

**Minutes of the Trust Board Meeting
held on 2 July 2020 at 9.00 am
via Microsoft TEAMS (due to COVID-19 guidance)**

Present

Mr Peter McNaney	Chairman
Dr Cathy Jack	Chief Executive
Professor Martin Bradley	Non-Executive Director – Vice-Chairman
Mr Gordon Smyth	Non-Executive Director
Professor David Jones	Non-Executive Director
Mrs Miriam Karp,	Non-Executive Director
Ms Anne O'Reilly	Non-Executive Director
Mrs Nuala McKeagney	Non-Executive Director
Dr Patrick Loughran	Non-Executive Director
Miss Brenda Creaney	Director Nursing and User Experience
Mrs Carol Diffin	Director Social Work/Children's Community Services
Mrs Maureen Edwards	Director Finance, Estates and Capital Development

In Attendance:

Dr Brian Armstrong	Interim Director Unscheduled and Acute Care
Mr Aidan Dawson	Director Specialist Hospitals and Women's Health
Mrs Jacqui Kennedy	Director Human Resources/Organisational Development
Mrs Caroline Leonard	Director Surgery and Specialist Services
Mrs Bernie Owens	Director Neurosciences and Radiology
Mrs Charlene Stoops	Director Performance, Planning and Informatics
Ms Gillian Traub	Interim Director Adult and Primary Care
Dr Stephen Austin	Deputy Medical Director (<i>on behalf of Mr Hagan</i>)
Ms Claire Cairns	Head of Office of Chief Executive
Mrs Bronagh Dalzell	Head of Communications
Mr Wesley Emmett	Management Consultant - Observing
Miss Marion Moffett	Minute Taker

Apologies

Mr Chris Hagan	Interim Medical Director
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QUESTIONS SUBMITTED BY Stanford Smith

Mr McNaney said due to Government Covid-19 guidance it is not possible to accommodate the public by physical attendance at meeting. However, anyone wishing to address the Board on an agenda item can forward details in writing, which will be noted by Trust Board and followed up with a written response.

Mr McNaney read the following questions from Mr Stanford Smith:

1. Who was in overall charge of discharging patients to care home during Covid-19?
2. With having regards to article 2 of the human rights act "Right to Life" why did the Belfast Trust discharge any patient with Covid-19 or suspected Covid19 to a care home?
3. What guidance or process did the board give to medical staff on the discharge of patients with Covid-19 or suspected Covid-19 to a care homes?
4. What clinical ethics guidance was given to staff to prioritise ventilators during Covid-19?
5. On what date was the board made aware that inspections of care homes by RQIA housing trust patients was to reduced or stopped during Covid19 ?
6. In relation to reduction or cessation of inspections by RQIA into care homes during Covid-19, what actions did the trust take to ensure the safety of their patients under article 2 of the human rights act "Right to Life"?
7. Any correspondence between the Trust, RQIA and the DoH relating to any concerns the Trust had with reduction or cessation of inspections by RQIA into care homes during Covid-19?

Members noted the submission and Dr Jack advised that the points raised were being followed up and undertook to provide a written response to Mr Smith, a copy of which will be shared with Trust Board members.

28/20 Minutes of Previous Meeting

The minutes of the previous meeting held on 7 May 2020, were considered and approved, subject to Mrs Leonard's apology being noted.

29/20 Matters Arising

No items raised.

30/20 Chairman's Business

a. Conflict of Interest

There were no conflicts of interest reported.

b. Arms Length Body (ALB) Governance Self-Assessment 2019/20

Members noted the ALB Governance Self-Assessment 2019/20 report.

31/20 Chief Executive's Report

a. COVID-19

Dr Jack presented an update in relation to Covid-19, with a reduced number of cases. The care and nursing homes are currently reporting green. The Nightingale Hospital has been stood down with the Belfast City Hospital reassigned as a green site. There is continued focus on urgent and emergency surgical work which had not been carried out during Covid.

Dr Jones commended Dr Jack and staff for the management of the Covid surge.

Members noted the update report.

b. Muckamore Abbey Hospital

Ms Traub presented an update report in respect of Muckamore Abbey Hospital (MAH). There are currently 49 inpatients of which 3 are on extended home leave at the request of their families. One patient is on a trial settlement. The resettlement planning for patients had been paused due to Covid-19. Discussions are underway with providers in respect of restarting in-reach, which will be a phased approach and implemented in line with Infection Prevention Control advice.

Ms Traub advised current nurse staffing levels currently provided a safe level of care. There are 59 members of nursing staff precautionary suspended, of which 29 are registrants, and 30 are non-registrants. Of these 59 staff, 39 are substantive members of staff. To date 7 have been arrested by PSNI.

The Leadership and Governance Review, commissioned by the DoH is ongoing with the outcome report due by the end of July 2020.

In relation to Covid-19, there had been no further patients tested positive since the outbreak was stood down on 12 May 2020. No staff have tested positive for Covid-19 in the past 5 weeks.

Mrs Diffin provided an update report in respect of the historical CCTV viewing.

Members noted the position.

c. Neurology Review

Mrs Owens advised there was nothing further to report in respect of the Neurology Review since the previous meeting.

d. IHRD

Members noted that the DoH had paused IHRD work due to Covid.

e. Infected Blood Inquiry

Mrs Leonard advised the Trust continues to respond to further Rule 9 requests.

Members noted the Inquiry has recently confirmed the reinstatement of oral hearings in early Autumn 2020.

32/20 Safety and Quality

a. Performance Report

Dr Jack explained that Ms Stoops would be presenting a revised format for the performance report explained this would be part of the new Quality Management System (QMS) being developed.

Ms Stoops gave a presentation on the Review of Management of Information, which had considered how data is used to effectively inform decision-making, planning and delivery of services in line with the Trust vision of Right Care, Right Place, Right Time. She outlined learning from Covid and the development of daily Sitrep reporting used by the Executive Team in decision making and inform the “Charles Vincent” Daily Safety Huddles.

Ms Stoops outlined new processes which are being established to support decision making across the organisation and providing assurance to Trust Board in respect of quality and performance. Consideration is being given to replacing existing groups and reports through the new QMS Framework.

Mrs McKeagney commended the work and development of the new QMS, emphasised the importance of data to inform decision making, and noted that such a system would support improvement across the organisation.

Professor Bradley supported the federated approach to provide an overall conscience of the organisation. He also welcomed the working with partners to support work alongside the Trust to improve the wider HSC agenda.

Dr Jack referred to external stakeholders and a piece of work ongoing to look at a network heat map to align specific Directors and Non Executives and stated a report will be brought back to Trust Board for consideration in due course.

Ms O'Reilly welcomed the new QMS and the linkage with external stakeholders.

Mr McNaney commended the QMS work to date, which will strength governance across the organisation and support strategic decision making.

Mrs Stoops presented the management report and stated the new format is in the early stages of development She explained the intention is to provide more update information. The report provides an overview of the current

position in regards to: Key Safety Metrics; Patient Experience; Urgent and Emergency Care; Elective - Time-Critical Surgery and Cancer Services; Diagnostics; Outpatients; Community Care for the Vulnerable: Older People, Learning Disability, Mental Health, Children's Services; Workforce and Finance (including Covid spend).

Members noted the Performance Report setting out an overview of performance against the Trust Delivery Plan for 2019-20 as at year end 31 March 2020 and further noted the year end report for 31 March 2020 providing an overview of performance against the Trust Delivery Plan for 2019/20.

Mr McNaney welcomed the detail provided in respect of Trust priorities and the real time, real data provided.

Mr Smyth congratulated Ms Stoops and the team involved in the development of the QMS report and said it would be useful to include action plans for areas to monitor progress. Ms Stoops undertook to follow this up.

Dr Loughran welcomed the 100% "neck of femur" performance reported and expressed the wish that this could be maintained in the best interests of patients. He also referred to the need to capitalise on learning from Covid and closer working relations with primary care to address the waiting list issues.

Ms Stoops advised that Dr McCloskey is undertaking a piece of work to capture learning from Covid from staff and patients/services users and the Outpatient Modernisation project is also focusing on how processes can be changed to support these new ways of working. She further advised a new Trust Primary Care Partnership group has been established which is currently meeting weekly and GPs are nominating representatives to sit on a range of groups.

In response to a comment from Ms O'Reilly, Ms Stoops advised that as part of the stakeholder work it is intended that population health indicators would be included in the QMS reports.

Dr Jack referred to the key current priorities and said it is important that the Trust focus on these over the next year and where there are issues action is taken to have them addressed.

Mr McNaney agreed with the need to focus on key priorities and emphasised the importance of Trust Board seeing progress against them.

b. Annual Progress Report to the Equality Commission

Ms Stoops presented the Annual Progress Report to the Equality Commission NI for the period 2019/20. She pointed out the report provided assurance to the Trust's fulfilment of the dual statutory Section 75 duties and was completed in line with the Equality Commissions template. The report

outlined good practice initiatives implemented by the Trust. She drew attention to the Board Members guidance section of the report and highlighted details of equality screening carried out within 159 service areas during 2019/20,

Ms O'Reilly commented the report. She referred to the rebuilding plans and the DoH indication that due to unusual circumstances equality impact screening will not be undertaken and the potential for differential impact on people with disability and ethnic groups. She highlighted the need for close monitoring of the situation and mitigation to be in place for these groups.

Following a comment from Professor Bradley, Ms Stoops undertook to ensure the report was published on the Trust website.

Members approved the Annual Progress Report for submission to the Equality Commission.

33/20 Resources

a. Draft Financial Plan 2020/21

Mrs Edwards presented the draft Financial Plan for 2020/21, detailing the overall assessment of the Trust's anticipated financial position for 2020/21. At this point of the year, the Trust anticipates a deficit of circa £17.8m. However, it is important to note that the financial situation is considerably more uncertain this year than in previous years due to the COVID-19 pandemic. She highlighted the following key assumptions made by the Trust in its plan, which have been shared verbally with DoH:

- All expenditure associated with the Trust's response to COVID-19 is fully funded
- Any underspends resulting from a reduction in activity/service due to COVID-19 will be used in the first instance to reduce the Trust's underlying deficit- these will not be used to offset COVID-19 expenditure
- The costs of rebuilding/recovery, including IS waiting list work and regional elective care initiatives, will be separately funded in full
- Income for 2020/21 investments or service expansion, specifically high cost drugs and cases, which would otherwise have been allocated in the absence of COVID-19 will be provided by HSCB, and the ensuing slippage will be used to reduce the Trust's underlying deficit

The Trust's anticipated deficit is likely to reduce if the impact of COVID-9 extends beyond the period assumed (largely end of July) and will therefore be regularly reviewed. In the event that the deficit is not fully addressed, the Trust will have to consider how breakeven might be achieved. At this stage, the Trust has not identified savings against the new £22.4m target other than £3.9m drugs savings to meet the regional pharmacy savings target.

There are a number of risks inherent in the draft financial plan, the most notable being the assumption that DOH will have sufficient funding to meet all

COVID-19 costs in 2020. In relation to capital there is currently no funding for COVID capital spend.

Mrs Edwards advised that discussions are continuing with the DoH in relation to the financial plan.

Mr McNaney commented on the need for the Regional Management Board to take the lead on any service impact measures in respect of savings so that an integrated regional approach can be taken to savings and their impact.

b. Finance Report

Mrs Edwards advised that as the DoH and HSCB had not issued an income budget allocation in time there was no month 2 report. However, the Trust had undertaken an expenditure report, which is in line with expectations.

Members noted the position.

c. Charitable Trust Fund Application

Mrs Edwards sought approval for a Charitable Trust Fund application in respect of 3 staff salaries for a 2 year period to deliver the Trust Carers Strategy.

Mrs McKeagney advised that application had been considered and supported by the Charitable Trust Funds Committee.

Members approved the applications.

34/20 Audit Committee Minutes

Mr Smyth presented the minutes of the Audit Committee meeting held on 21 April 2020 for information.

Members noted the minutes.

35/20 Social Care Committee Minutes

Ms O'Reilly presented the minutes of the Social Care Committee meetings i.e. Children's Services of 23 October 2019 and Adult, Social and Primary Care held on 14 May 2019.

Members noted the content of the minutes.

Ms O'Reilly advised that due to industrial action and Covid planned meetings had been postponed. However, two workshops had been held on implications of Covid.

36/20 Any Other Business

No items raised.

37/20 Date of Next Meeting

Members noted the next meeting was scheduled to be held at 10.30am on 1 October 2020.