

**Minutes of a Virtual Trust Board meeting held on
Thursday, 30th March 2023 at 10.30 a.m.**

PRESENT

Ms E Mullan, Chair
Dr M O’Kane, Chief Executive
Ms G Donaghy, Non-Executive Director
Mrs P Leeson, Non-Executive Director
Mrs H McCartan, Non-Executive Director
Mr M McDonald, Non-Executive Director
Mr J Wilkinson, Non-Executive Director
Dr S Austin, Medical Director
Mr C McCafferty, Interim Director of Children and Young People’s Services
/Executive Director of Social Work
Ms C Teggart, Director of Finance, Procurement and Estates
Mrs H Trouton, Executive Director of Nursing, Midwifery & Allied Health
Professionals

IN ATTENDANCE

Mr B Beattie, Director of Adult Community Services
Mrs L Leeman, Interim Director of Performance and Reform
Ms J McGall, Director of Mental Health and Disability Services
Mrs C Reid, Director of Surgery & Clinical Services
Mrs V Toal, Director of Human Resources and Organisational Development
Ms A McCorry, Director of Pharmacy (*for Mrs T Reid*)
Mrs R Rogers, Head of Communications
Mrs S Judt, Board Assurance Manager
Mrs S McCormick, Committee Secretary (*Minutes*)

APOLOGIES

Mrs P Leeson, Non-Executive Director
Mrs T Reid, Director of Medicine and Unscheduled Care

1. **SOUTHERN TRUST SERVICE USER ENGAGEMENT**

“Our Pledge” initiative in respect of Autism and Care Experienced Young People

The Chair welcomed a number of Young People and Trust Staff to the meeting. At the outset, Mr McCafferty outlined the origins of ‘Our Pledge’ developed by a group of young people through engagement with Trust Board during 2017 and 2018. The aim of the pledge is to engage with young people who avail of Children and Young People’s services and to use their expertise and experience to inform service development.

Ms S Kelly began the presentation, advising that post covid, Young People from CAMHS, Autism and 14 Plus services have met on three occasions under the Pledge arrangements.

14 Plus Service

Key themes identified from the 14 Plus service include the need for more employment opportunities for young people looked after by the Trust following on from the success of Jobstart and issues around accommodation and the lack of ‘move on accommodation’ for Young People leaving care.

In terms of accommodation issues, the Staff and Young People shared about ‘What is working well’ and outlined the importance of Transition Houses. They also explained a number of challenges and constraints including, very limited move on accommodation from the Northern Ireland Housing Executive (NIHE) or the Private sector.

Members considered the 3 recommendations for improvement, clearly articulated by the Young People:-

- Increase Trust Transition accommodation to ensure there is a range of accommodation options for the growing number of Young People coming through the care system.
- Access suitable ‘Move on accommodation’ for care leavers in all Southern Trust areas as Hostels/B&B are not appropriate
- Continued partnership working with the NIHE to ensure the needs of care leavers are being met in local areas.

CAMHS & Autism Services

Ms L Belshaw advised that 14 Young People shared their views on current service provision and there were a number of asks made in relation to improvements required in terms of the i) Physical environment, ii) Communication and iii) Accessibility.

In regards to service demands, members noted there are currently 5,189 Children and Young People open to Child and Adolescent Mental Health Service (CAMHS) and Autism Services across the Southern Trust. Currently Young People can access clinical services across the Trust, however there is limited space for engagement outside of the clinic room. There are no current 'drop in' facilities and no day hospital arrangements in the Southern Trust. In particular, Young People presenting in mental health crisis, those with eating disorders and those with an intellectual disability would benefit from facilities where they can access wraparound support without the need for hospital admission. Ms Belshaw shared the need for an emotional well-being HUB for Children and Young People.

In concluding the presentation, staff outlined the next steps, which will include work around continued exploration of further Trust options for accommodation and refurbishment works, as well as continuing to build on and establish good partnership working with Local Agency groups.

Members welcomed the extremely challenging presentation made by both staff and young people. It was suggested, that improvements to the physical environment including the need for more artwork could be explored through the route of Trust Charitable Funds. Mr McCafferty acknowledged this and advised previous improvement works have been undertaken at Dromalane House, through Endowments & Gifts funding and welcomed the positive impact for the benefit of both service users and staff. Mr Wilkinson emphasised the importance of engaging assistance from political representatives. Both Mr O'Dowd and Mr McNulty welcomed the powerful presentation. Mr O'Dowd stated that there are a number policy changes that need made in regards to Social Housing however, he encouraged the Young People as service users to continue to make their voices heard with Policy Holders.

Mr McNulty asked, What is the timeframe by which a child must receive an intervention once they get an assessment and diagnosis of Autism and is the Southern Trust meeting the timeframe? The Chief Executive

advised a response to Mr McNulty's question would be provided following the meeting via the Corporate Communications Team.

In conclusion, the Chair commended the Young People for sharing so clearly in an open and honest way and stated they were a credit to themselves and their staff. The Chair recognised there was much work to do in order to ensure improvements are implemented in the areas outlined.

2. CHAIR'S WELCOME AND APOLOGIES

The Chair welcomed everyone to the hybrid meeting of the Board and began by recording congratulations to Mrs C Reid on her appointment as Director of Surgery and Clinical Services and Ms E Wilson, recently appointed as Director of Performance and Reform and stated she looked forward to Ms Wilson commencing post in the near future. The Chair thanked Ms A McCorry, Director of Pharmacy for deputising for Mrs T Reid on this occasion.

At this point, the Chair particularly welcomed four members of Trust staff from the Medical 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.

3. 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.

4. CHAIR'S REMARKS

The Chair acknowledged the continuing pressures across services since the last meeting. She formally put on record her appreciation to the workforce for their ongoing support to ensure safe, quality services are delivered to the Southern Trust population on a daily basis.

The Urology public enquiry remains ongoing and working at pace alongside the work in the Trust to bring improvements to services. The Chair advised she has asked that Trust Board receive an update on

these improvements at a future meeting which she envisaged being June 2023.

Action – Mrs C Reid

The Chair acknowledged the openness and honesty Trust staff, members of the Senior Leadership Team (SLT) and Board members have delivered and given at the public hearing since the last meeting.

Continuing, the Chair referred to the challenges regarding the budget for Northern Ireland, stating health will not be immune from the impact of such pressures and other services will also feel the impact on the health and wellbeing of the population including areas such as, housing, education and jobs. She alluded to the importance of housing and jobs, articulated earlier in the meeting by the Young People and stated that the DoH recently issued a budget briefing, which detailed the challenges ahead for them in delivering efficiency initiatives, implementing savings cuts and establishing areas of medium term income generation. She emphasised that for health transformation to take place, it is essential to have a 3-year Budget and Capital Plan in place to resource and support investment in staff, services and the estate. The Chair concluded her remarks by referring to the next scheduled meeting of Trust Board on 25th May 2023 when the Southern Trust Financial Plan for 2023/24 will be an agenda item and stated that she hoped the Trust would have received its budget allocation at that stage.

5. CHIEF EXECUTIVE UPDATE

The Chief Executive provided a comprehensive update on a number of current issues and at the outset, she acknowledged the recent BBC spotlight broadcast involving a patient death in Bluestone Psychiatric Unit at Craigavon Area Hospital (CAH) in June 2020, putting on record the Trust's condolences to the Boyle family. The death is subject to investigations by the Coroner and PSNI, both of which the Trust is fully engaging with.

The Chief Executive alluded to concerns around the provision of Stroke Services at Daisy Hill Hospital (DHH) due to unintended staff shortages and advised the Trust is working to resume normal services from the hospital week commencing 4th April 2023. Members noted, the public consultation on Emergency General Surgery (EGS) for the area remains open until 21 April 2023.

The Public services provided by Northern Ireland Executive departments face cuts in the new financial year of at least £500m (of which DoH is approximately £300m) in the new financial year. The Chief Executive emphasised the extremely difficult outlook, with Trust's expected to deliver more services with less resources.

Ms Donaghy asked would the Trust be in a position to lift the divert currently in place and resume normal Stroke services at DHH by the intended timeframe of the end of March 2023. She also asked for clarity around why the Department of Health NI has said that without having a Budget it was unable to produce the Stroke Workforce report following the review of the health workforce. In responding, the Chief Executive stated that due to budgetary shortages she would envisage a number of such projects being stalled due to the comprehensive investment required to bring about change. In relation to DHH, the Chief Executive emphasised that Stroke services could not run safely with just one Doctor and stated by the 16 April, the Trust would envisage being in a stronger position with the return to work of staff who will assist in providing a robust service.

At this point, the Chair invited Mr McNulty to speak. Firstly, he acknowledged the impact the patient death in Bluestone Psychiatric Unit at CAH would have had on Trust staff and also the impact on the deceased's family. He went on to ask questions in relation to i) the withdrawal of EGS from DHH and ii) Maternity services and strike action and how this would tie in with the ongoing dispute with more senior midwives in the Trust in relation to the block booking system. Mr McNulty went on to ask for an update in relation to when the Trust would envisage a full return to services at DHH. In responding, the Chief Executive advised the Trust continues to work towards having a normal Stroke service reinstated by 16th April 2023. In regards EGS, she reminded Mr McNulty the outcome of the Consultation is still awaited and she would not wish to pre-empt a decision. Finally, in relation to Obstetrics and Gynaecology (O&G) and the provision of services, managerial and clinical staff have been heavily involved in terms of planning for the impact of industrial action, regardless of how staff are employed.

6. MINUTES OF MEETING HELD ON 26TH JANUARY 2023

The minutes of the meeting held on 26th January 2023 were agreed as an accurate record.

The Board approved the minutes of the meeting held on 26th January 2023.

7. MATTERS ARISING

Members noted the progress updates from the relevant Directors to issues raised at the previous meeting.

DoH Code of Conduct and Code of Accountability for Board Members of HSC Bodies, October 2022

The Chair advised this will be an agenda item for discussed at the next Remuneration Committee meeting in May 2023.

Stroke Services Update

The Chair alluded to the significant challenges within this service and stated an update will be provided at the next meeting scheduled to take place on 25th May 2023.

Action – Mrs T Reid

STRATEGY

8. SUMMARY OF CAPITAL & REVENUE PROPOSALS IN EXCESS OF £300,000 (ST1137/23)

Mrs Leeman presented the above named report which provides a summary of 19 proposals with a capital/revenue value greater than £300,000 that have been developed between the period 1st January 2023 – 31st March 2023. Members considered the finer detail and noted all the proposals have been approved via the Strategic Investment Committee internal approval process prior to funding being committed.

Mrs McCartan recorded thanks to both the Trust Corporate Planning and Finance Teams, recognising the busy year of activity completed. She also commended the 100% green compliance on the 2020/21 DoH test drilling exercise of economic appraisals and PPEs. Mrs McCartan referred to the Newry CTCC Strategic Outline Case and asked about funding to cover £4.7m for the purchase of the site and design. Mrs Leeman reminded members it has been the intention of the Trust to purchase the site for some time. A business case to purchase the site and design has been prepared for the DoH and once recognised as a

committed capital scheme, funding will commence thereafter. Mrs McCartan asked about timescales to which Mrs Leeman advised that subject to contract and the resolution of a small number of issues, she envisaged arrangements would be confirmed soon. Ms Donaghy welcomed the movement on the proposal for a Rapid Diagnostic Centre (RDC) at South Tyrone Hospital (STH) and Mrs Leeman provided a brief update on progress to date.

In conclusion, the Chair welcomed all the proposals detailed within the report and asked Mrs Leeman to take back Trust Board appreciation for the complex work completed by all the teams involved.

The Board approved the Summary of Capital & Revenue Proposals in Excess of £300,000 (ST1137/23)

9. INPATIENT DEMENTIA SERVICES CONSULTATION OUTCOME REPORT

At the outset, Ms McGall reminded members that due to significant staffing recruitment and retention challenges in relation to Consultant Psychiatrists of Old Age, it was necessary to review Inpatient Dementia service provision. The report presented to Trust Board for approval, is the final stage in the public consultation process. The Trust undertook a formal public consultation process from 3rd October 2022 until 23rd December 2022, proposing the creation of an Inpatient Dementia unit at the Bluestone Mental Health unit. Plans were put in place to ensure as full and effective an engagement process as possible. Members noted that 24 individual responses to the consultation document were received, the majority of which, were in agreement to create bespoke treatment on site. Ms McGall advised, Trust Board is asked to consider the recommended way forward for the future delivery of dementia inpatient services with the creation of an Inpatient Dementia unit at the Bluestone Mental Health unit.

At this point, Mrs Leeman stated it was important to understand that due to the absence of a Health Minister in Northern Ireland, the outcome of the Trust Board decision will be shared with both the DoH and the Strategic Planning & Performance Group (SPPG) for agreement on the proposed way forward. Mrs Leeman pointed out the proposed development of a dedicated dementia inpatient unit will improve the quality of care and provide accommodation which is an appropriate environment for the care of people with dementia. Members considered the key strengths of the proposal as outlined within the paper.

Mr McDonald pointed out the paper talks about the recommendation from the Royal College of Psychiatrists for 9 WTE Consultant Psychiatrists of Old Age and asked if the Trust had the current funded position of 5 WTEs in place. Ms McGall advised the Trust currently has 2 permanent staff in place along with 1 locum in the Community. She assured members the Trust continues to seek to recruit Psychiatrists of Old Age however, in the two most recent campaigns no appointments were made and she added this scenario was not unique to the Southern Trust. Whilst recognising the workforce challenges, Mr Wilkinson asked if there were additional challenges in moving across from the St Luke's site to the Bluestone unit. In responding, Ms McGall stated financing the project would require significantly more capital investment than had been previously intended. Day to day challenges due to the interim contingency arrangements also present pressure points, however she emphasised the move was the right thing to do clinically and added, some reorganisation work has taken place to make the project one of the Trust's Capital priorities for the year ahead.

Mrs McCartan asked how long the interim contingency arrangements will be in place given the current challenges. Ms McGall advised contingency plans will stay in place until further Psychiatrists of Old Age have been secured, however by way of reassurance she advised there was good support from the wider mental health family as a result of the co-location which would not be the case if the ward was in Armagh, leaving both patients and staff extremely vulnerable. Mrs Leeman assured members the Trust has alerted the DoH to the need for Capital for this scheme, subject to the determination on the outcome. Depending on the Capital allocation for the financial year 2023/24 consideration will be given to putting an interim scheme in place subject to a larger funding allocation being made available. Mrs McCartan recorded her support for the proposal subject to a DoH/SPPG review.

The Chair invited Mr J O'Dowd, MLA Sinn Fein to speak. He asked firstly in relation to recruitment issues, what are the barriers to people coming forward for posts. Secondly, if we cannot recruit staff, what is the next profession to go to in terms of providing care for elderly people with Dementia? In responding, Ms McGall reiterated there were insufficient numbers of Psychiatrists of Old Age, trained or in training across NI as a result of a lack of training places for Psychiatry. In regards alternative professions, Ms McGall emphasised the importance of Consultant Psychiatrists working as part of the multi-disciplinary team. She assured members the Trust continues to work hard to attract clinical staff for an

aging population and also promoting the Southern Trust to trainees as a great place to work. Ms McGall emphasised the need to influence training places and grow the workforce to make it more sustainable going forward. She concluded, the matter is likely to remain an issue for several years.

The Chair invited Mr Carl Hughes to speak and whilst he understood the drivers for relocation to the Bluestone unit, he asked how sustainable the interim arrangement was for the Bluestone unit as a whole. Ms McGall stated that the interim arrangement is more sustainable than was previously at the Gills unit and added she was confident the Trust application for funding will be looked upon favourably.

In concluding the item, the Chair asked members to indicate if they were happy to approve the recommendation as presented by Ms McGall, subject to final approval by the DoH and SPPG.

The Board approved the recommended way forward for the future delivery of dementia inpatient services with the creation of an Inpatient Dementia unit at the Bluestone Mental Health unit.

At this point, the Chair requested Items 21 and 6 be taken next on the agenda to allow Mrs McCartan and the Chief Executive to leave for other diary commitments.

21. AUDIT COMMITTEE

– Committee Chair Report from 6th March 2023

Mrs McCartan presented her Committee Chair Report from the meeting held on 6th March 2023. She advised that there were a number of key areas discussed including, seven IA reports issued to the Trust with varying levels of assurance. The Committee approved the IA Strategy and IA plan covering a 3-year period and the External Audit Strategy for 2022/23 was also presented at the meeting.

– Minutes of meeting held on 13th October 2022

Mrs McCartan presented the above named minutes of the Audit Committee meeting for information purposes.

– Committee Terms of Reference (ST1144/23)

Mrs McCartan presented the revised Committee Terms of Reference for approval.

The Board approved the Audit Committee Terms of Reference (ST1144/23)

16. TRUST CORPORATE RISK REGISTER (ST1140/23)

The Chief Executive presented the Trust Corporate Risk register for approval. Members noted that the document currently includes 34 risks spread across seven key risk domains with 1 graded as low, 7 medium, 22 high and 4 extreme. Members considered the key actions planned by the SLT to manage these risks.

Members noted the Corporate Risk Register remains a dynamic document and to ensure focused and effective management of risks, it is reviewed on a monthly basis by the SLT and quarterly by the Governance Committee, at which deep dives into specific risks are undertaken. Following the development of a new format during 2022/23 to more clearly map risk, control and assurance, a process of risk review was carried out. A number of risks were merged and others de-escalated. The Chief Executive alluded to the pressures on the Trust in challenging these risks in a timely manner, particularly in the current climate of staff shortages, budgetary pressure and the ongoing Public Inquiry.

Mr McDonald advised that Ms Donaghy and himself, had recently undertaken Cyber training and he was assured that the content of the training fed into the Trust CRR. Following a comment from Mrs McCartan, the Chair referred to the forthcoming Board Workshop, the focus of which was to be Risk Appetite. She emphasised the importance of this work in light of the current budgetary challenges, particularly in relation to how the Organisation continues to deliver services in line with the 2023/24 funding allocation.

The Board approved the Trust Corporate Risk Register (ST1140/23)

CULTURE

10. SHSCT SERVICE USER INVOLVEMENT & CONSULTATION SCHEME (ST1138/23)

Mr Beattie presented for approval, the revised SHSCT Involvement and Consultation Scheme, in line with Sections 19 and 20 of the Health and Social Care (Reform) Act (Northern Ireland) 2009. Members noted the

document replaces the previous Trust Involvement and Consultation Scheme, last updated in November 2018.

Mr Beattie stated the document would be an important contribution to business across the Trust and how the Organisation engages with staff, service users and others. Members noted the document has been updated and revised in line with regional directions based on a standard template and Mr Beattie advised that Trusts have been asked to submit their revised Involvement and Consultation Scheme for Board approval by March. Following this, the Public Health Agency (PHA) will coordinate a regional consultation on all HSC Involvement and Consultation Schemes. Mr Beattie explained that the objective of the exercise is to develop a streamlined, standardised commitment scheme, which can then be appropriately adopted as a Trust document, having been tailored appropriately to reflect local structures and processes for Personal and Public Involvement. Members noted the revised document reflects the progress made under the Working Together Strategy 2022-25, to further embed effective involvement to inform improvements across the Trust through the creation of the new Directorate Care Experience Hubs.

Mr Beattie added that Trust PPI and Planning Leads are continuing to share learning to enhance practice on an ongoing basis and support meaningful engagement at all levels of the Organisation. The PHA have agreed to coordinate a single consultation exercise on all HSC consultation schemes so that again, any feedback and learning from this exercise can inform and shape the final approved Trust schemes.

Mr Wilkinson welcomed the work to date and asked if the Trust was involved in shaping the PHA document, adding he looked forward to seeing how it will be integrated into the 'Working Together' framework. He stated that for some time the Patient and Client Experience Committee, of which he is Chair, has been waiting for an update on the assessment tool the PHA use to measure ourselves against the 5 criteria and stated he hoped that the document under review today was an indication work is progressing in this area. Mr Wilkinson welcomed the document as a positive step forward and whilst long awaited, emphasised the momentum must be built upon, adding he hoped it would not form an impediment to how the Trust deliver Personal and Public Involvement (PPI). In responding, Mr Beattie confirmed the Trust had been involved in the consultation scheme. Whilst he acknowledged the process had been long, spanning from 2019-2022, he welcomed the regional template and work to date as positive, and added that each Trust has the ability to localise the document. Mr Beattie emphasised,

the Trust has a strong commitment to PPI, leading the way in many areas and assured members this work has been included within the Southern Trust's template to be submitted to the DoH. Mr Beattie assured members he envisaged that following the PHA single consultation exercise on all HSC consultation schemes an outcome would be swift to all Trusts to inform and shape their final approved schemes.

The Board approved the SHSCT Service User Involvement & Consultation Scheme (ST1138/23)

11. MEDICAL DIRECTOR REPORT

Dr Austin presented the Medical Director's Report, which outlines the purpose of Medical Appraisal and Revalidation, and provides an assurance to Trust Board on the implementation of the GMC regulations in relation to Medical Appraisal and Revalidation. Members noted the areas of achievement. In relation to the current position of activity, Dr Austin reported that since 1st September 2022, there has been a substantial improvement in the appraisal completion rate, increasing from 33.5% to 82%. For the minority of doctors have still to complete their 2021 appraisals, Divisional Medical Directors are engaging with this cohort. Dr Austin advised that early indications are that the 2022 appraisal process is moving well with improved performance to date.

Discussion ensued and members asked a number of questions regarding the robustness of the appraisal process to which Dr Austin provided comprehensive responses.

In terms of Revalidation, members noted that for the period March 2021 to February 2023, there were 288 doctors due for revalidation of which 217 revalidated. The number deferred due to insufficient information was 64. Mr McDonald asked if revalidation could be described as providing checks and balances to the appraisal process. In responding, Dr Austin said the revalidation process takes cognisance of the appraisal process however it covers a boarder holistic approach encompassing aspects including, the review of incidents/complaints/litigation over a 5 year period, patient colleague feedback and takes account of all practice whether NHS or outside. Dr Austin referred to earlier discussion around the second sign off phase and assured members robust processes are in place in terms of auditing, quality improvement and mandatory training support. Ms Donaghy asked what controls are in place to tackle those doctors who do not engage in the appraisal process. In his response, Dr

Austin outlined the step-by-step approach taken by the Trust which could result in i) recommendation being made to the General Medical Council (GMC) to remove licence of practice or ii) through a contractual route to disciplinary procedure stage. Dr Austin assured members doctors reminded of the Medical and Appraisal Assurance Framework at the commencement of each appraisal year.

Ms Donaghy continued, asking if the pilot project for an electronic change of status form detailed on page 8 of the report, is designed to control the transfer of private patients to the National Health Service (NHS) queue. Dr Austin advised this was not the case. He pointed out, patients have free choice to revert to NHS, however he emphasised it was important they are in the same priority on the waiting list as a NHS patient. He said work continues in this area to ensure the system is as robust as possible.

The Chair invited Mr M Brady, MLA Sinn Fein, to speak and he referred to a recent meeting held at the Canal Court, Newry when the Trust shared their aim to get the Elective Hub up and running in 6 months at Daisy Hill Hospital (DHH) and asked for confirmation that this remains the intention. Dr Austin stated the current plan remains to work towards progressing the project to the 6-month timescale. The Chair and Chief Executive both concurred.

The Chair invited Mr J McNulty, MLA SDLP to speak. At the outset he welcomed the report provided by Dr Austin and recognised the enormity of the remit for which he held responsibility. He asked if Dr Austin had any concerns about current staff challenges within DHH medicine and to what extent he attributed the departures of Senior Clinicians to the instability caused by the withdrawal of Emergency General Surgery at DHH and the implications in terms of risk and assess to acute surgery on the site for Consultants. Furthermore, he asked 'What the outcome was likely to be of failure to recruit further consultants and senior clinicians to replace those who have departed?' In responding, Dr Austin said the recruitment of medical staff for general medicine at DHH is unrelated to the emergency general surgery consultation and service change in that area. He provided assurance that the Trust continues to actively recruit and promote DHH as an excellent hospital and great place to work and stated the Trust has invested heavily in DHH and undertaken a lot of work with medical professionals in Northern Ireland and abroad. As regards trying to stabilise services, we are currently looking at Trust wide solutions to support this and have engaged with medical staff across the Trust in order to support this further. Mr McNulty asked did this include

an outreach model to which Dr Austin stated this included partnership working across the Trust.

In concluding discussion the Chair referred to the current staffing challenges within the Medical Appraisal and Revalidation workforce to which Dr Austin advised a number of new staff were in the process of joining the team which was encouraging.

12. EXECUTIVE DIRECTOR OF NURSING, MIDWIFERY AND AHP'S REPORT

Mrs Trouton presented the above named report which provides an overview of the extensive work undertaken by Nurses and Midwives across all areas of care in the Trust and the work of the Corporate Team. There is also an update from the Chief AHP Information officer for the Trust on the work ongoing to implement Encompass in the Trust. In particular, Mrs Trouton referred to the good work being undertaken as part of the Safety and Quality Board (SQB) pilot. She also highlighted the importance of the Queens University Practice Supervisor Awards and the Nursing Times Award recognising the hard work and dedication of both staff and students.

Members asked a number of questions including whether early learning would be available following the go live for Encompass on 9 November 2023 at the South Eastern Trust. Mrs Trouton referred to the 'Paid forward, paid back' scheme and explained that a significant number of staff from the Southern Trust will be assisting South Eastern with their roll out. In due course, the knowledge they have gained will be utilised in the further roll out projects. She welcomed the good colligate working between Trusts to date.

13. PROGRESS REPORT ON OUR PEOPLE FRAMEWORK 2022-2025 AND ASSOCIATED HEALTH AND WELLBEING (HWB) FRAMEWORK

Mrs Toal presented a progress report on 'Our People Framework 2022 – 2025 and associated Health and Wellbeing Framework', focusing on the challenges and achievements of the first year April 2022 – March 2023. She reminded members progress reports align to the Organisations 3 People Priorities; Wellbeing, Belonging and Growing.

Mrs Toal stated that 92% of the actions set out in the HWB Framework Year 1 Action Plan are either complete or nearing completion, with the remaining 8% of the actions deferred to 2023/24 due to budget

constraints or vacancies. By way of achievements, she referred in particular to the approval of two new Band 7 Senior Organisational Development Practitioners, on an invest to save basis and welcomed the interest there had been in the two posts. Members also noted the positive initiatives including the ongoing 'Thank you Thursday' campaign and the HSC Graduate Trainee Scheme roadshows to increase awareness. Mrs Toal stated that areas for concern include, disruption to the progression of the framework, as a result of the ongoing industrial action and challenges around communicating and raising awareness of the strategy to ensure it penetrates through to the entire workforce. Mrs Toal alluded to some feedback she had received from a newly appointed manager, who had no awareness of the priorities within the Strategy document. In light of this, Mrs Toal asked her SLT colleagues to further improve and embed the framework throughout their Directorates and assist in promotion and awareness raising. She advised printed copies of the framework were available and urged both SLT and Non-Executive Director colleagues to use the tool to raise awareness when undertaking their Leadership Walks.

Moving forward, Mrs Toal emphasised the importance of developing Year 2 Actions in order to encourage, motivate and build momentum. She stated it was important to develop growth through creating the right culture and highlighted a number of key focus areas. She went on to state the Trust must gather evidence that demonstrates outcomes, to enable the Trust to show the impact the work to date is having.

At this point Mr McCafferty and Mrs Leeman reflected on the work being undertaken across their Directorates in terms of key drivers to support the delivery of 'Our People Framework'. Whilst Mr McCafferty very much welcomed the strategy, he alluded to the challenges of trying to maintain it has a priority for managers in the current challenging environment of staff deficits and Industrial action. He referred to the challenge of ensuring every manager is aware of the Framework and stated further promotion work was required in this area. Mrs Leeman said that embedding it within her Directorate has been about trying to take small steps and make implementing the framework feel like business as usual rather than an extra. She referred to the importance of HWB for staff and promoting time away from the screen has been very important. Another key element for the Performance and Reform Directorate, has been looking at the areas of identity and belonging and how staff within a non-uniform part of the Organisation view their role.

The Chief Executive welcomed the good progress to date and emphasised the importance of working towards the next phase and drawing on Trust Values to further develop a change in culture. Mr Wilkinson spoke about the value of allocating time to promotion and awareness raising, particularly aimed at frontline staff who do not feel they have time for 'time out' and emphasised the importance of taking every opportunity to communicate and embed the message.

Dr Austin said he would encourage staff to take a 'What the People Strategy means for me' approach and look for ways to make the framework practical to each job role. Mrs Toal welcomed this and asked Dr Austin to consider trialling the approach with Divisional Medical Directors.

Mr McDonald welcomed the work already embedded at the end of Year 1 and the clear milestones demonstrated within the report. Ms Rogers concurred and pointed out that whilst staff may not necessarily know about the 'Our People Framework', they will be aware of a change, however, they may not be linking initiatives like, Thank you Thursday, Chat with the Chief and Leadership Walks back to the framework. Ms Rogers stated that the Communications team would pick this up as part of their work with awareness raising.

Mr McNulty welcomed the important work to date. He stated Trust Values should be embedded within the culture and it was critical to build in time to protect staff.

In concluding discussion, the Chair welcomed the feedback from staff referred to by Mrs Toal and stated the information was an opportunity to do things differently. She recorded thanks to Mrs Toal for her comprehensive and informative update.

ACCOUNTABILITY

14. UPDATE ON TRUST SERVICE DELIVERY PLAN

Mrs Leeman presented the Trust Service Delivery Plan. She advised that the report provides an update on the progress against the performance trajectories set out in the 2022/23 Service Delivery Plan with the primary focus on returning to pre-pandemic service provision by March 2023.

Members considered appendix 1, which provides detailed performance for each area, including the pre-pandemic level of activity for the comparable month, the target set, activity delivered and the level of performance achieved. Mrs Leeman pointed out the Strategic Planning and Performance Group (SPPG) of the Department of Health (DoH) apply an overall RAG rating for individual Trusts based on the percentage of metrics recorded as red. Members noted that for February 2023 the Southern Trust had 61% of metrics recorded as red. Whilst this was an improving position compared to 65% in January 2023, the Southern Trust has the highest percentage in the Region. She stated the performance reflected some of the local challenges facing the Trust and referred in particular Cancer performance targets.

Mrs Leeman updated members on a number of areas showing improvement including: Child protection, Endoscopy, CT imaging and Cardiac Echocardiography, along with both the 31 and 62 day pathway.

Mrs Leeman continued and asked members to note the areas of concern, risk and challenge, advising that in relation to the 14-day Breast Assessment Service, activity decreased in February 2023 with 80 less patients assessed. By way of reassurance, Mrs Leeson advised that regional support is ongoing with South Eastern and Western Trusts accepting some 25 referrals per week from the Southern Trust. She added this is an agreed process of balancing demands to ensure all patients are seen on time. In relation to Allied Health Professionals, Mrs Leeman advised a regional piece of work is underway, in which all Trusts have participated, looking at reasons why targets are not being achieved. She advised the outcome of this work, will be presented to the Performance Transformation and Executive Board in due course. Average Length of Stay (ALOS) remains largely unchanged in CAH and DHH at 8 days although this has increased from the pre-pandemic position with patients generally staying longer in the acute hospital phase of their care. Work is being progressed in this area to identify contributors to an increased length, reset and improve the system and change the thinking culture of staff in terms of patient discharge. In concluding, Mrs Leeson stated actions are ongoing in the areas challenged, however she did not envisage an improvement will be reported in the short term.

Discussion ensued, Mr Wilkinson asked about for clarity on i) Family Assessments and ii) Domiciliary Care Hours not currently being utilised. Mr McCafferty and Mr Beattie provided comprehensive updates on their areas respectively. Ms Donaghy welcomed the action plan in place to

improve capacity within the paediatric dental service and asked if the issues were due to a shortage of dentists. Mrs Leeman advised that the outpatient side of the service is performing very well, however paediatric surgery is struggling. Mr McCafferty advised capacity has not recovered to pre-covid levels due to staffing challenges.

In concluding discussion, Mrs Trouton stated it was important to take stock of current processes and seek areas for refinement. She emphasised the Trust had recruited a substantial number of International Nurses and Theatre Nurses and will continue to build on this work further. Whilst challenges remain, Mrs Trouton stated she was confident progress can be achieved on the areas detailed within the report.

15. FINANCIAL PERFORMANCE REPORT (ST1139/23)

Ms Teggart presented a comprehensive Finance Report for approval, advising that for the 11 months ending 28th February 2023, the Trust reported a deficit of £2.6m. She reminded members that earlier in the financial year it was reported that the Trust was anticipating achieving a break-even position by year-end. However, due to the increase in the payroll spend profile and the increase in flexible costs in month 9 and 10, along with a number of other contributing factors, the Trust moved to predict an overspend of c£2.7m at year-end.

By way of progress, Ms Teggart stated it was important to note that due to the downturn in Agency spend and Critical Shift Payments (CSP) in February 2023, along with the expectation that there will be a further reduction by year-end, the Organisation is now predicting a deficit of c£2m. Whilst progress was welcomed, Ms Teggart emphasised the Trust must continue urgent action to reduce costs over Month 12 with particular focus on reducing discretionary spend and making further agency cost reductions through the nurse utilisation review. She stated that alongside this work, discussions are ongoing with SPPG about any remaining deficit and she advised that the SPPG/DoH have just approved additional deficit funding of £2m to enable the Trust to close year-end at a break-even position. Whilst concerning, Ms Teggart stated the report was reflective of the ongoing challenges and the necessity to implement the cessation of Off-Contract agencies.

At the end of February 2023, the Capital Resource Budget available to the Trust was c£33m. Ms Teggart advised that the Organisation would envisage full spend by the close of year-end and this is subject to

continual scrutiny. Ms Teggart stated the Trust was moving towards ending the financial year 2022/23 with an overall allocation of £905m.

In terms of planning for the new financial period 2023/24, Ms Teggart advised work has commenced and is anticipated to remain extremely challenging with difficult decisions to come. Ms Teggart said she hoped to be in a position to present a Financial Plan for 2023/24 to the Trust Board in May 2023, once the DoH released a draft allocation. Regionally there is a recognition of the difficult year ahead. Ms Teggart assured members work is ongoing at both a regional and local level, in terms of driving forward efficiency savings and added she would report the outcomes from the Agency Reduction Group as part of the financial sustainability review in due course.

In advance of questions from Board members, the Chair asked what the saving had been in Month 11 in regards agency spend. Ms Teggart reported a reduction of £360k and said it was hoped to build on this in Month 12 through nurse utilisation work. She also referred to a global correspondence being issued to staff informing them of the new arrangements in terms of the significant reduction of Off-Contract agency positions which was hoped would encourage staff back to permanent posts. The Chair commended the progress achieved in Month 11 and emphasised the importance of building on these efficiency savings moving forward.

Mr Wilkinson asked Ms Teggart if she envisaged service reductions occurring as part of projected efficiency savings for the 2023/24 financial year. In response, Ms Teggart stated that there had been no indication from the DoH regards a reduction in services. She stated that, at this point in time, savings were being sought by the DoH through agency reduction work and following the implementation of the new contract it was envisaged this would drive down off contract agency spend both locally and regionally. Alongside this, Ms Teggart stated the Trust would look at securing further efficiencies through its discretionary spend and areas including wastage, procurement and contract management.

Mr McDonald asked what the variance was in percentage terms between off contract and contract spend. Ms Teggart advised that off contract agency was 30% more expensive when compared to contract spend. Mr McDonald referred to the £2m overspend predicted for year end 2022/23 and asked if the DoH was likely to ask the Trust to claw back the deficit. Ms Teggart stated the deficit would be covered under DoH controls.

Mrs Trouton referenced the stabilisation project alluded to earlier in discussion and pointed out that improving safety and quality in the first instance including, stabilising the workforce, reducing the number of agency staff on wards, along with the recruitment of 133 International Nurses will bring tangible financial benefits moving forward in the coming year.

In concluding, members recognised the importance of collaborative working across the SLT and Trust Board to ensure the Organisation continues to function within the constraints of the 2023/24 budget in order to deliver high quality safe care across the Southern locality.

The Board approved the Financial Performance Report (ST1139/23)

17. TRUST BOARD SCHEME OF DELEGATION TO COMMITTEES (ST1141/23)

The Chair presented the above named document and reminded members that in line with good governance practice, the Board is required to annually approve a Scheme of Delegation to its Committees.

Members noted, the Trust Board is currently supported by six Committees to which it has delegated specific powers as outlined within the document, these Committees continue to meet both on a face to face and virtual basis to discharge their assigned business thus enabling effective corporate governance arrangements to be maintained.

The Board approved the Application of the Trust Board Scheme of Delegation to Committees (ST1145/23)

18. GOVERNANCE COMMITTEE

- **Committee Chair Report from 12th January 2023**
Mr McDonald presented his Committee Chair Report from the meeting held on 12th January 2023. He referred to a number of key areas of discussion including, a presentation on Obstetrics and Gynae and alluded to the recognition of risk within the speciality and referred to the significant value of claims.
- **Minutes of meeting held on 8th September 2022**
Mr McDonald presented the minutes of the Governance Committee meeting for information purposes.
- **Committee Work Plan 2023 (ST1142/23)**

Mr McDonald presented the Committee Work Plan 2023 for approval.

The Board approved the Governance Committee Work Plan 2023 (ST1142/23)

19. ENDOWMENTS & GIFTS COMMITTEE

– Committee Chair Report from 30th January 2023

Ms Donaghy presented her Committee Chair Report from the meeting held on 30th January 2023. She stated that the key area of focus continues to be on Expenditure and particularly utilising historical funds in advance of CCNI registration. Ms Donaghy also provided a brief outline of some areas of expenditure being taken forward under the umbrella of the 'Staff Support Fund'.

– Minutes of meeting held on 3rd October 2022

Ms Donaghy presented the minutes of the Endowments & Gifts Committee meeting for information purposes.

– Committee Terms of Reference (ST1143/23)

Ms Donaghy presented the revised Committee Terms of Reference for approval.

The Board approved the Endowments & Gifts Committee Terms of Reference (ST1143/23)

20. PERFORMANCE COMMITTEE

– Committee Chair Report from 2nd March 2023

On behalf of Ms Leeson, Ms Donaghy presented the Committee Chair Report from the meeting held on 2nd March 2023 and highlighted a number of key areas of discussion.

– Minutes of meeting held on 1st December 2022

Ms Donaghy presented the minutes of the Endowments & Gifts Committee meeting for information purposes.

21. PATIENT & CLIENT EXPERIENCE COMMITTEE

– Committee Chair Report from 9th March 2023

Mr Wilkinson presented his Committee Chair Report from the meeting held on 9th March 2023. He stated the key areas of discussion included the need for a new Corporate PPI plan as well

as a revised Carer's Action Plan. Mr Wilkinson also drew attention to concerns within the Bereavement Team in relation to the availability of funding to allow staff to continue carrying out these vital roles and members also noted Mr Wilkinson's remarks regarding the Health Care Analysis Toal (HCAT) report.

Mr McDonald commended the good work undertaken by the Bereavement Team, which he was aware of following a recent leadership walk. He acknowledged staff concerns regarding contracts and stated that the issues needed addressed. In relation to the HCAT report, Mr McDonald suggested he would discuss the issues further with Mr Wilkinson after the meeting.

– **Minutes of meeting held on 8th December 2022**

Mr Wilkinson presented the minutes of the Patient & Client Experience Committee meeting for information purposes.

OTHER MATTERS

23. APPLICATION OF TRUST SEAL (ST1145/23)

Ms Teggart 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 (ST1145/23)

24. CHAIR AND CHIEF EXECUTIVE'S BUSINESS AND VISITS INCLUDING NON-EXECUTIVE DIRECTOR'S BUSINESS AND VISITS

The Chair drew members' attention to the written report detailing events she, along with the Chief Executive had attended since the previous meeting, together with details of some good news stories and innovative work across the Trust. A list of Non-Executive Directors' business and visits was also noted.

25. ANY OTHER BUSINESS

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

Trust Staff and attendees were given an opportunity to provide feedback at the end of the meeting which the Chair welcomed as helpful.

In concluding, the Chair recorded thanks to everyone for their participation and advised the next meeting would take place on Thursday, 25th May 2023 at 10.30 a.m.

The meeting concluded at 2.40 p.m.

SIGNED: _____

DATED: _____