

# **SOUTH EASTERN HEALTH AND SOCIAL CARE TRUST**

## **Minutes of the sixth meeting of the South Eastern Health & Social Care Trust Board held on Wednesday 17 October 2007 at 11.00 am in the Conference Room, Trinity Conference Centre, Lisburn**

**PRESENT:**

Mrs D Fitzsimons, Chairman  
Mr J Compton, Chief Executive  
Mr P Davidson, Non Executive Director  
Mr D Flanagan, Non Executive Director  
Ms F Graham, Non Executive Director  
Ms D Mann-Kler, Non Executive Director  
Mr D O'Hara, Non Executive Director  
Mr J Trethowan, Non Executive Director  
Mr P Cummings, Director of Finance & Estates  
Ms C McArdle, Director of Primary Care, Elderly & Executive  
Director of Nursing  
Mr C Martyn, Acting Medical Director  
Mrs K Thompson, Director of Children's Services &  
Executive Director of Social Work

**IN ATTENDANCE:**

Mr S McGoran, Director of Hospital Services  
Mr J Simpson, Director of Planning, Information &  
Performance Management  
Mr H McPoland, Acting Director of Human Resources &  
Corporate Affairs  
Mr D Bannon, Director of Adult Services  
Mrs B Mongan, Assistant Director: Adult Disability Services  
Miss I Low, Assistant Director: Risk Management &  
Governance  
Mrs S Hogg, Executive Support Services Manager  
Miss C Hughes, Personal Assistant

**APOLOGIES:**

Mr N Mansley, Non Executive Director  
Ms P McMillan, Chairman, Eastern Health and Social  
Services Council

### **OPENING REMARKS**

The **Chairman** welcomed all those present to the sixth meeting of the South Eastern Health & Social Care Trust Board, which was held in the Conference Room, Trinity Conference Centre.

## **75/07 CHAIRMAN'S BUSINESS**

### **(a) Staffing Issues**

The **Chairman** welcomed Mr Desmond Bannon to the meeting and congratulated him on his new appointment as Director of Adult Services. She informed members that Mr Eamonn Molloy, Director of Human Resources and Corporate Affairs would be in attendance at the November Board meeting following his return to work. On behalf of members of the Board, the **Chairman** thanked Mr McPoland, Acting Director of Human Resources and Mrs Mongan, Assistant Director, Adult Disability Services for their support to Trust Board during their 'acting up' tenure and commended them for their work during that period.

### **(b) Assembly Health Committee**

The **Chairman** advised that the Assembly Health Committee will be visiting the Trust on 25 October 2007. To date it is unclear how many members of the Committee will take part in the visit but a programme has been prepared. Non-Executive Directors were invited to join the Committee members for lunch at 12.15pm on 25 October 2007 in the Recreation Hall, College of Nursing, Ulster Hospital.

### **(c) Business conducted under the Confidential Section of the meeting**

The **Chairman** advised members of the public present that the Trust Board had met immediately prior to this meeting to discuss several items of confidential business.

## **76/07 MINUTES OF THE PREVIOUS MEETING**

The minutes of the previous meeting held on 19 September 2007, having been previously circulated, were taken as read and signed by the Chairman as a true and accurate record.

## **77/07 MATTERS ARISING FROM THE PREVIOUS MEETING**

### **(a) Update on the implementation of the transfer of lead responsibility for Prison Healthcare to the HPSS**

**Mr Compton** reported that the initial deadline of 1 October 2007 for the transfer of lead responsibility for prison healthcare had been postponed whilst discussions to resolve outstanding issues continue between the Northern Ireland Office (NIO) and the Department of Health Social Service and Public Safety (DHSSPS). The Trust, as the providing organisation, has been involved in discussions to help bring this matter to a satisfactory conclusion. He believes that when the two Departments resolve the outstanding difficulties the transfer of responsibility will take place immediately thereafter.

**78/07 REPORT FROM THE FINANCE COMMITTEE AND DRAFT TERMS OF REFERENCE**

Members received, for information and approval, Paper Numbers SET/46a/07 (minutes of the first meeting of the Finance Committee held on 4 October 2007) and SET/46b/07 (Finance Committee Terms of Reference), copies of which had been previously circulated with the papers for the meeting.

In presenting the papers, **Mr O'Hara** (Chairman of the Finance Committee) advised that the draft terms of reference which had been circulated was updated into the corporate format from the initial draft discussed at the meeting and therefore some of the numbering referred to in the minutes of the Finance Committee was no longer applicable. He then sought, and received, Trust Board approval to the terms of reference for the Finance Committee.

**Mr O'Hara** then briefly updated members on the discussions at the Finance Committee meeting held on 4 October 2007. He reassured members that the committee had detailed discussions on the financial position and these are outlined in the minutes presented today, for information purposes. He added that the layout of the finance reports would change format as the systems within the former legacy Trusts evolve.

**79/07 FINANCE REPORT FOR THE PERIOD ENDED 31 AUGUST 2007**

Members received, for information, Paper No. SET/41/07 detailing the Finance Report for the period ended 31 August 2007, a copy of which had been circulated with the papers for the meeting. In presenting his report, **Mr Cummings** said that the Trust's financial position at the end of August 2007 indicated a deficit of £994k which included:-

- £200k Access Targets expenditure;
- £75k New Maternity Unit opening;
- £75k Construction work in Care of the Elderly

However, he remained hopeful that non-recurrent income from the DHSSPS will be received which will result in a reduced deficit and achieve financial balance. **Mr Cummings** then highlighted some areas of concern and the action taken to address these issues ie: -

- Significant expenditure in Acute Services Goods & Services, particularly in relation to Medical Locums. Discussions have taken place with Mr McGoran in this regard and actions are in place to ensure that this problem is resolved before December 2007.
- Care Management targets presented problems across the province. This is clearly an issue requiring additional funding but, to date, no funds have been received.
- Infection Control targets in relation to hospital cleaning are creating an additional pressure on Facilities Management resources.

A brief discussion ensued on the financial report. **Mr Trethowan** enquired about the level of controls on budgets. In response, **Mr Cummings** advised that robust procedures are in place to ensure that staffing levels do not exceed budgets. **Mr Trethowan** also asked about the Public Dividend Capital (PDC) amount in the Finance report and **Mr Cummings** reported that this figure related to a change in procedures to Capital Charges.

**Mr Flanagan** stated that he considered that the information regarding the financial pressures facing the Trust needed to be brought to the attention of the general public, possibly through Members of the Local Assembly (MLAs). In reply, **Mr Compton** indicated that following the official announcement of funding for Northern Ireland he hoped to have meetings with MLAs to highlight financial concerns particularly in relation to 2008/2009.

## **80/07 PERFORMANCE MANAGEMENT: TRUST SCORECARD**

Members received, for information, Paper No: SET/42/07 detailing the Access Scorecard for the period to 30 September 2007, a copy of which had been circulated with the papers for the meeting.

During his presentation, **Mr Simpson** highlighted the successful achievement of standards within Outpatients, Diagnostic Testing Inpatients, Day Cases and Delayed Discharges for 50% of all complex discharges within 72 hours. However, there were two areas of concern namely: -

- 100% of all simple discharges within 12 hours. Currently performing at 98%
- No person should wait longer than 12 hours in Accident & Emergency : 4 people have exceeded this timeframe.

**Mr Simpson** detailed the targets to be achieved and confirmed that the Trust is on track to achieve these by the end of March 2008. However, he was concerned regarding two recently introduced targets ie: -

- The new target for Allied Health Professionals states that no patient should be waiting longer than 26 weeks for treatment, with this timescale reducing to 13 weeks by March 2008. Validation of waiting lists has taken place and this baseline will be used to assess trends next month.
- Fractures target of 75% of patients should, where clinically appropriate, wait no longer than 48 hours for inpatient treatment with this percentage increase to 98% by March 2009.

**Mr Simpson** highlighted the validation work being carried out in this regard and stated that an Implementation Group met on 12 October 2007 to agree investment of £1.8m to enhance and reshape fracture services. **Mr McGoran** highlighted that it would take time to recruit appropriate medical and professional staff in order for the benefits of the Fracture Implementation Plan to become apparent. In addition, there is a varied case-mix in this specialty and the type of cases presenting in a particular week can affect the performance targets.

Reference was then made to the Emergency Care Waiting Time target of no patient waiting longer than 12 hours. During September 2007, 4 patients exceeded this target. However, **Mr McGoran** stressed the level of hard work carried out by staff to achieve this standard of service and was confident that this progress will be sustained.

Concluding, **Mr Simpson** referred to the Delayed Discharge targets and stated these presented difficulties, mainly due to financial implications and capacity within the community. A Project Board, chaired by Mr Simpson, has recently been established to look at the medium to long-term actions required to achieve these targets.

During general discussion **Ms Graham** and **Mr Flanagan** commended the work of the all staff involved in achieving these targets and asked for their congratulations to be passed on to staff for their achievements.

In response to a query regarding readmission rates, **Mr Simpson** confirmed that these are tracked by CHKS monitoring and the Trust is within normal parameters. **Mr Compton** reminded the Board that CHKS has rated the Trust among the top 40 hospitals within the United Kingdom.

**81/07 PAPER ON OPTIONS FOR THE DELIVERY OF HIGH QUALITY INPATIENT MENTAL HEALTH SERVICES WITHIN THE SOUTH EASTERN HEALTH AND SOCIAL CARE TRUST**

Members received, for approval, Paper No SET/43/07 detailing the Trust's response to the draft Commissioning Statement on Future Provision of Acute Psychiatric Inpatient Beds in the EHSSB area, a copy of which had been circulated with the papers for the meeting. The Chairman then invited Mr Bannon to give a short presentation on the content of the paper.

At the outset, **Mr Bannon** reminded members that the EHSSB's Draft Commissioning Statement had been published prior to the merger of two legacy Trusts. At the time the paper was written there were six Acute Psychiatric Units across the Eastern Board area with the view of reducing this number to four without any reduction in bed numbers. In relation to this Trust, it would mean a reduction from three to two units. Members noted that the Bamford Review had indicated that admission to hospital should be a "last resort" and that there should be appropriate crisis response systems available. **Mr Bannon** stressed that the response had been compiled following extensive consultation with Trust staff, users, carers and various voluntary organisations, taking into account the wider context of Mental Health Services and facilities resulting in additional options for consideration.

**Ms Graham** indicated her interest in this area of work and stressed that accessibility is very important. She enquired if patients/relatives know how to access the outreach and community care services without going through their GP. In response, **Mr Bannon** indicated that it is preferable for patients to be referred to the Mental Health Services by General Practitioners as they have vital knowledge of the patient's current condition and previous history. He accepted Ms Graham's point about accessibility and confirmed that this issue had formed part of the consultation exercise.

**Mr Flanagan** enquired if the resource consequences had been quantified. In response **Mr Compton** advised that whilst funding had not yet been confirmed, the area of mental health is a priority for the Minister and the issue will be debated with the EHSSB as the commissioner of services.

**Mr Trethowan** referred to the growing area of senile dementia and enquired if there is to be an expansion of services for these patients. In reply, **Mr Bannon** indicated that ideally these patients, following diagnosis, should be treated at home or in a nursing home as close as possible to their home with access to a range of diagnostic equipment and high-level medical expertise. **Mr Simpson** commented on the development of the Department of Psychiatry at the Lagan Valley Hospital in terms of service capacity provision and that the building will continue to be used following the move to the Ulster Hospital.

Following discussion, members approved submission of the Trust's response to the Draft Commissioning Statement on the Future Provision of Acute Psychiatric In-patient Beds in the EH&SSB area.

**82/07 NEW TRUST POLICIES ON GRIEVANCE AND DISCIPLINARY PROCEDURES**

Members received, for information, Paper Numbers SET/44a/07 (Grievance Procedure) and SET/44b/07 (Disciplinary Procedures), copies of which had been circulated with the papers for the meeting.

In presenting the papers, **Mr McPoland** reported that both these documents had been discussed with the Trade Unions and had been duly ratified. During general discussion, **Ms Graham** noted that both procedures relate to all staff within the Trust and was pleased to note that the Grievance Procedure takes account of the Industrial Tribunal 2005 legislation.

Following discussion, the **Chairman** sought and received approval to the new Grievance and Disciplinary Procedures for the South Eastern Health & Social Care Trust.

**83/07 REPORT FROM THE GOVERNANCE COMMITTEE HELD ON 26 SEPTEMBER 2007**

Members received, for information Paper No. SET/45/07, which detailed a brief summary of the issues discussed at the first Governance Committee meeting, held on 26 September 2007. The paper also made reference to a revised document outlining the terms of reference for the Governance Committee, which required approval by the Board.

The Chairman advised that unfortunately, the terms of reference document had been inadvertently omitted from the Board papers. However, the members of the committee (who were also present at the meeting today) had previously approved the content of this document for submission to the Board. It was agreed that a copy of the revised terms of reference would be circulated post today's meeting.

In presenting the paper, **Mr Compton** advised that the terms of reference detailed the constitution, membership, authority, remit and operational arrangements for the meetings. He also briefly referred to the establishment of the Risk Management and Safe & Effective Care committees, which would support the Governance Committee and the linkages with the Financial Audit Committee to ensure the delivery of the integrated governance agenda.

Following discussion, the **Chairman** sought, and received, Trust Board approval to the terms of reference for the Governance Committee.

#### **84/07 LAUNCH OF THE CHAIRMAN'S CHARITY - KIWOKO, UGANDA**

The **Chairman** briefly recalled previous fixed term charitable events, which she had supported in the former Down & Lisburn legacy Trust. The staff had shown great support for the charities involved and the ventures had been very successful.

Recently, the **Chairman** said she had met with Dr Wilson a former General Practitioner from Bangor, Dr Taylor, Ulster Hospital, Ms C Martin, Public Relations and Mr McPoland to discuss the former Ulster Community & Hospitals Trust involvement with the Kiwoko project in Uganda. She highlighted some of the main areas of work carried out by the Hospital and indicated that she had a book and a video on the project if anyone wished to seek further information. The **Chairman** suggested ways of offering to support the Kiwoko project, especially in the run up to Christmas, for example instead of Christmas cards a donation is given and an e-mail is issued instead of cards. Other ways of fundraising were also discussed.

Following a brief discussion, the Chairman sought and received Trust Board support for the Kiwoko Project.

#### **85/07 INFECTION REDUCTION PLAN 2007-2008**

Members received, for information, Paper No. SET/47/07 – Infection Reduction Plan 2007 - 2008, which had been circulated with the papers for the meeting. **Ms McArdle** advised that this Infection Reduction Plan is the June 2007 report updated as at October 2007. She focused on five key areas where there has been a change in status:

- **Item 1.2. Infection Reduction Plan** - this item has progressed from amber to green. The Infection Reduction Plan is now included on the agenda for Trust Board, EMT, Directorate Governance and more than 50% of relevant management meetings;
- **Item 3.2. Monitoring of Hygiene Compliance** - this item has progressed from white to amber due to the increase in validation of hand washing audits which are now on the increase;
- **Item 4.1. Reduced Rates of Infection MRSA (10%) and Clostridium Difficile (20%)** - this item has remained white because the target has just recently been set. Work is underway in this regard;

- **Item 7.2. Training** - this item has progressed from red to amber due to the increase in staff training available since the secondment of two nurses to the Infection Control Team. The target is expected to move to green within the next six months; and
- **Item 8.5. Environmental Cleanliness** - this item remains static at red but the reason for this is more to do with the fabric of the buildings rather than a lack of cleaning.

In response to a query from Mr Trethowan, **Ms McArdle** confirmed that reports on the Infection Reduction Plan and the Infection Control Rates would be updated and presented to the Board on a bi-monthly basis. In addition **Mr Simpson** advised that the Scorecard presented by his Department would also contain this information in due course.

**Mr Trethowan** enquired if adequate information is given to patients and visitors with regard to hygiene practices to prevent the spread of infection. In response, **Ms McArdle** advised that visitors are encouraged to wash their hands when visiting hospital, not to visit if they are unwell and not to bring young children with colds into hospital. Unfortunately, with regard to patients, many can have MRSA in their system but it is not until they become a patient that the illness makes itself apparent. It can also be related to antibiotic usage although this is primarily responsible for Clostridium Difficile.

**86/07 ROLES AND RESPONSIBILITIES OF DIRECTORS FOR THE CARE AND PROTECTION OF CHILDREN**

Members received, for information, Paper No. SET/48/07 received from Mr Frew, Child & Community Care Directorate, DHSSPS in relation to the Role and Responsibilities of Directors for the Care and Protection of Children (Circular CC3/02 refers). **Mrs Thompson** confirmed that the content of this circular would be addressed in the forthcoming Children's Services Workshop which would be held after the November 2007 Trust Board meeting.

**87/07 UNALLOCATED CHILD CARE CASES AT 30 SEPTEMBER 2007**

Members received, for information, Paper No. SET/49/07 which detailed the Unallocated Children's Cases within the South Eastern Trust as at 28 September 2007. **Mrs Thomson** advised if anyone had queries on the content of this paper that they should contact her directly.

**88/07 ANNUAL REPORT OF REGIONAL SUPPLIES SERVICES TO THE SOUTH EASTERN HEALTH & SOCIAL CARE TRUST**

Members received, for information, Paper No. SET/50/07 detailing the 2006/07 Annual Report of the Regional Supplies Service in relation to work provided to the South Eastern Trust. In presenting the paper, **Mr Cummings** briefly outlined the role and function of the Regional Supplies Service and how it provides a full procurement and supply chain for the Trust.

**89/07 ANY OTHER BUSINESS**

(a) **Annual Report and Accounts of Trust Funds in relation to the former Ulster Community & Hospitals Trust and Down Lisburn Trust for the year ended 31 March 2007**

**Mr Cummings** circulated the two reports as detailed above and apologised that they had not been circulated with the papers for the meeting but the delay related to the completion of the audit.

In presenting the paper, **Mr Cummings** advised that Trust Funds are donations from the general public. The initial capital amount is retained and the interest provided by its investment, together with any additional capital amounts, are used on an annual basis for the benefit of patients.

**Mr Cummings** stated that at the end of March 2007 the Ulster Community & Hospitals Trust had a balance of £4.8m and had utilised £0.5m during the year. The Down & Lisburn Trust had a balance of £1.8m and £170k was used during the 2006/07 year.

The Trust Board formally approved the two Annual Reports and Accounts the latter of which was duly signed by the Chief Executive and Director of Finance.

(b) **Opening of the new Maternity Unit, Ulster Hospital**

The **Chairman** reminded members that the formal opening of the new Maternity Unit at the Ulster Hospital will take place on Wednesday 24 October 2007. She encouraged as many members to attend as possible.

**74/07 DATE AND VENUE OF NEXT MEETING**

The **Chairman** advised that the next scheduled meeting of the Trust Board would be held on **Wednesday 21 November 2007 at 11.00am in Dufferin A, Downshire Hospital.**

The meeting ended

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Date: \_\_\_\_\_

**Mrs Denise Fitzsimons  
Chairman**