

WESTERN HEALTH & SOCIAL CARE TRUST

Minutes of a meeting of the Western Health & Social Care Trust Board Held on Thursday, 6 September 2007 at 2.15 pm in the Denis Desmond Room, Trust Headquarters

PRESENT

Mr G Guckian, Chairman
Mrs E Way, Chief Executive

Mrs S Cummings, Non-Executive Director
Mrs J Doherty, Non-Executive Director
Mrs S O’Kane, Non-Executive Director
Mr N Birthistle, Non-Executive Director
Mr K Mulgrew, Non-Executive Director
Mr B McCarthy, Non-Executive Director
Mrs B Stuart, Non-Executive Director

Mr J Lusby, Deputy Chief Executive/Director of Planning &
Performance Management
Mr A Corry Finn, Director of Primary Care & Older People’s
Services/Executive Director of Nursing
Mrs M Kelly, Director of Acute Services
Dr A Kilgallen, Medical Director
Mr T Millar, Director of Adult Mental Health & Disability
Services
Mr J Doherty, Director of Women’s and Children’s
Services/Executive Director of Social Work
Ms N Sheerin, Director of Human Resources
Mrs L Mitchell, Director of Finance, ICT & Contracting

IN ATTENDANCE

Mr O Kelly, Head of Communications
Mrs M McGinley, Office Manager

5/07/1

CHAIRMAN’S BUSINESS

The Chairman welcomed members to Trust Headquarters and referred to a report of Chairman’s Business. Issues included:-

- The Chairman began by thanking all staff involved in organising the workshop on Developing Better Services held prior to the Trust Board meeting. He said members would agree that it was invaluable to hear and to have the opportunity to discuss the detailed plans for the new hospitals in the South West and for Altnagelvin Hospital site. The Chairman reminded members of a second workshop which had been organised for 11 September.
- The Chairman advised members that he was considering how the Board may use a workshop format to facilitate discussion on important issues such as corporate objectives,

risk management priorities and public participation. He said that as a first step he would like the Board to take the opportunity prior to October Trust Board to discuss the development of the Trust's corporate objectives. The Chairman asked Mrs McGinley to make the appropriate arrangements.

- The Chairman referred to previous discussion at a former Altnagelvin Trust Board meeting regarding collaboration with the University of Ulster and Derry City Council to develop an Academic, Business, Clinical Research and Innovation Facility based on the Altnagelvin Hospital site. The Chairman said that this development is strategically important in that it will help the Trust to attract high calibre clinicians who wish to undertake research. The Chairman said that work is progressing well and that a presentation on this important development will be made to members at the next meeting.
- Members were advised that Dr Deeny, MLA, has been invited to join the South West Local Commissioning Group. The Chairman highlighted that the Trust would look forward to working with Dr Deeny in this role.
- On 30 August the Trust was delighted to welcome Mr Bernard Ribeiro, President of the Royal College of Surgeons. The Chairman advised that the President had the opportunity to meet surgeons from across the Trust's area and to hear some of the specific challenges that the Trust faces as it reshapes surgical services in line with the Developing Better Services strategy. The Chairman advised that he had the opportunity to discuss with the President the need for the Trust to adhere to national standards both in terms of clinical standards and individual competence.
- The Chairman briefed members on the issues discussed at a Chairs' Forum meeting held on 4 September.
- In concluding his report the Chairman referred to recent media coverage on the large number of recent road accidents in County Fermanagh. The Chairman said that he had been briefed about the response of Trust staff and said that he wished to place on record the Trust Board's appreciation for their sterling efforts. The Chairman also acknowledged the response of the Northern Ireland Ambulance Service and the Royal Victoria Hospital as the receiving hospital for the most seriously injured.

5/07/2

CHIEF EXECUTIVE'S UPDATE

Mrs Way updated members on 2 issues:-

Trust Delivery Plan

Mrs Way advised that on 22 August she received a letter from Mr Dean Sullivan, Director of Planning and Performance Department of Health, Social Services and Public Safety regarding the Trust's delivery plan. Mr Sullivan advised that the Department had approved the plan subject to the satisfactory completion of the necessary actions by the Trust to achieve financial breakeven in 2007/08. Mr Sullivan in particular has asked the Trust to continue to work with commissioners to alleviate the Trust's deficit; to deliver a cash releasing efficiency target of £1.7m; and to make sure the Trust's spending to meet access targets does not increase the Trust's deficit.

Mrs Way said Mrs Mitchell would provide her detailed financial performance report later in the meeting and that members will be noting the Trust's financial position at end July 2007.

Mrs Way referred to the Trust's contingency plan approved at the previous Trust Board meeting and said that it was being implemented. She confirmed that fortnightly meetings of the Corporate Management Team to monitor the Trust's financial position are taking place. In addition, she said a series of meetings with frontline staff have been organised during October where members of the Corporate Management Team will explain to staff why the Trust has had to take such actions and to seek advice on other actions that can be taken to address the Trust's underlying recurring financial pressures.

In concluding, Mrs Way said that during discussion with Mr Sissling, Chief Executive Designate of the Health and Social Care Authority, he emphasised the requirement for the Trust to demonstrate increased productivity from future investment.

Assessment of Services – Tyrone County Hospital

Mrs Way referred to a workshop with the Western Board on 4 September to discuss the report detailing the Assessment of Services at the TCH. She said the Western Board proposes to discuss the report at its Board meeting on 27 September.

Mrs Way said the workshop gave Board officers the opportunity to discuss the deliverability of the proposals and to test the Trust's financial plans. Following discussion it was agreed that the Director of Finance and her Team would work closely with the Western Board's financial team to clarify the total costs for the proposals detailed in Option 1.

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At this point in the meeting the Chairman suspended Standing Orders to facilitate those who had requested speaking rights.

Ms Kelly addressed the Board. She said that she had sought speaking rights at today's meeting as she believed she had been refused the opportunity to speak at the last meeting.

In Ms Kelly's address to members she referred to:-

- Services at the Tyrone County Hospital;
- Road infrastructure; and
- Ambulance service

The Chairman thanked Ms Kelly for her address and responded to the points accordingly.

Councillor Hussey addressed the Board. He said that he would provide a copy of his presentation to Non-Executive Directors to encourage them to question the Trust Board. Councillor Hussey detailed concern in respect of the provision of the paediatric tonsillectomy service at the Tyrone County Hospital and referred to his letter to the Chief Executive in respect of a particular case.

Mrs Way responded to Councillor Hussey's statement.

5/07/3

APOLOGIES

There were no apologies received.

5/07/4

MINUTES OF PREVIOUS MEETING

The minutes of the previous meeting held on 2 August having been previously distributed were agreed as a true record.

5/07/5

MATTERS ARISING

There were no matters arising.

5/07/6

FINANCIAL PERFORMANCE REPORT

Mrs Mitchell presented to members the Trust's financial report for the 4 month period ending July 2007. She reported that the Trust was reporting a deficit of £2.47 million for this period. She also reported that the income budgets are under recovered by £11,000 for July 2007.

Mrs Mitchell advised that the Trust is reporting an overspend on its Salaries and Wages budgets of £950,000 for the period. She outlined the main areas of overspend and underspend by Directorate highlighting the significant overspends in Acute, Women and Children's Services, Adult Mental Health and Disability, and Primary Care and Older People. Mrs Mitchell assured members that each Directorate is carrying out a review of the overspends and are putting an action plan in place to address overspending budgets.

Mrs Mitchell continued by reporting on Goods and Services budgets and said that cumulatively they are overspent by £1.5 million for the 4 months ending July 2007. Again Mrs Mitchell led discussion on the main budgets that are contributing to the overspend.

Discussion continued on including more detail within the financial performance report explaining significant overspends. It was felt that members could benefit from a detailed analysis of such by individual Directors. It was noted that whilst this would not be possible for goods and services budgets it would be possible for salaries and wages overspends. Mrs Mitchell said that she would incorporate a focus on particular areas each month within her report. Mrs Way assured members that at her regular meetings with Directors she discussed their performance plans and their Directorate's financial performance.

The Chairman referred to the Trust's use and cost of agency staff. It was noted that the Trust is examining its use of agency staff in light of the contingency plan and the impact of the RPA.

Mrs Mitchell briefed members on the Trust's progress against its contingency plan. She reminded members of their agreement to the contingency plan which will reduce the Trust's

deficit to £3.3m. Mrs Mitchell reported that the outturn as at 31 July is reporting a deficit on the Trust's income and expenditure account of £2.5m compared to £1.9m as at June 2007. Mrs Mitchell reminded members that it is imperative that each Directorate contains expenditure within budgets available if the Trust is to achieve a financial balance position for 2007/08. The contingency plan will also put controls in place to control expenditure in year.

5/07/7

BUSINESS CASE ERNE HOSPITAL THEATRE PROJECT

Mr Lusby referred members to the above document. He said that the Outline Business Case had been submitted to the Department of Health, Social Services and Public Safety on 26 July 2007 recommending a preferred option of refurbishing the main theatres. Mr Lusby confirmed that the way forward is supported by the Western HSS Board.

Mr Lusby advised that given the urgency of the situation relating to the continued use of the Erne Hospital Theatres, the Trust with the support of Health Estates, has tendered the associated work. Members were referred to the tender evaluation report within their papers.

Mr Lusby briefed members on the outcome of the tender evaluation report. He summarised that the lowest tender had been subjected to a detailed analysis as part of the tender evaluation process and is considered to be fair and reasonable.

Mr Lusby advised that ongoing discussions with senior clinicians at Erne Hospital and across the Trust highlighted concerns about the reliance on 1 refurbished theatre to fully accommodate all emergencies within accepted timescales and standards. In light of this Mr Lusby said that as a result of further detailed discussion and negotiation the Trust is proposing to convert space into an emergency procedures room with scrub facilities. Applying the tendered schedule of rates it is estimated that this additional component could be accommodated within a cost of £100,000.

Mr Lusby said that conscious of the overall project cost constraints the design team has reviewed all aspects of the tender specification and it is confident that the bill of reduction savings of £75,000 can be achieved which would substantially compensate for the addition of an emergency procedures room.

In concluding Mr Lusby advised that the Trust is now seeking Departmental approval to award the contract to the lowest tenderer and in doing so authorise the design team to negotiate a bill of reductions reducing the tender sum. In addition, the Trust is also seeking approval to accommodate the necessary inclusion of an emergency procedures room at an additional overall cost.

Following consideration of the Business Case and the proposed way forward members gave the outlined way forward its full endorsement.

5/07/8

REVISED BUSINESS CASE FOR THE IMPROVEMENT TO THE EXISTING WARD ACCOMMODATION IN TYRONE COUNTY HOSPITAL

Mr Lusby advised that the paper within members' packs was a revision of the Business Case submitted to the Department of Health, Social Services and Public Safety in respect of improvements to the existing ward accommodation at Tyrone County Hospital.

Mr Lusby said the Business Case is presented as a result of the completion of an assessment of services provided at the Tyrone County Hospital. He added that this review was carried out and the report, profiling the requirements to provide assurance that Ministerial commitments regarding the provision of safe and sustainable services at Tyrone County Hospital, was submitted to the Permanent Secretary. The Trust was required to provide a revised business case for the necessary infrastructure improvements at the TCH.

Following consideration of the revised business case members approved it.

5/07/9

BUSINESS CASE FOR EXTENDING THE COMMUNITY SUPPORTED LIVING SERVICES

Mr Lusby shared with members a Business Case for extending the Community Supported Living Service within the Trust's learning disability service. He said the Trust is proposing to further develop and extend this service to address urgent unmet need for adults with a learning disability.

Members were advised that the first phase of this service was established in 1988 with integrated housing, health and social care policy. In addition, the "Supporting People" initiative came into effect in Northern Ireland on 1 April 2003 and this initiative provided a single funded framework, for a range of support services aimed at helping vulnerable people to live independently in the community. The emphasis of the new arrangements is on partnership working between the Housing Executive, Health and Personal Social Services and the Probation Board.

Mr Lusby referred members to the business case within packs and said the document contained the strategic context, analysis of need and the extension to the next phase of the supported Living Service. He added that the document evaluated all the potential options, taking into account all of the relevant factors which have significance on the financial and non-financial considerations associated with this service delivery. He concluded by commending option 4 to members.

Members were advised that the Western Health and Social Services Board has considered the outcome of the business case and as a consequence has indicated its support to proceed on the basis of the preferred option.

Following consideration of the business case and proposed way forward members endorsed the recommendation of option 4 as the preferred way forward.

5/07/10

ZERO TOLERANCE POLICY

Mrs Sheerin referred to the Department of Health, Social Services and Public Safety's campaign of "Zero Tolerance on Abuse of Staff, Protecting Healthcare and Emergency Staff from Violence", and said that the Trust is required to develop a policy by 30 September.

Mrs Sheerin confirmed the Trust's commitment to the creation of a culture and environment where employees may undertake their duties without fear of abuse or violence. She said the enclosed Trust policy is an expression of the Trust's commitment, developed in partnership with staff side, to the eradication of violence to staff at work and will be supported by detailed operational procedures. She added that when the policy is adopted it will be formally launched and disseminated widely throughout the Trust.

Discussion took place regarding the prosecution of individuals who abuse members of staff. It was noted that whilst the Trust supports staff during any prosecution that is taken forward, at present in law it remains the responsibility of the individual to make the complaint to initiate a prosecution rather than the organisation. It was noted however there was a prospect that this could change in the future to enable the Trust to initiate the prosecution on behalf of the member of staff. Trust Board would support such a change.

Members considered the policy and minor amendments were made. Subject to these, the policy was endorsed by the Trust Board.

5/07/11

ANNUAL EQUALITY PROGRESS REPORT

Equality Scheme

Mr Lusby advised members that the Equality Commission has requested all new Health and Social Care Trusts to submit a new Equality Scheme by 31 September 2007. He said the Commission presented Trusts with the option of either developing or submitting a completely new Scheme or to modify and submit an existing Scheme.

Mr Lusby said these options were discussed at a Regional Equality Steering Group meeting on 2 April and it was agreed to recommend to new Health Trusts to submit an existing Scheme that had been modified. He added that this recommendation was discussed and approved at the Western Equality Human Rights Forum meeting on 30 April. In this regard Mr Lusby shared the modified Scheme with members for approval.

Following consideration members endorsed the Trust's Equality Scheme.

New Disability Duties

Mr Lusby advised that on 1 January 2007 under Section 49A of the Disability Discrimination Act 1995, new disability duties came into effect. He said that these placed 2 additional obligations on all public authorities:-

- Promote positive attitudes towards disabled people;
- Encourage participation by disabled people in public life

In accordance with these new duties the Trust must ensure that all staff are including the new obligations in any planning of services or policy development and prepare and submit a Disability Action Plan to the Equality Commission by 31 December 2007. Mr Lusby advised that each of the legacy Trusts were required to undertake a mapping exercise to identify work that had already been carried out to address these duties. This exercise was completed by the Western Equality and Human Rights Unit on behalf of the each former Trust and submitted to the Commission on 30 March 2007.

Mr Lusby referred to the Trust's requirement to develop its Disability Action Plan. He said that the Plan will build on procedures developed under Section 75 and the Trust's Equality Scheme however it will have a narrower focus with the Trust expected to provide specific action measures. Mr Lusby referred to progress on the development of an Action Plan and measures taken to date. He said a draft Plan has been circulated to members of a working group and the Western Equality and Human Rights Forum for approval with a formal consultation period being held September to end of November.

Annual Equality Progress Report to Equality Commission

Mr Lusby advised that the annual progress reports on behalf of the 3 legacy Trusts have been completed by the Equality and Human Rights Unit and approved by the Western Equality and Human Rights Forum.

5/07/12

NORTHERN IRELAND PATIENT SAFETY FORUM

Dr Kilgallen drew members' attention to a statement from Mr Compton, Chairman of the Northern Ireland Safety Forum. She advised members that the NI Patient Safety Forum was established in June 2007 to promote a safety culture within health and social care organisations and to share best practice nationally and from around the world. She added that the Trust as a full member will contribute to and participate in the Forum's work. Dr Kilgallen is a member of the Northern Ireland Forum.

Members confirmed their support for the working of the Forum.

5/07/13

MEDICAL TRAINING APPLICATION SYSTEM – UPDATE

Dr Kilgallen reminded members that from 1 August 2007 for the first time all junior doctors were appointed through a central application system – Medical Training Application System (MTAS).

The purpose of the new System is to ensure standardisation of the appointment of junior doctors to training programmes rather than posts. The context for this is the introduction of the new policy on medical training – “Modernising Medical Careers” published in 2003. Dr Kilgallen said that all newly qualified doctors now enter a 2 year foundation programme introduced in 2005.

Dr Kilgallen said that the changes to the training system are being implemented on a phased basis and that this year has seen the second phase of change occur. She said that having completed the foundation programme, doctors are then appointed to “run through” specialty training programmes by competitive interview. The phrase “run through” refers to the fact that once appointed the doctor progresses through the specialty training programme until training is complete.

Dr Kilgallen advised that the Trust has 213 junior doctors appointed to training programmes almost all of whom commenced on 1 August 2007. 56 of these are in the Foundation Programme and the remainder in Specialty Programmes. Dr Kilgallen said that the short timescale between notification of the appointments in mid July to the doctors taking up post on 1 August was extremely challenging but the Trust’s medical personnel staff worked very hard to ensure that contracts, accommodation and other matters were addressed.

Dr Kilgallen concluded by advising that MTAS is being reviewed by a regionally established group led by Professor Hayes and that the Chief Executive is a member of the group.

5/07/14

CONFIDENTIAL ITEMS

5/07/15

ANY OTHER BUSINESS

There were no further items of business.

5/07/16

DATE OF NEXT MEETING

The next meeting of the Western Health and Social Care Trust will take place on Thursday, 4 October 2007 at 2.15 pm in Omagh.

**Mr G Guckian
Chairman
4 October 2007**