including Dr Damien Gormley, Deputy Medical Director and Mrs Lynn Woolsey, Assistant Director Mental Health and Learning Disability In-patients, both deputising for Dr Maria O'Kane. The Chair also welcomed Mr Eoin McAnuff to his final public Trust Board meeting as Boardroom Apprentice. At this point, the Chair particularly welcomed seven members of Trust staff from the Finance, Procurement and Estates Directorate and stated that she would appreciate their feedback in terms of what they will learn at today's meeting and how they take this learning back to their colleagues.

Regular public attendees were also welcomed to the meeting.

The Chair reminded everyone regarding some aspects of virtual meeting etiquette and the business of the meeting proceeded. In referring to the agenda the Chair pointed out items are now classified under the themes of Strategy, Accountability and Culture.

## **2. DECLARATION OF INTERESTS**

The Chair asked members to declare any potential conflicts of interest in relation to any matters on the agenda. None were declared.

## **3. SERVICE IMPROVEMENT/LEARNING FROM STAFF AND SERVICE USER EXPERIENCE**

### **Video: "2020/21 – The Year We Had"**

The Chair introduced a video clip produced by the Trust Communications Team and invited members to reflect on the many experiences staff have encountered during the pandemic.

In drawing the item to conclusion, the Chief Executive put on record his overwhelming pride for every member of staff across the Trust and commended their commitment and dedication throughout the past year. He recognised the immense pressure on teams and acknowledged that Covid19 still remains. He referred to the new challenges ahead in terms of delivering the Minister's Elective Care Plan and the reorganisation of urgent and unscheduled care, however he emphasised it was important to take time to reflect and re-energise.

The Chair thanked Mrs McKimm and Mrs Rogers for co-ordinating the thought provoking video.

#### **4. MINUTES OF MEETING HELD ON 27<sup>TH</sup> MAY 2021**

The minutes of a meeting held on 27<sup>th</sup> May 2021 were agreed as an accurate record.

**The Board approved the minutes of the meeting held on 27<sup>th</sup> May 2021.**

#### **5. MATTERS ARISING FROM PREVIOUS MEETING**

The Chair invited the Chief Executive to bring to the Board's attention a number of emerging issues.

##### **Elective Care Plan/Strategy**

Members noted the recently published regional Elective Care Framework for Northern Ireland, setting out a detailed roadmap for tackling hospital waiting lists using a twin track approach of investment and reform.

##### **Unscheduled Care**

The Chief Executive referred to the current period of sustained pressure on Unscheduled Care. Whilst regional collaboration is welcome, he stated that resources both in terms of finance and workforce are stretched. Mrs McClements concurred and stated it was envisaged the current pressure could be attributed to patients not seeking medical intervention earlier for a variety of reasons. She assured members the Trust is working well with regional partners to maximise capacity. Mrs McClements also advised work was progressing with the Older People and Primary Care Directorate to develop no more silos, which aims to reduce dependence on ED and arrange other options for patients. She assured members the situation was being well managed and patient flow and discharge was currently good, however the Trust will be compromised going forward as a result of Estates improvement works.

Dr Gormley referred to the challenges in terms of reduced workforce numbers and also acknowledged the burn out factor within the workforce in light of Covid. The Chair emphasised the need for staff to be allowed time out to recover themselves, to which the Chief Executive stated each Directorate is working with their teams to identify how workload can be

planned in a managed way. The Trust Physiological Support Service remains in place for staff.

*Mr Morgan left the meeting at this point*

## **6. STRATEGY**

### **i) CORPORATE PLAN YEAR 4 (2020/21) PROGRESS REPORT (ST1060/21)**

Mrs Magwood presented the Year 4 (2020/21) Corporate Plan Progress Report which includes a summary update on key actions and year end performance. She noted that progress in the fourth year of the Trust's Corporate Plan is set in the context of an extremely challenging period in which the demand for Trust services again increased in line with demographic growth and noted the significant challenge of the impact of Covid19 on the Trust.

Mrs Magwood was pleased to report that of the sixty two actions planned for this year, more than 50% were fully achieved. She commended staff and their teams for their outstanding work in achieving as much business as possible in the midst of a Pandemic along with numerous other pressures.

Members noted that in recognition of the significant impact of Covid19 on the Trust's achievement against the year 4 actions, the Senior Management Team have agreed to roll forward the current Corporate Plan for a further year and this will be reported as Year 5 actions for 2021/22. Mrs Magwood pointed out that consequently the update report under review only reflects progress updates and achievements in respect of year 4 actions and not the totality of the 4 year plan.

Mr McDonald referred to page 35 of the report, improving sustainability within the GP Out of Hours service and queried the green rag rating. In responding, Mrs Magwood reminded members the plan had been developed setting out a journey to progress GP services to a better place. She acknowledged there was further work to do, however pointed out the Trust has achieved the actions it had tasked itself to do in Year 4. Mr Beattie concurred and stated learning had identified the importance of a whole system approach and work will be progressing through the Health and Social Care Board (HSCB) and Integrated Care to ensure better planning in recognition that GP Out of Hours is under immense pressure.

## **The Board approved the Corporate Plan Year 4 (2020/21) Progress Report (ST1060/21)**

### **7. ACCOUNTABILITY**

#### **i) YEAR-END REPORT OF CAPITAL INVESTMENT 2020/21**

Mrs Magwood presented the above named report for information purposes which provides a summary of capital investment during the year 2020/2021 amounting to £28.5m. She pointed out this includes a specific allocation of £5.8m to support the Trust in responding to the Covid19 pandemic. Members noted the Trust achieved full spend against the allocations made in the financial year under review.

Mrs Magwood stated the Trust continues to work hard allocating capital to the places most needed and referred to the ongoing infrastructure challenges over both hospital and community sites. Members noted the breakdown of general capital allocations for 2020/21 across service areas.

At this point, Mrs McCartan put on record thanks to Mrs Magwood and Ms O'Neill for leading on the procurement of capital spend. She also acknowledged the exceptional work undertaken by the Estates team in relation to their achievements in the context of the current pandemic situation. Mrs Magwood also commended the work undertaken by IT colleagues to enable the huge digital exhilaration during this period which has facilitated new ways of working for both staff and patients.

In response to a question from Ms Donaghy on procurement challenges arising from late allocations from the Department of Health, Mrs Magwood assured members the Trust has a detailed prioritisation process in place and referred to the supporting role of the Capital Allocation Group to ensure funding is procured in a timely way.

Mr Wilkinson asked if the report evidenced whether the issue of getting oxygen to patients during Covid, in light of infrastructure challenges had been addressed. Ms O'Neill acknowledged there had been a capacity issue however a robust set of works was carried out across both Craigavon Area Hospital (CAH) and Daisy Hill Hospital (DHH) sites to increase capacity and assist with supporting a surge in the number of patients admitted requiring oxygen therapy. She pointed out it was important to note that while the system has been

significantly enhanced further investment will be required in the future.

## **ii) STATEMENT OF LOSSES AND SPECIAL PAYMENTS (ST1061/21)**

Ms O'Neill spoke to this report detailing losses amounting to £5,717,243 for the year ended 31 March 2021. She pointed out that a significant element of this was due to Special Payments, largely as a result of clinical negligence, employers and public liability claims which totalled £6m. Four of the losses were above the delegated limit for the Trust and as a direct result required Department of Health approval. By way of update, Ms O'Neill advised Departmental approval has been granted for three of the four losses.

Mrs McCartan confirmed the schedule of losses had been considered by the Audit Committee and recommended to Trust Board for approval.

### **Board members approved the Statement of Losses and Special Payments (ST1061/21)**

## **iii) FINAL ANNUAL REPORT, GOVERNANCE STATEMENT AND ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2021 (ST1062/21)**

Ms O'Neill presented for approval the draft Annual Report, Governance Statement and Accounts for the year ended 31st March 2021. She confirmed that these have been robustly scrutinised by the Audit Committee and the same principle applied to the Trust Funds Accounts through both the Endowments and Gifts Committee and the Audit Committee. Members noted that at the conclusion of the external audit process and subject to resolution of one regional issue in relation to the classification of a specific payroll accrual verses provision, the External Auditor is proposing that the Comptroller and Auditor General will certify the financial statements with an unqualified audit opinion without modification. Ms O'Neill assured members the outcome of the regional issue will not impact the year-end reported position. External audit found no issues with irregularity or impropriety.

At this point Ms O'Neill guided members through a comprehensive summary outlining the key messages and was pleased to report the Trust achieved financial balance with a year-end marginal surplus of £31k. In light of the requirement to ensure expenditure is kept within the break-even limit of 0.25%, Ms O'Neill welcomed the position for

2020/21 equating to 0.003% and stated that given the current year in terms of monitoring and forecasting levels of Covid expenditure, the outcome was a huge achievement.

External audit found no Priority 1 issues. Ms O'Neill highlighted an unadjusted misstatement in relation to the classification of the £4.7m clinical excellence liability as an accrual rather than a provision and stated the Trust received full revenue resource limit to match this accrual. A regional solution is awaited.

Members noted the Trust currently manages 1,557 patient/resident accounts. Management costs remain at 3.2% on a like for like basis with prior year figures. In relation to prompt payments, Ms O'Neill stated that performance in 2020/21 showed the Trust achieved 94% against the 30 day target (95%). She said it was important to note that overall the total number of invoices presented to the Trust for payment decreased by 9%, largely due to a reduction in the use of locum and agency staff during the first stage of the pandemic. In 2020/21 the Trust paid £52m directly to suppliers within the Southern locality. Overall, at the end of March 2021 the average number of whole time equivalent (WTE) persons employed during the year, increased by 650 when compared to 2019/20 and 564 of this increase are permanent employees. Revenue from all sources amounted to £933m, an increase of £124m (17% compared to prior year figures) and Ms O'Neill pointed out the most significant element was £86.8m of additional revenue secured by the Trust to support its Covid response.

In relation to the financial outlook, members were advised that whilst the Trust has achieved breakeven in the period under review, it was due to significant non recurrent funding. Members were advised the Trust has received indicative allocations for 2021/22 and will work closely with colleagues in the Health and Social Care Board (HSCB), Department of Health (DoH) and other Trusts to further consider.

For the financial year 2020/21, Ms O'Neill reported that Charitable Trust Funds income was £3.5m and expenditure £546k. The significant increase in donations was due in the main to grant monies of £165k from NHS Charities Together which are largely spent, as well as generous giving from the Community and a further £3m donation from the DoH at year end. Expenditure has increased year on year and this is due to the proactive work of the Endowments and Gifts Committee in encouraging appropriate spend. Investments

have performed well in 2020/21. The total value of funds at 31 March 2021 amounted to £9m, a significant increase from the prior year.

As Chair of the Audit Committee, Mrs McCartan reflected on the challenges for Trust staff in light of the pandemic and thanked teams across the Organisation for working closely with Finance staff to achieve an excellent year end result. In conclusion members put on record their thanks to Ms O'Neill and the entire Finance team for the rigour of the financial reporting and complying with the challenging deadlines.

Members took time to reflect on the excellent leadership and professionalism provided by Ms O'Neill as Director of Finance, Procurement and Estates and conveyed their sincere best wishes to her on her retirement.

**Board members approved the Draft Annual Report, Governance Statement and Accounts for the year ended 31 March 2021 (ST1062/21)**

iv) **DRAFT REPORT TO THOSE CHARGED WITH GOVERNANCE 2020/21**

By way of introduction, the Chief Executive welcomed the report which provides external assurance on the systems and controls the Trust has in place. Members discussed the draft report which had also been presented to the Audit Committee by the External Auditors on 15<sup>th</sup> June 2021.

Ms O'Neill guided members through the detail of the report and pointed out the document will remain in draft form until an outcome has been reached in relation to the holiday pay overtime liability, accrual vs provision classification.

Mrs McCartan advised Audit Committee members had considered the draft report on 15<sup>th</sup> June 2021 and welcomed the work of the new auditor partners, ASM. In relation to the accrual vs provision matter, Mrs McCartan added this was a regional issue still under discussion and would have no bearing on the final accounting result.

In conclusion, Ms O'Neill advised that ASM would be recommending to the Comptroller and Auditor General (C&AG) that an unqualified audit opinion on the Trust accounts be issued.

## **v) BOARD ASSURANCE FRAMEWORK (ST1063/21)**

The Chief Executive presented the annual Board Assurance Framework for approval. Members noted the document is part of a live process and recognised its connection with the Corporate Risk Register which is reviewed on a quarterly basis by the Governance Committee. The Chair particularly acknowledged the current changing risk environment in light of Covid and recognised the need for agility and allowing for change in the year ahead.

Members considered the framework and in particular noted the significant risks around workforce issues, partnership and recovery.

Ms Donaghy referred to workforce issues in light of differentials in rates of pay amongst locum medical staff and asked if it was feasible for the DoH to reach a solution. The Chief Executive advised he had been asked to Chair the regional group, which included representatives from all Trusts and Trade Union colleagues looking into a number of key issues. Whilst he recognised the important role of the DoH, he stated a coalition of providers with the support of the Department was key to solving the problem. He assured members that regionally, Human Resources Directors are working in partnership across the service with the Department and Trade Unions on moving the issues forward.

Mrs Toal stated it was about agreeing a level of consistency with rates and then ensuring compliance across the system. She emphasised the need for sanctions and monitoring to be in place and the importance of Departmental buy in to move the matter forward. Members welcomed the ongoing work, however acknowledged the huge task ahead. In response to a further question from Ms Donaghy on the importance of regulation around the issue, Mrs Toal spoke of the importance of embracing learning from across NHS Improvement and NHS England.

Mr McDonald referred to Health and Wellbeing on page 13 and acknowledged investment into the prevention side is somewhat out of the Trust's control, however he emphasised the importance of influencing policy makers and budget holders at Departmental level. Mr McDonald also suggested positive and meaningful engagement with stakeholders would be instrumental in working with the Trust to promote health and wellbeing should additional funds become available. The Chief Executive concurred and stated this was being progressed regionally and also locally through initial work on developing a standardised approach to delivering health and wellbeing for the local

community. Mrs Magwood advised plans from all Trusts were expected to be submitted to the DoH by Autumn 2021.

In conclusion Mr McDonald suggested there maybe scope in the future for a Scrutiny Committee within the Southern Trust to allow direct engagement from Non-Executive Directors at Trust Board level with the Integrated Care Community Partnership. The Chief Executive welcomed this. Mr Morgan advised the Trust has tested a number of models within Children's Services, bringing other partners on board and stated learning to date has proved very helpful.

**Board members approved the Board Assurance Framework (ST1063/21)**

**vi) PERFORMANCE COMMITTEE**

**- Minutes of meeting held on 18<sup>th</sup> March 2021**

In the absence of Mrs Leeson, Ms Donaghy presented the minutes of the Performance Committee meeting for information purposes.

**vii) TRUST BOARD ANNUAL CYCLE OF REPORTING 1.9.2021 – 31.8.2022 (ST1064/21)**

The Chair presented for approval, the Trust Board Annual Cycle of Reporting for the above named period.

**The Board approved the Annual Cycle of Reporting 1.9.2021 – 31.8.2022 (ST1064/21)**

**viii) APPLICATION OF TRUST SEAL (ST1065/21)**

Ms O'Neill sought approval for the Application of the Trust Seal to contract documentation as outlined in members' papers.

**The Board approved the Application of the Trust Seal (ST1065/21)**

**8. CULTURE**

**i) MEDICAL DIRECTOR REPORT**

Dr Gormley presented the Medical Director Report with a focus on Medical Education and Medical Workforce and outlined the key

elements. The Chair welcomed in particular simulation training and the attractive incentive it brings when recruiting medical posts. She also highlighted 10 SAS doctors recruited in 2020/21 and asked if there was room for further additionality. Dr Gormley stated the Trust was working towards being less reliant on locum staff and he referred to the expansion of the clinical fellow role. He outlined the rationale behind this role and its attractiveness in terms of flexibility around appointment and training and advised emphasis has majored on this area as opposed to the speciality doctor.

Mrs McCartan welcomed the significant initiatives within the report and asked about Longitudinal Integrated Clerkships. Dr Gormley explained this was a different way of delivering the curriculum, however it is expected to present challenges in the way training and assessments will be delivered. He also referred to the increased numbers of doctors coming through the post graduate training from the University of Ulster and the expansion of the Queens University role. Dr Diamond added the Clerkship was the outworking of a regional decision to align with other mainland centres to improve the undergraduate experience. She outlined the benefits for both patients and students and added risk should be reduced.

Mr McDonald referred to Section 3.4, Wellbeing of Medical Students and welcomed the important work being done to develop a programme of teaching non-clinical skills. He emphasised the importance of learning from complaints and embedding this training within medical students and junior docs which will benefit them into the future. Mrs Toal added non-clinical skills are included as part of the Junior Doctors Induction Programme.

Mr Wilkinson drew member's attention to page 12 and asked if modernising the appraisal process for medical staff by separating out issues of performance and governance from appraisal has been implemented and to what extent it has made a difference. Dr Gormley advised the newly established Performance Review meeting has not formally met yet, however the Revalidation Oversight Group is progressing the process of putting doctors forward for revalidation. Mr Wilkinson pointed out the percentage of doctors having completed their 2019 annual appraisal was down to 75% compared to 98% in the prior year. Dr Gormley acknowledged numbers have reduced due to a variety of reasons including the impact of the pandemic; however these are currently being addressed.

*Dr Diamond left the meeting at this point*

## ii) EXECUTIVE DIRECTOR OF NURSING, MIDWIFERY AND AHP's REPORT

Mrs Trouton presented the above named report for assurance and guided members through the detail. In particular she highlighted a range of service improvement work ongoing across the Allied Health Professions of Orthoptics and Speech and Language Therapy (SLT).

Members welcomed the Trust's collaborative working with the Open University and Southern Regional College (SRC) to develop a one year full time Level 4 Certificate in Pre Nursing. The aim of the programme is to establish employment links with SRC and potentially grow the number of available motivated nursing support staff and expand the number of potential applicants for the Open University Nursing degree programme.

Mrs Trouton referred to 'Delivering Care', the regional agreement of investment into nursing across all the services. She advised the Trust has secured £4m investment for 2021/22 across a range of services and stated it was important to note that this particular investment is aligned to the nursing and midwifery taskforce report announced by the Health Minister pre Covid. Mrs Trouton welcomed the leadership posts that will help to provide good leadership and quality improvement across services.

Mrs Trouton stated Research and Development continues to progress across Nursing and Midwifery and referred to a recent study undertaken into Midwifery Led Units. She pointed out the findings from this work will inform the new Maternity Strategy in NI which is due for review later in the year.

At this point, Mrs Trouton mentioned a number of areas of concern including the absence of dedicated resources to oversee Paramedic Practice Placements. She stated the matter has been escalated to the DoH and the Trust continues to monitor the situation. Members were advised the number of International Nurses coming into the service has slowed down as a result of the ongoing pandemic. The Trust is working with the region to open up new avenues of recruitment.

In conclusion Mrs Trouton advised that work is ongoing with each Operational Directorate on Nursing Quality Indicators (NQIs) to provide assurance that quality nursing care is provided right across the Trust.

Mrs McCartan referred to paramedic practice placements and asked if a lack of dedicated officer roles was consistent across AHP disciplines in general. Mrs Trouton confirmed this was the case, however advised the need for dedicated staff has been recognised at regional level and she was hopeful funding will be made available by the next educational year once approved by the DoH. Mrs McCartan asked the Chair to consider looking at the area of nursing, midwifery and AHPs in more detail at a future sub-Committee or Board Workshop. The Chair agreed to consider the matter further following the meeting.

### ***Action – Ms Mullan***

At regional level, the Chair asked if placements for AHPs are increasing in line with demand, to which Mrs Trouton advised there has been a minimal increase in places but not enough to meet the demand across the region. The Chair referred to the Department of Economies Skills Strategy currently out for consultation and asked if AHPs and nursing factor into their idea of skills. She pointed out it may be worthwhile considering how the Trust responds to the Consultation from a Health and Social Care perspective. Mrs Trouton advised the Department undertook a series of workforce reviews across each AHP group; however the reviews have not been implemented to date. Members were reminded of the work alluded to earlier in partnership with the SRC and acknowledge the scope in terms of training and placements. Mrs Toal advised HR Directors across the region have flagged the matter with the DoH Workforce led.

## **9. ANY OTHER BUSINESS**

The Chair asked the Executive Directors of Medicine, Social Work, Nursing and Finance if there were any other issues relating to their professional roles they wished to bring to the Board's attention. There were none noted.

Members recorded congratulation to both Mrs Trudy Reid, Assistant Director of Infection, Prevention and Control and Mrs Teresa Ross, Head of Physiotherapy on being recently recognised as part of the Queen's Birthday Honours List and commended their outstanding achievements.

At this point, on behalf of the Senior Management Team the Chief Executive sincerely commended Ms O'Neill, Director of Finance, Procurement and Estates for her commitment to the work of the Trust

over many years and acknowledged her expertise and professionalism in engaging with both Trust colleagues and external stakeholders alike. The Chair and Non-Executive Director colleagues concurred and wished Ms O'Neill well in her retirement.

In conclusion, the Chair recorded thanks to everyone for their attendance and participation in the virtual meeting and to all those who had facilitated the meeting in any way. She advised the next meeting would take place on Thursday, 30<sup>th</sup> September 2021 at 9.30 a.m.

***The meeting concluded at 4.30pm***

**SIGNED:** \_\_\_\_\_

**DATED:** \_\_\_\_\_