

Chief Executive's Business

Trust Board

Thursday 24 October 2019

Chief Executive's Engagement

16 September 2019 – 18 October 2019

Staff Engagement and visits:

- JNCF Meetings
- Medical Forum Meeting
- GP Interface Meeting
- LNC Meeting
- Chief Visits to:
 - ✓ A&D Domiciliary Care Team, Mullinure, St Luke's, Armagh
 - ✓ FNP Team, Blossom Hall, St Luke's, Armagh
 - ✓ Granville Supported Living Unit, Dungannon

Trust Representation:

- Chief Executive Meetings
- Transformation Programme Board Meeting
- Digital Shared Services Programme Board
- Digital Shared Services Lessons Learned Seminar
- HSCQI Leadership Alliance
- Graduation Event for the Aspiring Nurse Director Programme
- Engaging with Service Users & Families in SAI Process
- Encompass Function Demonstration
- Making Life Better HSC Partnership Meeting
- Regional Procurement Board Meeting

Stakeholder Engagement Process:

- RQIA Feedback Session with Staff, Diagnostic Imaging Department, Daisy Hill Hospital
- NM&D District Council Planning Committee Meeting

1.0 Local / Regional Update:

- 1.1 Southern Trust Mental Health/Learning Disability summary 2018/19**
- 1.2** In 2018/19, there were approximately 981 inpatient admissions under the Mental Health programme in The Southern Trust - 18.8% of the Northern Ireland total of 5,209. In addition there were almost 2500 discharges from the Crisis Response and Home Treatment Teams in 2018-19. Home Treatment is offered to those individuals who would otherwise require in-patient treatment therefore avoiding admission to in-patient care where possible.
- 1.3** Southern Trust had an occupancy rate of 97.9% of all available Mental Health inpatient and daycase beds. The guidance from the Royal College of Psychiatrists for bed occupancy in similar units suggests occupancy levels should not exceed 85%.
- 1.4** There are around 70 available Mental Health inpatient beds.
- 1.5** The average length of stay in Mental Health inpatient beds was 25.5 days. The Southern Trust is part of the NHS Benchmarking scheme which confirms we have a much shorter length of stay than the national average of 31 days
- 1.6** There were, on average, 10 available learning disability beds in Southern Trust. Trust had an occupancy rate of 102.6% of all available Learning Disability beds.
- 1.7** The average length of stay for Learning Disability patients was 113.5 days.
- 1.8** Referrals to our Primary Mental Health Service remains under on-going and significant pressure from a 60% increase in referrals between 2016 and 2017. These levels of additional demand have continued into 2018 with 7199 referrals and figures for 2019 show that demand will be even higher. Regrettably this is manifested in longer waiting times for non-urgent referrals.
- 1.9** Individuals with long-standing severe and enduring mental ill-health are assisted in our support and recovery team who provide on-going support to around 3500 people across the Trust. In addition our specialist services, such as Addictions and Eating Disorder Teams continue to manage

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significant numbers of individuals in the community, providing care close to their own homes.

- 1.10 The Trust also works in partnership in the community with a number of regional and local community and voluntary sector service providers through contracts for specific services such as Action Mental Health's Community support and Day Opportunities service and through our Well-Mind hub - designed to meet the needs of those individuals with less complex anxiety and depression.
- 1.11 This comes at a time when the Mental Health Services in the Trust have significant number of vacancies against a backdrop of fewer available staff graduating in Nursing, AHPs, Psychology, Social Work and Psychiatry than will meet our on-going requirements.

2.0 Newry Community Treatment and Care Centre – planning application deferred.

- 2.1 An application for full planning permission for the Newry Community Treatment and Care Centre was discussed at recent meeting of the Newry Mourne Down Council planning committee.
- 2.2 The meeting, held on October 16th, discussed: development of Community Treatment and Care Centre, associated parking including an area of decked parking, accesses from Abby Way and Courtney Hill and other associated operational development (amended plans) - lands at Abbey Way/Courtney Hill (including part of former grammar school lands and lands to the rear of AbbeyYard) Ballymacraig, Newry.
- 2.3 The planning committee agreed to defer any final decision on planning approval, until a small number of issues have been further explored. The timeframe for a further planning application hearing has not yet been confirmed.

3.0 NI Cancer waiting times April – June 201

- 3.1 NI Cancer Waiting Times Statistics for April, May and June 2019 from Department of Health
- 3.2 The release gives details of the waiting times for patients accessing cancer services at hospitals during April, May and June 2019.

3.3 Key facts and figures are listed below:

3.4 Waiting times for first treatment following an urgent GP referral for suspect cancer (62 day target)

- In June 2019, 325 patients commenced their first treatment for cancer following an urgent referral for suspect cancer. Of these, 55.4% (180 patients) started treatment within 62 days, compared with 48.9% (176 of the 360 patients) in May, 57.7% (205 of the 355 patients) in April and 70.8% (260 of the 367 patients) in June 2018.
- Waiting times for first definitive treatment following a decision to treat (31 day target)
- During June 2019, 809 patients commenced their first treatment for cancer following a decision to treat being taken. Of these, 93.3% (755) started treatment within 31 days, compared with 93.0% (789 of the 848 patients) in May, 92.9% (780 of the 840 patients) in April and 95.4% (806 of the 845 patients) in June 2018.

3.5 Patients first seen following an urgent referral for suspect breast cancer (14 day target)

- During June 2019, 1,303 patients were seen by a breast cancer specialist for a first assessment following an urgent referral for suspect breast cancer. Of these, 80.0% (1,042) were seen within 14 days, compared with 75.4% (1,120 of the 1,486 patients) in May, 83.2% (1,027 of the 1,234 patients) and 94.1% (1,230 of the 1,307 patients) in June 2018.

3.6 Referrals for suspect breast cancer:

3.7 In June 2019, 1,861 new referrals for suspect breast cancer were received; this compares to 2,197 in May, 1,952 in April and 1,934 in June 2018. Referrals for suspect breast cancer can be for advice, assessment or both.

3.8 Of those new referrals for suspect breast cancer in June 2019, 1,289 (69.3%) were classified as urgent.

4.0 Changes to the law in Northern Ireland on Abortion

4.1 If the Northern Ireland Executive is not restored by 21 October 2019, legislation passed by the UK Parliament has placed a legal duty on the UK

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Government to take action to legalise access to abortion services in Northern Ireland.

- 4.2 In these circumstances, a new framework providing safe and lawful access to services will be in place by 31 March 2020. It is anticipated that there will be no impact on the Trust prior to this date.
- 4.3 The changes would mean that immediately from 22 October 2019 women who seek to access abortion services in Northern Ireland would no longer be prosecuted. Investigations or prosecutions that were underway would not proceed.
- 4.4 If the Executive is not restored by 21 October, we will consult widely on a new legal framework for abortion in the coming weeks. Please check these pages for further information on this matter in the weeks ahead.
- 4.5 Guidance has been sent to health professionals.

5.0 Department of Health update: Regional Launch of Primary Care Multi-Disciplinary Team programme

- 5.1 The Department of Health has launched the latest phase of plans to transform care at GP surgeries across Northern Ireland.
- 5.2 The multi-disciplinary teams (MDTs) initiative is being expanded into two new areas, Newry and District and Causeway, meaning approximately 675,000 people will now be covered by this new approach.
- 5.3 MDTs involve physiotherapists, mental health specialists and social workers being established at GP practices.
- 5.4 In addition, West Belfast Federation will receive funding to fully roll out the model in its area.
- 5.5 The innovation was launched last year with GP Federations in Down and Derry/Londonderry.
- 5.6 With Causeway, Newry & District and West Belfast now also on board, MDTs will be available in all five Health Trust areas

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- 5.7** MDTs are one of the flagship initiatives being rolled out as part of the Health and Wellbeing 2026: Delivering Together initiative which was launched in 2016 setting out a vision for the transformation of Health and Social Care here. The vision was based on the report of the Expert Panel, led by Professor Rafael Bengoa.
- 5.8** MDTs involve the establishment of practice-based physiotherapists, mental health specialists and social workers within GP practices. This will see local GP practices focus not just on managing ill-health, but also on the physical, mental and social wellbeing of communities.
- 5.9** The model also provides significant investment in additional nursing specialist roles such as health visiting and district nursing
- 5.10** Up to £11.8m will be invested in the project in 2019/20. Further investment, in the region of £25m, is planned in 2020/21.

6.0 Permanent Secretary comments on challenges facing health service

- 6.1** Department of Health Permanent Secretary Richard Pengelly has highlighted that health and social care services are moving into their most challenging ever period.
- 6.2** Mr Pengelly was speaking at a Healthcare Financial Management Association event at the Dunadry Hotel.
- 6.3** He said: “The organisation NHS Providers in England called for a full, frank and open conversation about the severe pressures facing the health service.
- 6.4** “It said patients and taxpayers deserve honesty, realism and transparency about the scale of the challenges.
- 6.5** “We are certainly in a defining period for health and social care in N Ireland. Budgets remain under intense pressure. At the same time, demand for care continues to grow.
- 6.6** “Something has to give in that situation. We can see it in our growing waiting lists and the impact these have on public confidence in the system.

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And it's also very evident in the rising tide of frustration within our workforce.

- 6.7** “The Department meanwhile has to live within its budget. Despite our well documented financial challenges, we are getting demands on an almost daily basis for additional spending. We simply don't have the money to do everything we are being asked to do.
- 6.8** “Our constant refrain is that we cannot spend money we don't have. We need to go further than that, of course, and encourage debate on priorities and how best to use the limited resources we have.
- 6.9** “Central to this will be progressing the transformation agenda, as mapped out in the Delivering Together and Bengoa reports. The way we organise services is outdated and needs to change for the sake of patients and staff
- 6.10** “Change is never easy in health but it is essential. I have no doubt there will be many difficult decisions ahead both on reforming services and on budgetary choices.
- 6.11** “We can't duck those decisions. If we did, then we really will be heading over the cliff edge into a full-blown crisis.”

7.0 Permanent Secretary - 'With a fixed budget, we can only do more in some areas by doing less in others'

- 7.1** Choices have to be made on funding priorities in health and social care, Department of Health Permanent Secretary Richard Pengelly has made clear.
- 7.2** In a speech to a Chartered Institute of Public Finance and Accountancy conference at the Stormont Hotel, Mr Pengelly said: “I have stated that my Department does not have the money to do everything we are being asked to do.
- 7.3** “This is not unique to me - I'm sure colleagues in other Departments would say exactly the same thing and with good reason
- 7.4** “It's now in the public domain that our health and social care trusts are facing a projected £20 million deficit this financial year.

- 7.5** “While intensive work will continue to ensure their books are balanced, the reality is that the projected deficit represents only a small part of the escalating pressures and demands we are facing in the months and years ahead.
- 7.6** “Currently these are presented to me with frustration – the argument being that because I don’t do something, it means I don’t want to do it. That is certainly not the case.
- 7.7** “Why wouldn’t I want to reduce waiting lists, increase pay for hard pressed staff and reduce the pressure on those staff by recruiting and training more colleagues? Why wouldn’t I want to improve mental health provision and focus on suicide prevention, commission new drugs for patients with cancer and other serious conditions?
- 7.8** “The truth is I simply can’t afford to do all these things – in fact, I can’t afford to do all the things we currently do.
- 7.9** “And with a fixed budget, I can only do more in some areas by doing less in others. And that is the key challenge.
- 7.10** “It is why we need a society-wide conversation on budgetary priorities and how best to use the limited resources we have. In the next year alone, the competing demands and pressures could between them add hundreds of millions to an already very stretched health budget.”

8.0 National / International Update

- 8.1** Milton Keynes University Hospital A&E
- 8.2** A coroner has said that patients' lives are being put at risk because of staff shortages at Milton Keynes Hospital, A&E department where a man died amid a series of failings.
- 8.3** Mr Osborne, who oversaw the inquest into Mr Shrosbree's death, said it became clear during evidence that problems in the department were mainly the result of a lack of staff.
- 8.4** John Shrosbree, 72, died a week after arriving "clearly unwell" at Milton Keynes Hospital, a report found.



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- 8.5** Mr Osborne, senior coroner for Milton Keynes, issued the hospital with [a Regulation 28 notice](#) - also known as a Prevention of Future Deaths report - after the inquest concluded. It ordered that "action should be taken to prevent future deaths".
- 8.6** A spokeswoman for Milton Keynes University Hospital NHS Foundation Trust said it accepted the coroner's findings and had increased the levels of nursing leadership in the emergency department.

<https://www.bbc.co.uk/news/uk-england-beds-bucks-herts-49897080>

9.0 Breast cancer screening

- 9.1** A recent study, published in JAMA Oncology, UK researchers stated that offering every woman diagnosed with breast cancer genetic screening would save hundreds of lives each year.
- 9.2** The study looked at data on 11,800 women diagnosed with breast cancer in the UK, US and Australia. Researchers say screening everyone would enable women to make informed treatment choices and allow family members to take preventative action.
- 9.3** Their analysis suggests one year's testing could save 2,102 cases of breast and ovarian cancer and 633 lives in the UK.
- 9.4** Currently, only those with risk factors such as a close family history of breast cancer are offered the check.
- 9.5** An NHS England spokesman said: "The new era of personalised medicine can bring life-changing benefits to patients which is why the NHS has committed to expanding genomic testing for patients with cancer as part of the Long Term Plan to transform care for millions of people across the country."

<https://www.bbc.co.uk/news/health-49897869>

10.0 Hospital ransomware attack affects healthcare facilities

- 10.1** Computers at the DCH Regional Medical Center in Tuscaloosa, Fayette Medical Center and Northport Medical Center were recently infected with ransomware. The incident was first reported on 1 October.
- 10.2** DCH Health system which operates the three affected hospitals in Alabama said: "A criminal is limiting our ability to use our computer systems in exchange for an as-yet unknown payment. We will continue to divert any new admissions, other than those that are critical, to other facilities." It is not yet known what group or individual launched the ransomware.
- 10.3** Seven Australian hospitals located in Gippsland and south-west Victoria have also reported disruptive ransomware infections. The Victorian Government said the Multiple computer systems had to be disconnected as a result, which has meant some patient record, booking and management services have been shut down - "Where practical, hospitals reverted to manual systems to maintain their services."
- 10.4** The Victorian Government Cyber Incident Response Service has dealt with more than 600 cyber-attacks since July 2018

www.bbc.co.uk/news/technology49905226?ns_mchannel=social&ocid=socialflow_twitter&ns_source=twitter&ns_campaign=bbcnews

11.0 250 million children worldwide forecast to be obese by 2030

- 11.1** The number of obese children globally is predicted to reach 250 million by 2030, up from 150 million now.
- 11.2** Ukraine has the highest proportion of overweight infants, at 26%. In the Cook Islands 40.7% of children aged five to 19 are obese. The US is in the top 20, with a quarter of its children and one in five of its adolescents obese
- 11.3** There will be nearly 62 million obese children aged five to 19 in China by 2030, 27 million in India and 17 million in the US. Obesity is damaging the health prospects for rich and poor countries alike. The Democratic Republic of the Congo will have 2.4 million children with obesity, and Tanzania and Vietnam will have 2 million each.

- 11.4** In the UK, the prediction is that 1.3 million children and adolescents will be obese by 2030, even though it is doing better than most, with policies to restrict marketing of junk food to children and to tackle inactivity and unhealthy diets. Its chances of meeting the WHO target of no rise from 2010 to 2025 are 37%, which is at the high end. In the US, the chances of meeting the target are 17%

<https://www.theguardian.com/society/2019/oct/02/250-million-children-worldwide-forecast-to-be-obese-by-2030>