



Minutes of a Trust Board Meeting held on Thursday, 2 April 2015 at 1.00pm, Fir Trees Hotel, Dublin Road, Strabane. BT82 9EA

Present:

17-

Mr P Archer

Chairman

Professor M Hanratty Dr J Livingstone

Non-Executive Director Non-Executive Director

Mrs S McCue

Director of Finance & ICT **Director of Operations**

Mr B McNeill Dr D McManus

Ms R O'Hara

Medical Director

Director of Human Resources & Corporate Services

In Attendance:

Mrs M Crawford

Complaints & Administration Manager (T)

Mrs J Pattison

Senior Secretary (T)

Welcome and Format of the Meeting

The Chairman opened the meeting by welcoming members of the Trust Board.

1.0 **Apologies**

Mr L McIvor. Chief Executive Mr N McKinley, Non-Executive Director

2.0 **Procedure**: Declaration of potential Conflict of Interest / Pecuniary Interests Quorum.

No potential conflicts of interest/pecuniary interests were declared and the Board was confirmed as quorate.

3.0 Minutes of the Previous Meeting of the Trust Board held on 5 February 2015

With some minor amendments the Members accepted the minutes as a true reflection of discussions held on the proposal of Dr J Livingstone, seconded by Professor M Hanratty.

Action: Approved

4.0 **Action Log**

4.1 Sickness Absence

The Director of HR&CS highlighted page 91 of the Performance Report and informed Members that the previous report cited 'unclassified' as one of the major reasons for sickness. This was because General Debility was being

5.0 Chairman's Business

5.1 Visit to Castlederg Ambulance Station

The Chairman on behalf of the Board paid tribute to the staff and officers at Castlederg Station noting the enthusiasm of the staff of this rural Station. The Chairman stated that Castlederg Ambulance Station is based on the grounds of the former Derg Valley Hospital and parts of the site are derelict. The Western Health and Social Care Trust are in the process of planning the decommissioning of the site, excluding the Ambulance Station.

5.2 Chairman's Update

The Chairman gave a brief outline of his diary commitments since the last Board meeting.

5.3 Appointment of Non-Executive Directors

The Chairman informed members that the list of appointable candidates had been passed at the end of February to the Minister who will make the appointments.

6.0 Chief Executive's Business

6.1 Chief Executive's Update

In the absence of the Chief Executive the Chairman gave a brief outline of some of his activities since the last Board meeting which included the following:-

- 23 February 2015 The Chief Executive met with Chiefs of Scottish Ambulance and Republic of Ireland, and CAWT (Co-operation and Working Together) to explore joint development initiatives and European funding.
- 27 February 2015 Ministerial Visit to Ballymena Station site.
- 3 March 2015 -The Chief Executive attended e-Health steering group meeting.
- 4 March 2015 Long Service Medal Ceremony.
- 6 March 2015 The Chief Executive represented NIAS at the Quality 2020/ Donaldson Review Workshop organised by DHSSPS.
- 12 March 15 March 2015 Industrial Action activity.
- 16 March 2015 The Chief Executive briefed Permanent Secretary on Industrial Action.
- 18 March 2015 Major Incident Debrief NIAS.
- 19 March 2015 The Chief Executive attended the Unscheduled Care Learning Event – Mossley Mill. NIAS presentation on Appropriate Care Pathways work.
- 20 March 2015 Integrated Care Partnerships meeting with Sloan Harper, Director Integrated Care HSCB.
- 23 March 2015 The Chief Executive attended HSC Leadership Forum, chaired by the Permanent Secretary.

- 25 March 2015 NIAS/NIFRS Senior Leaders meeting.
- 26 March 2015 Meeting with Trade Unions follow up to Industrial Action & major Incident.

6.2 Industrial Action Update

In the absence of the Chief Executive the Director of Operations briefed the Board on the Industrial Action which occurred on 13 March 2015

At 17:00 hrs on Thursday 12 March after extensive discussions with Trade Union representatives in forecasting levels of cover from 00:01 hrs on 13 March to 23:59 on 13 March it was anticipated that the Trust would have around 50% of normal Emergency Ambulance cover regionally to meet Category A demand as a first priority.

However, late on Thursday evening (20:00) the Resource Management Centre (RMC) reported that calls had been received from staff who were due to start the night shift would be "withdrawing their labour" at midnight. It soon became evident that the Trust would not have been able to provide safe patient care from midnight and through the following 24 hours and there was no option but to declare a "major incident". This action restored cover for the 24 hours of the industrial action to a level which had been anticipated and planned for.

NIAS re-engaged with Trade Union representatives to explore the possibility of lifting the Major Incident Frame and creating an opportunity for business to resume while providing the opportunity for those who wished to participate in the Industrial Action while continuing to provide levels of cover that provide safe patient care.

Union representatives could not guarantee the required levels of cover required. It was therefore decided to continue to provide service under the major incident framework until 23:59 that evening in the interest of public safety.

The Director of HR&CS wished to thank all the Staff who attended work during this difficult period and provided Emergency Services to patients.

Dr J Livingstone thanked and congratulated the entire team for managing this delicate situation.

7.0 Performance Report 2014-15 as at 28 February 2015

In the absence of the Chief Executive the Director of Operations referred the Board to page 5 of the 2014/15 report which outlined an overview of the Strategic Aims and Objectives.

It was reported that the timeliness to 999 calls, including Cat A calls remained a concern. These issues have been highlighted to the Commissioner through established channels and the Director of Operations is working hard with the Commissioner to identify actions to address current issues and restore timeliness of performance.

The Board were referred to page 13 of the report, which outlined Delivery of Cat A Response performance in line with the Health & Social Care Board (HSCB) targets.

This remains red as Cat A Performance, is currently 52.8% against the target of 72.5%.

Operations

The Director of Operations updated members on his report. The following issues/comments were raised:

As at 28 February 2015:

- Category A Performance (Page 50), it was highlighted that Cat A calls had increased by 13.2% ie around 6,107 more calls compared to this time last year, this averaged out at around 18 more calls per day.
- 999 Calls there was a 6% increase.
- Recruitment Programme (Page 85) all vacancies have been filled.
- Fleet Business case for 5 years replacement programme has been approved
- Estates Capital Programme
 - In Enniskillen the demolition contractor is to have site cleared by end of March 2015. NIAS site investigations to commence as soon as the site is cleared.
 - In Belfast, strategic Outline Business Case to be submitted to request for a feasibility study in the Belfast Division.

Finance and ICT

The Director of Finance & ICT updated members on her report. The following issues /comments were raised:

As at the 28th February 2015:

- Members were informed that the DHSSPS timetable for preparation of year-end accounts especially using new finance systems is presenting a challenge for the small finance team.
- The Board were directed to Page 70 which relates to Financial Performance. The Director of Finance indicated that the financial position at the end of February 2015 was a small surplus of £16k and the Trust is currently forecasting a breakeven position at year-end, subject to key risks and assumptions, in particular in respect of required savings and the level of investment to support service delivery and developments. In addition, Accident & Emergency staff are currently being paid at Band 4 and band 5 on account, without prejudice and subject to the outcome of the matching process. The Trust continues with the assumption that HSCB will fund the full legitimate costs of Agenda for Change for NIAS.
- The Board were directed to Page 73 which relates to Prompt Payment of Invoices. The Director of Finance indicated that although there had been improvements in this target over the year, reaching 93.5% against 30 days or other agreed terms, the Trust will be unable to reach the target of 95% cumulative by year end. This was largely due to the days of processing lost during preparation for the implementation of the new Finance, Procurement and Logistic System. It was highlighted to the Board that this represents a similar challenge across all Health & Social Care Trusts and that reporting structures continue to be developed with a view to improving performance. The Director of Finance informed the Board that all payment processing functions were transferred to Accounts Payable Shared Services Centre in mid-December 2014.

- The Board were directed to Page 80 which related to Freedom of Information. The
 Director of Finance indicated that 80.1% of requests had been processed within 20
 working days as at the end of February 2015 and that there has been an increase
 in requests of 47% from April 2014.
- The Board were directed to Page 84 which related to Data Protection (14/15 –PRF Patient Numbers Comparison) the Director of Finance highlighted that there are 164K paper records and additional records in storage and that there was a potential risk of papers being lost. The e-PRF business case recognises the value of moving from these multiple paper records to electronic format.

Human Resources and Corporate Services

The Director of HR&CS updated members on her report. The following issues /comments were raised:

As at the 28 February 2015:

- The Board was directed to Page 87 with related to Sickness Absence. The Director of HR&CS reported that Sickness Absence was a challenge as a regional issue. It has been identified by the system calculation of sickness absence percentage, which has resulted in an apparent significant increase in sickness absence percentage across all Trusts. However the cause has now been identified and a change request process has been initiated to amend the system calculation accordingly. The process remains ongoing and percentage sickness absence figures will not be reported until the matter is resolved.
- Director of HR&CS gave a breakdown of staff sickness based on days lost and a downward trend noted was noted. Southern Division have a "Welfare Wednesday" where staff are contacted weekly, this has had an initial success and Management may roll out to other areas.
- The Board was directed to Page 101 which related to Annual Mandatory Training Workbook. The Director of HR&CS highlighted that this remains Red as the Operational Directorate were unable to release staff due to workforce pressures to complete these workbooks.
- The Board was directed to Page 106 which related to Job Evaluation. The Director
 of HR&CS highlighted that the Regional Quality Assurance Team had submitted
 questions to the Management and post holder representatives for each of the three
 Job Evaluation Questionnaires; these questions have been answered and
 submitted back to the Regional Quality Assurance Team. The Trust awaits an
 outcome.

<u>Medical</u>

The Medical Director presented his report. The following issues were discussed:

As at 28 February 2015:

- Emergency Planning Report (Page 122).
- The Medical Director advised the Board that the Trust was performing well in relation to the performance measures for patients with actual or suspected stroke with, for example, 100% compliance with the FAST assessment, and also meeting the targets for transportation within the agreed timeframes to hospitals that can

provide stroke assessment and lysis if appropriate. He thanked the Clinical Support Team for their work in monitoring and reviewing the Trust response in relation to stroke.

 The Medical Director explained to Trust Board the basis for the regional targets for the administration of thrombolysis to patients with an acute stroke who are eligible for it and potential future developments in the treatment of acute stroke.

8.0 <u>Items for Approval</u>

8.1 Savings Proposal 2015 -16

The Director of Finance briefed Members on the paper. The Trust Board was asked the following:

- 1) to consider these proposals and indicate if it approves them
- 2) to authorise that approval be sought from HSCB to embark on a consultation where appropriate
- 3) to approve a full engagement programme with key stakeholders for these proposals.

The Trust Board approved all these elements. Approved by Dr J Livingstone, seconded by the Chairman.

Action: Approved

8.2 Governance Self-Assessment Return 2014/15

Dr Livingstone highlighted to the Board some minor adjustments that had to be made and that a short paragraph on the Declaration of the Major Incident on the 13 March 2015 would also be included on Page 72.

Chairman thanked Dr Livingstone on behalf of Trust Board for the time he has spent on the action plan.

Approved by Professor M Hanratty, seconded by the Chairman.

Action: Approved once minor adjustments have been made.

8.3 Appropriate Referral & Transport Policy

The Medical Director presented this Policy to Trust Board for approval.

Approved by Dr J Livingstone, seconded by Professor M Hanratty.

Action: Approved

8.4 Whistle Blowing Policy

The Director of Human Resources and Corporate Services presented this Policy to Trust Board for approval.

Approved by Dr J Livingstone, seconded by Professor M Hanratty.

Action: Approved

8.5 Complaints Policy

The Director of Human Resources and Corporate Services presented this Policy to Trust board for approval.

Approved by Dr J Livingstone, seconded by Professor M Hanratty.

Action: Approved

8.6 Audit Committee – Terms of Reference

The Director of Finance presented the Audit Committee – Terms of Reference to Trust Board for approval.

Approved by Dr J Livingstone, seconded by Professor M Hanratty.

Action: Approved

9.0 <u>Items for Information</u>

None

10.0 Items for Noting

10.1 Minutes from Audit Committee meeting held 19 January 2015

Noted.

10.2 Minutes from Assurance Committee meeting held 19 January 2015

Noted.

10.3 Charity Status for Charitable Trust Funds

Noted.

10.4 Patient Stories (Western Area)

Noted.

11.0 Application of Trust Seal

The Trust Seal was used on the 9 March 2015 for the Enniskillen Project.

13.0 Forum for Questions

No questions were received.

14.0 Any	other	Business

None

15.0 Forward Agenda

No items.

Date, Time and Venue of Next Meeting

The next meeting of the Trust Board will be held on Thursday 4 June 2015 in NIAS Headquarters, Site 30 Knockbracken Healthcare Park, Saintfield Road, Belfast.

The Chairman thanked those present for attending and called proceedings to a close.

Signed:	Edmh.		
	Chairman		
Date:	4/6/15		