

**Minutes of the Trust Board Meeting
Held on 7 February 2019 at 10.30 am
in the Boardroom, Belfast City Hospital**

Present

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

IN ATTENDANCE:

Mr Aidan Dawson	Director Specialist Hospitals and Women's Health
Mrs Marie Heaney	Director Adult, Social and Primary Care
Mrs Caroline Leonard	Director of Surgery and Specialist Services
Mrs Jacqui Kennedy	Director Human Resources/ Organisational Development
Mrs Bernie Owens	Director Unscheduled and Acute Care
Mrs Jennifer Thompson	Director Performance, Planning and Informatics (Interim)
Ms Claire Cairns	Head of Office of Chief Executive
Mrs Bronagh Dalzell	Head of Communications
Professor Ian Young	Deputy Medical Director Research + Development
Ms Alison Murphy	Research Manager
Mrs Elizabeth Keown	Boardroom Apprentice
Mr James McGleenan	Haematology Patient
Mr Conal McGleenan	Patient's Father
Ms Nichola McCrea	Haematology Lead
Ms Annmarie Kearney	Senior Biomedical Scientist

Apologies

Mr Gordon Smyth	Non-Executive Director
Mrs Nuala McKeagney	Non-Executive Director

Mr McNaney welcomed everyone to the meeting.

Service User Story – Harvey’s Gang – Laboratories and Pharmacy

Mrs Leonard introduced James McGleenan a 12-year-old haematology patient, accompanied by his father Conal, Nichola McCrea, Haematology Lead and Annmarie Kearney, Senior Biomedical Scientist.

Ms McCrea and Ms Kearney explained that in 2013 the Haematology and Blood Transfusion Laboratory (HBTL) at Worthing Hospital, Western Sussex NHS Trust, (WSHT) was contacted about showing a young boy around the department. The young boy was 7 year old Harvey Baldwin, who had been diagnosed with Acute Myeloid Leukaemia. Harvey was curious to see where his blood went when it was tested, why it needed to be done so many times, and how it would help the hospital staff to decide what blood he needed as part of his treatment. Malcolm Robinson, Blood Transfusion Manager, WSHT, facilitated Harvey’s tour of the HBTL.

Sadly, Harvey passed away and when Malcolm attended his funeral, he realised the huge impact the tour had on Harvey’s life and he had the idea for Harvey’s Gang. Malcolm’s aim was to get young children with cancer and other illnesses to become “Trainee Biomedical Scientists” for the day and tour pathology laboratories with their families. Harvey’s, simple request became the start of what has become an international PBM initiative to increase the involvement and knowledge of patients and their families in the laboratory aspects of their transfusion treatment.

Ms Kearney advised that James and his father Conal had been the first to undertake the Harvey’s Gang tour in BHSCT.

James explained that he had found the visit to the coagulation laboratory very interesting and had seen what happens to his blood samples and how the service helps him manage his condition. Conal commended the service and support James and his family received from the Haematology Service.

In response to a question from Professor Bradley, Conal said that he and his wife had received training, which empowered them to support James in leading as normal a life as possible. They enjoy good relationships with the Haematology Team and Conal emphasised his appreciation to the on-going support James receives.

Members expressed their thanks to James for attending Trust Board and wished him well for the future.

01/19 Minutes of Previous Meeting

The minutes of the previous meeting held on 6 December, 2019 were considered and approved.

02/19 Matters Arising

a. Adoption Services Annual Report 2017/18 (Min 51/18c)

In response to a comment from Ms O’Reilly, Mrs Diffin undertook to include Adoption Services Service in a future Service User story.

03/19 Chairman's Business

a. Conflicts of Interest

There were no conflicts of interests reported.

b. Safety Quality Visits – Non Executive Feedback

Members noted a report of a Safety Quality Visit undertaken by Mr Smyth on 5 December 2018 to PICU, RBHSC, accompanied by Mrs Kennedy.

Mrs Kennedy advised that there had been clear evidence of effective leadership and learning, however, there were workforce pressures with a number of vacant medical posts. The issue of repatriation of patients was also noted.

Professor Bradley referred to RBHSC being a regional centre and the importance of appropriate medical staff and repatriation.

Mr Dawson advised that in addition to staff taking maternity leave there are ongoing issues with recruitment and staff are kept fully apprised of the position.

c. Live Governance Reports

Professor Bradley and Dr Loughran referred to the recent introduction of sharing Live Governance reports with Non Executives and emphasised the need for some context to be included to assurance that process are in place to ensure appropriate action is being taken.

Mr McNaney said it was important for Non Executive Directors' to receive live information; however, it needed to be included within the assurance process.

Following discussion it was agreed provision of Live Governance reports would continue and consideration would be given to how concerns raised by Non Executives can be addressed going forward.

Dr Jack proposed that a presentation should be given at a future Trust Board workshop on Professor Charles Vincent's (IHI Oxford) 5 elements of managing and monitoring safety.

04/19 Chief Executive

a. Emerging Issues

Nothing to report.

b. Review Updates

i. Neurology

Mr Dillon provided an update in relation to the Neurology Patient Call Back, 99.9% of the 2529 patients have been followed up, with an appointment booked for 1 remaining patient, and 3 patients overseas will make an appointment when they return to Northern Ireland. There are 20 patients to have a review appointment after their diagnostic test and 959 patients have been discharged. There are 1410 patients requiring ongoing review within the core neurology service.

In relation to the 412 patients re-referred by GPs, 99.9% have been followed up, with 1 remaining having an appointment booked, 51.1% of the patients reviews have a confirmed discharge.

Mr Dillon referred to the 1000 discharged patients (700 BHSCT, 300 Ulster Independent Clinic) 96% have been followed up.

In relation to the RQIA Review of Governance in Out-patient Departments, Mr Dillon advised the report is awaited.

Members noted the RQIA Review of Deaths team had been established.

It was noted that the Independent Inquiry panel had held individual meetings with Mr McNaney and Mr Dillon on 15 January to provide an update on the process to date and the plans for the ongoing inquiry. The Inquiry had updated MLAs on 22 January 2019.

Mr Dillon advised the Trust was progressing an investigation within the MHPS framework.

Members noted the position.

ii. IHRD

Mr Dillon advised the Group considering the cases of doctors named and criticised in the IHRD report had reviewed the results of preliminary inquiries and closed a number cases, and also concluded that a number should proceed to formal investigation. Dr Jack and Mr Dawson met with doctors proceeding to formal investigation to advise them of this and explain why. Doctors that were closed were also advised.

Members noted that Dr Jack, Mr Dawson and Mrs Kennedy had met with the PSNI to discuss the Trust's position in regard to investigations proceeding, PSNI advised that they see no reason for the Trust not to proceed to formal investigations.

Mr Dillon advised the HSC liaison group had also met and advised DoH Workstreams were progressing well, an event will be held in May 2019 to bring all Workstreams together to share progress to date.

Members noted the DoH will visit the Trust Oversight lead to discuss progress and update on Workstreams in the near future.

iii. Muckamore Abbey Hospital

Mr Dillon provided an update in relation to Muckamore Abbey Hospital (MAH), a summary and easy read version of the SAI report had been produced and an action plan was being populated. He advised staffing continued to be closely scrutinised by the Director Oversight Group. The situation is monitored daily and a regional contingency plan is being developed.

The Director Oversight Group continued to meet regularly to provide a structure to focus co-ordination of a number of workstreams arising from the Review of MAH.

Mrs Heaney referred to the historical CCTV viewing and advised an estimated 80% has been completed for PICU. A scrutiny meeting is scheduled to examine the evidence for completion of total footage.

Mrs Heaney advised that Trust/PSNI fortnightly meetings have been established since early 2019 to ensure effective communication. The majority of the preparatory work for the disciplinary investigations has been completed. A timetabled project plan has been developed to monitor progress. A family carer's engagement meeting has been scheduled for the 18 February, facilitated by Margaret Flynn. The Chairman, Chief Executive and Non-Executive are also scheduled to participate in this meeting.

Mrs Heaney reported that a weekly MAH multi-disciplinary Live Governance meeting had commenced, with support from Mr Chris Hagan, Deputy Medical Director.

Members noted a further MLA briefing is scheduled for 13 February 2019 to provide an update. An external communication plan has been developed which will be updated regularly, to provide a timeline of media interest and communication events.

Mrs Heaney provided assurance that MAH patients were receiving safe, compassionate care.

Members noted the position.

05/19 Safety and Quality

a. Research and Development (R+D) Update

Mr McNaney welcomed Professor Young and Ms Murphy to the meeting.

Professor Young advised that BHSCT is one of the most research active Trusts in the UK, and the only Northern Ireland (NI) member of AUKUH. BHSCT hosts the regional clinical research infrastructure for NI and works closely with other organisations. He pointed out that BHSCT research improves patient care and outcomes in NI and has international impact. He advised there were currently approximately 700 ongoing studies.

Professor Young gave a presentation outlining the significant R+D developments, including the review of regional infrastructure, replacement of controls assurance, investment through charitable trust funds and Belfast City Deal.

Professor Jones acknowledged the importance of R+D in the future management of health care and commended the Belfast City Deal, which created opportunities for investment.

In response to a question from Mr McNaney, Professor Young advised that there are various process in relation to staff involvement in R+D i.e some consultants have it included as a PA or take on additional activity and some posts are back filled.

Dr Jack advised that a few years ago the R+D budget had been cut due to financial pressures and the need to increase productivity and achieve efficiency savings.

Professor Bradley asked if the Trust had an R+D Strategy.

Professor Young advised the Trust was aligned to the regional strategy, however a Trust strategy was being developed and would be presented to the Charitable Trust Funds Committee in the coming year.

Dr Jack recognised the immense amount of work undertaken within a small team and wished to record thanks to Ms Murphy and her team for ensuring governance around R+D studies.

Mr McNaney thanked Professor Young and Ms Murphy.

b. Performance Report

Mrs Thompson presented the Trust Performance report for the period April to December 2018 with Section A “Safety Quality and Experience” (SQE) providing an overview of performance in relation to a range of key safety, quality and experience indicators, and Section B “Service Delivery” providing an update of the performance against key DoH Commissioning Plan Direction (CPD) standards and targets.

Members noted the SQE dashboard for the period, detailing the overview of performance in respect of Mortality indicators, HCAs, Classic Safety Thermometer, Other Safety Thermometer, Medicines and Patient Experience.

Dr Jack referred to the Mortality Indicators and advised there were coding issues, which the DoH were aware of, these should be addressed in the near future.

Dr Loughran commended the Mortality performance, which provided significant assurance to Trust Board members.

Dr Jack outlined the governance arrangements in place in respect of M+Ms.

Mr Dillon suggested that Dr Little, Clinical Lead for Mortality and Morbidity, present to a future meeting.

Mrs Thompson advised that of the 19 CPD standards and targets, 10 were being delivered or substantially delivered and 9 were not currently being delivered. She pointed out the CPD standards/targets not being achieved were HCAI; Diagnostic Waiting Times; Outpatient Waiting Times; Inpatient and Day-case Waiting times; AHP Waiting Times and Complex Discharges. Of the 18 performance trajectories measured, 14 are being delivered or substantially delivered, with 4 not currently being delivered i.e. ED 4/12 hours RVH and MIH; Adult Mental Health waiting longer than 9 weeks to access services.

Miss Creaney referred to the concerning HCAI performance and advised a C.diff Prevalence Survey undertaken on 15 November 2018 across sites had identified a number of areas for improvement. The learning from this exercise had been shared at a recent Senior Leadership Group meeting with the emphasises on the need to ensure IPC procedures are strictly followed.

Miss Creaney further advised that due to a decline in performance within Fractures a QI initiative is being undertaken to review cleaning methods.

In response to comments from Dr Loughran and Professor Bradley, Miss Creaney advised the Trust performance in respect to Anti-microbial Stewardship had improved. She advised that a huge amount of work had been undertaken following the limited internal audit report including ward dashboard reports in respect of the use of antibiotics.

Members discussed the high usage of antibiotics, linked to HCAs, and the need for a regional approach to address this issue.

Following a comment from Mr McNaney, Miss Creaney advised that weekly HCAI reports were shared with the Divisional Management Teams.

Mrs Owens referred to the ED waiting time performance and advised that all Trusts had seen an increase in ED attendance, the Trust's Winter Plan had worked well over the Christmas period with less patients waiting over 12 hours and there had been an improvement in the discharge process. She advised the Emergency Care Village (ECV) was open on specific days and as additional staff are recruited this will allow extended opening and more services to come on stream, resulting in less congestion in ED.

Mr McNaney said he would welcome the opportunity to visit the ECV and Mrs Owens undertook to follow this up.

Mrs Owens advised that QI project was being undertaken with the EDs regarding ambulance triage and how to improve this process.

Mrs Thompson referred to the CAMHS and explained that reduced capacity, had been as a result of staff vacancies had impacted on performance.

Professor Bradley emphasised the need for additional investment in the CAMHS.

Mrs Thompson advised that there had been some investment in mental health via the TIG funding for psychology therapies.

Having considered the document in detail members approved the Performance Report.

06/19 Resources

a. Finance Report

Mrs Edwards presented the Finance Report for the period ending 31 December 2019, indicating a £124, deficit with a forecast £1.3m surplus. The Trust has reflected additional slippage on investment funding received in November, mainly relating to high cost drugs and elective access, beyond the amount of slippage anticipated at the time of the TDP and as such, the Trust is reporting a small surplus. However, it is expected the current earmarked pay award allocation will fall short of requirements and therefore the expectation is to be in a break-even position overall once this issue is resolved. As at December however, this income is partly offset by the non-achievement of savings, which will be recovered in the latter part of the year.

In relation to financial planning for 2019/20 Mrs Edwards advised the Trust's opening deficit, along with any known or expected pressures, has been shared with HSCB and DoH. The Trust is working with all other Trusts in order to agree a standardised approach to financial planning. A regional opening position will then be presented to HSCB and DoH.

In response to a comment from Ms O'Reilly, Mrs Edwards advised there is ongoing discussions with the HSCB/DoH regarding the need to decrease the over commitment of transformation funding within a feasible tolerance level.

Ms O'Reilly referred to the need for transformation investment to be outcome led, if schemes demonstrate good outcomes they should be appropriately funded to be embedded in practice. She also expressed concern at the potential impact on service users/patients of schemes are withdrawn.

Mr Dillon said if the transformation schemes demonstrate benefits it is anticipated they will be taken forward.

b. Property Asset Management Plan

Mrs Edwards presented the Property Asset Management Plan (PAMP) for 2018/19 – 2023/24, providing an update in respect of the Trust property portfolio of 87 properties, including seven major hospital sites. The Trust's stock of community properties included residential units, specialist centres, day centres, Wellbeing and Treatment Centres and health centres. She pointed out the combined asset value of the Trust estate is in excess of £1,065m as at 2017/18 annual accounts.

Following discussion members approved the PAMP.

c. Major Capital Projects – Update

Mrs Edwards provided an update on capital projects as follows:

- Acute Mental Health Unit – to be completed in Spring 2019
- Maternity Hospital – on programme
- Children's Hospital – in relation to the demolition of Bostock House, awarding of tender pending due to potential challenge from lowest bidder. The Trust and DLS have met with CPD regarding a number of issues including the pilot scoring mechanism that has been agreed by the Procurement Board, and the role and responsibilities of various parties under the NEC contract. The Trust continues to seek clarity on these issues to ensure that these are clearly defined prior to the project moving to tender and then to the construction stage
- Helipad – addendum for the helipad was approved in October and work has recommenced, anticipated that this will be complete by March 2019

Members noted the update.

07/19 Any Other Business

No items raised.

08/19 Date of Next Meeting

Members noted the next meeting was schedule for 10.00am on 4 April 2019.