

COMMITTEE ALERT, ADVICE, ASSURANCE REPORT TO BOARD

Committee:	PEOPLE COMMITTEE
Meeting Date:	28 January 2024
Chair/Report Author:	Sarah Pinch

KEY ITEMS DISCUSSED AT THE MEETING

The committee received papers on the following:

- People Dashboard and KPI's
- Pay Update
- Induction Update
- Board Assurance Framework - Risk 3
- People, Culture and Engagement Strategy
- BMA Culture of Care Action Plan
- Social Care Action Plan
- Ring Fenced Roles for Care Leavers
- Recruitment and Retention Strategy

An insightful staff story was also presented to the meeting.

It was the last Committee meeting at which Annette Baker would attend as a Health Services Consultative Committee ('HSCC') representative.

TO ALERT (Alert the Board to areas of non-compliance or urgent matters or new risks or issues that need to be escalated to DHSC or other IoM departments)

Issue	Committee concern	Action required	Timescale
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Multi-year Pay Agreement	The inability to agree a three year funding settlement was damaging to the ability to recruit and retain staff. Manx Care had no influence over what PSC employees were offered in terms of their pay awards which could disadvantage members of the workforce that were not employed by PSC.	Escalate to the Board.	06.02.24
	An Operations Performance Board had been established by Cabinet Office to look at the performance of Government departments. The Committee was concerned that Manx Care could not be measured by metrics set by a separate government department to which it had no input.	Escalate to the Board.	06.02.24
HSCC Attendance	Annette Baker had resigned as a member of the HSCC and would no longer attend the Committee. The Committee was concerned that there would be less independent oversight of its activities going forward.	Escalate to the Board.	06.02.24
ASSURE (Detail here any areas of assurance that the Committee has received)			
Issue	Assurance Received	Action	Timescale
People Dashboard	As raised at previous meetings the information contained in the people dashboard was not fit for purpose and would no longer be presented to the Committee. Instead the People data from the IPR and a new set of KPI's for shared services would be presented going forward.	For noting.	06.02.24
Ring Fenced Roles for Care Leavers	Work was ongoing to make having a care experience a protected characteristic under equality legislation. Whilst this would take approximately two years to achieve a framework would be put in place to enable Manx Care to role model what could be achieved when the legislation was introduced.	For noting.	06.02.24

Recruitment and Retention Strategy	The strategy had been developed in conjunction with OHR and complemented the Recruitment and Selection Policy. The strategy would now be consulted upon by staff side groups.	For noting.	06.02.24

COMMITTEE ALERT, ADVICE, ASSURANCE REPORT TO BOARD

Committee:	AUDIT COMMITTEE
Meeting Date:	1 February 2023
Chair/Report Author:	Nigel Wood

KEY ITEMS DISCUSSED AT THE MEETING

Your Committee discussed the Board Assurance Framework including the Information Governance Risk, Risk Manager’s Report, Clinical Audit Update, Audit Advisory Division Update.

The Committee reviewed the minutes and outstanding actions from all the Board sub-committee’s.

TO ALERT (Alert the Board to areas of non-compliance or urgent matters or new risks or issues that need to be escalated to DHSC or other IoM departments)

Issue	Committee concern	Action required	Timescale

ASSURE (Detail here any areas of assurance that the Committee has received)

Issue	Assurance Received	Action	Timescale
Clinical Audit	There continued to be a lack of engagement with the clinical audit plan. The Interim Medical Director would encourage participation amongst medical colleagues.	For noting	06.02.24
Audit Advisory Update	The scheduled of planned audits remained on track. An update on the Patient Flow Audit was provided to the meeting.	For noting	06.02.24

	Going forward each audit would be assigned an executive level sponsor. If no response was being received AAD would contact the Board Secretary who would add the audit to the Executive Leadership Team agenda.		
Board Assurance Framework	The IG risk would be presented to the Board and if approved added to the BAF. The IG risk had been monitored by the Digital and Informatics Committee and would continue to be monitored by the committee. The volume and complexity of SAR's and FOI's was increasing.	For noting	06.02.24
Committee Minutes and Actions	All board sub-committee minutes and action logs were reviewed by the Committee.	For noting.	

COMMITTEE ALERT, ADVICE, ASSURANCE REPORT TO BOARD

Committee:	FINANCE, PERFORMANCE & COMMISSIONING COMMITTEE
Meeting Date:	1 FEBRUARY 2023
Chair/Report Author:	Nigel Wood

KEY ITEMS DISCUSSED AT THE MEETING

- **December Management Accounts**
- **Winter Pressures**
- **Consultant Appointments**
- **Board Assurance Framework, Risks 2,4 and 6**
- **Integrated Performance Report**
- **Performance and Accountability Reviews**
- **Contract Management Framework**

The following minutes were also reviewed:
 Business Case Review Group – 10 January 2024
 CIP Programme Board – 24 January 2024
 Policy, Strategy and Commissioning Forum – 25 January 2024
 Capital Assurance Group – 26 January 2023

TO ALERT (Alert the Board to areas of non-compliance or urgent matters or new risks or issues that need to be escalated to DHSC or other IoM departments)

Issue	Committee concern	Action required	Timescale
December Management Accounts	Due to the number of risks identified from November which have now been investigated further the forecast has been moved by	Escalation to the Board.	05.02.24

	(£3.2m) to an overspend position of (£34.8m) however if all the business cases are approved from the Reserve Fund the operational forecast would reduce to (£28.4m).		
Contracts Management Framework	The document set out the approach to contract management across Manx Care. It detailed the contract lifecycle with a focus on the contracting element whilst acknowledging the clear interface with a cohesive strategic and tactical commissioning function between DHSC and Manx Care. The framework would be used for all Manx Care contacts going forward.	Escalation to the Board.	05.02.24
ASSURE (Detail here any areas of assurance that the Committee has received)		Action	Timescale
Winter Pressures	The winter plan was operating well. A new locum GP was seeing an additional 25 patients each day. There were reasonable levels of discharge through the 7 day period and this was because of the introduction of therapists being available at weekends. Intermediate Care would not formally launch until 25 March however the benefits were already starting to be seen with patients being discharged and looked after in their own homes by the intermediate team.	For noting.	05.02.24
Consultant Recruitment	All but one substantive medical consultant appointments had now been recruited to which not only lessened spend on agency staff but more importantly resulted in a permanent and stable team.	For noting.	05.02.23
Board Assurance Framework, Risks 2,4 and 6	The risks were reviewed. There had been no changes to the risks scoring.	For noting.	05.02.23
Integrated Performance Report (IPR)	Changes were being made to the IPR to make it more easily digestible. Work on automation of data was continuing.	For noting.	05.02.23
Performance and Accountability Reviews.	These continued to be held either on a monthly or bi-monthly basis for each care group. The focus of each meeting was on performance, finances, risks and CQC compliance.	For noting.	05.02.23

COMMITTEE ALERT, ADVICE, ASSURANCE REPORT TO BOARD

Committee:	DIGITAL AND INFORMATICS COMMITTEE
Meeting Date:	26 January 2024
Chair/Report Author:	Katie Kapernaros

KEY ITEMS DISCUSSED AT THE MEETING

Your Committee received comprehensive papers covering:

1. GTS Shared Performance
2. BCS In-flight Projects
3. Business Intelligence and Data Quality Group
4. Manx Care Record
5. Information Governance
6. Cyber Table Top Update
7. Clinical Informatics
8. Live Systems

TO ALERT (Alert the Board to areas of non-compliance or urgent matters or new risks or issues that need to be escalated to DHSC or other IoM departments)

Issue	Committee concern	Action required	Timescale
Manx Care Record/Digital Remediation	Manx Care Record – Uncertainty remains. The need for a single patient record has been explicitly stated in the CQC report and, more recently, the COVID Review. In addition there have been several Serious Incidents recently which could have probably been avoided had a single record been in place.		

	11 of the 15 risks on the D&I risk log are linked to either Manx Care Record or the need for DHSC funding for the digital remediation project. The level of risk can only increase until a solution is in place.		
ASSURE (Detail here any areas of assurance that the Committee has received)			
Issue	Assurance Received	Action	Timescale
GTS Shared Service Performance	4 P1s out of SLA in the two month period. Planning underway for Windows 11 upgrade – equipment known to be incompatible will be prioritised but still around 25 Windows 7 PCs in operation as funding has not been available to upgrade to Windows 10.	For noting	
BCS In-flight Projects	Six projects in progress, of which lab system replacement is nearing closure. No concerns from a patient safety perspective.	For noting	
Business Intelligence, Clinical Coding & Data Quality Group	Resource has been recruited to assist in completion of data set development and work is underway to establish access to Manx Care records in the OHR system. Clinical Coding audits are becoming more thorough and are reporting good accuracy rates. Future reports will include HRG codes. Issue around legal vires in respect of the data warehouse has been resolved.	For noting	
Manx Care Record	See escalation above. The Committee recommends the establishment of a focus group (possibly to include MHK representation) for the purpose of public engagement funded from the £385K approved by Treasury for the development of a	For noting	

	<p>detailed business case for the Manx Care Record.</p> <p>Discussions have commenced with firms specialising in EPR business cases.</p>		
Information Governance Advisory Board (IGAB)	<p>IGAB minutes noted that Manx Care is aiming for Category 3 DSPT accreditation this year and Category 1 in 2025 however mandatory training continues to be an issue. D&I proposed that Executive support be provided in respect of training via ELT.</p> <p>The KPMG re-audit is nearing completion and a much improved position compared to the initial audit is evident although there is still much work to do.</p>	For noting	
Information Governance	<p>There were 17 outstanding FOIs at the end of December 2023 compared to 23 at the end of November and overdue DSARs fell from 17 to 11 in the same period. There were 13 breaches in December, only one of which was reportable.</p>	For noting	
Cyber Table Top	<p>The Committee received a report on lessons learned from the recent cross-department Cyber Security Table Top exercise organised by central Government.</p> <p>Manx Care's own emergency planning exercise will take place on 24 April 2024.</p>	For noting	
Clinical Informatics Update	<p>There are no unacceptable risks awaiting control and nothing to escalate.</p> <p>There are currently on open or unresolved issues relating to Caldicott Guardian Information Governance.</p>	For noting	

Live Systems Update

Requests have been broadly consistent across the year from January to December 2023, as have response and resolution times.

Limited GTS resource is hampering progress particularly in respect of the EMIS data extract and RIO server hardware update.

Manx Care's bid for addition resource to support project work is stalled with Treasury and efforts are being made to expedite this.

For noting

COMMITTEE ALERT, ADVICE, ASSURANCE REPORT TO BOARD

Committee:	Integrated Care Partnership Committee
Meeting Date:	30 January 2024
Chair/Report Author:	Tim Bishop

KEY ITEMS DISCUSSED AT THE MEETING OF THE COMMITTEE

The purpose of this shortened meeting was to consider the Committee’s workplan for 2014 and to receive Measured Ambition, Hospice Isle of Man’s three year strategy, 2014-26.

TO ALERT (Alert the Board to areas of non-compliance or matters that need addressing urgently or new risks)

Issue	Committee concern	Action required	Timescale
Quoracy	Quoracy (in respect of NED attendance) has been an issue since April 2023.	Problem should ease once the new NEDs and Chair are settled in and able to attend more regularly.	
The role of the Third Sector	Concerns are being raised by members of the Third Sector that there is a lack of understanding by DHSC and Manx Care around who delivers exactly which services and consequently there is no vision for the future.		

ASSURE (Detail here any areas of assurance that the Committee has received)			
Issue	Assurance Received	Action	Timescale
Work Plan 2024	The outline work plan was discussed and agreed in principle for 2024	For noting	
Measured Ambition – Hospice Three Year Strategy 2024-2026	<p>In addition to the three year strategy, the Committee received a presentation by Hospice outlining the substantial improvements in service provision and financial stability during 2023.</p> <p>There followed a broader discussion regarding the role of the Third Sector, during which concerns were raised – see escalation above.</p>	For noting	

COMMITTEE ALERT, ADVICE, ASSURANCE REPORT TO BOARD

Committee:	Quality, Safety & Engagement Committee
Meeting Date:	30 January 2024
Chair/Report Author:	Tim Bishop

KEY ITEMS DISCUSSED AT THE MEETING

Your Committee received updates on the following matters:

- Child Death Review Panel- Update
- Board Assurance Framework, risks 1a and 1b
- Inspections – CQC and Ofsted
- Integrated Performance Report (November 2023)
- Report from the Operational Clinical Quality Group
- Report from the Operational Care Quality Group
- SI Report December 2023
- Mental Health Act Legislation Committee
- Safeguarding Annual Review
- Blue Light Strategy
- Ballacurn Trust
- Social Care Leadership Team and Operational Care Quality Group Terms of Reference

TO ALERT (Alert the Board to areas of non-compliance or matters that need addressing urgently or new risks)

Issue	Committee concern	Action required	Timescale
Staffing	Ongoing concern around staffing challenges particularly in medical areas and Theatres		
Lack of ED safe space	ED is deficient in Mental Health facilities in general and there is no ligature-free facility. A new designated room has been identified in ED as a safer space however funding issues are delaying progress (£40K required).		

ASSURE (Detail here any areas of assurance that the Committee has received)

Issue	Assurance Received	Action	Timescale
Child Death Review Panel (CDRP)	Dr William van der Merwe gave a presentation around the risks and challenges in the Isle of Man in respect of food allergy and risk of anaphylaxis as raised by the Child Death Review Process. The next step is an options appraisal to improve care and bridge the widening gap in care for children in the Isle of Man. The team is to be invited to present to the March Board meeting.	For noting	
Board Assurance Framework – Risk 1a and 1b	1a – Failure to Provide Safe Health Care – no change to overall rating since last review. 1b – Failure to Provide Safe Social Care – no change to overall rating since last review.	For noting.	
Inspections – CQC Action Plan Ofsted Action Plan	The Committee noted that there had been significant progress since the December update which will be reflected in the next update, although the Director of Nursing has sought Executive support in order to maintain momentum. Overall there has been significant progress and development in achieving the actions within the findings from the Ofsted Report. The majority of red rated actions require significant	For noting.	

	<p>financial input, a wider island approach or are for departments outside of Manx Care.</p> <p>Workstreams have been implemented to continue development of the plan with partner agencies.</p>		
Integrated Performance Report	<p>29 consecutive months without a never event and no SIs reported in December</p> <p>No new cases of CDiff and no medication errors with harm in December</p> <p>MCALs continues to respond to a high proportion of queries within the same day (91%)</p> <p>28 complaints were logged in December but this remains within the expected threshold.</p> <p>A new, cut-down version of the IPR is to be launched in April 2024</p>	For noting	
Report from the Operational Clinical Quality Group	The report was taken as read – nothing to escalate	For noting	
Report from the Operational Care Quality Group	The report was taken as read – nothing to escalate	For noting	
SI Report	<p>The report continues to provide assurance that there is a robust process in place to identify and report Serious Incidents in a timely manner. In addition there is assurance that a repository of themes and trends is being built from SI investigations.</p> <p>There were three RCA reports during December but no SIs declared</p>	For noting	
Mental Health Act Legislation Update	The Mental Health Act Office (MHAO) which is part of Manx Care’s Quality & Safety Team continues to work closely with the Mental Health Commission to ensure a good working relationship. The MHAO guarantees that the lines of communication are open and transparent.	For noting	

	<p>The most recent Mental Health Positional Report indicates a drop in the number of detentions. Patients' rights are being upheld and a new right procedure is to be implemented, in line with the UK.</p> <p>A new ambulance liaison group has been established and the new Right Person, Right Place initiative is expected to result in an improvement in statistics.</p> <p>A new designated room has been identified in ED as a safer space however funding issues are delaying progress (see above escalation).</p>		
Safeguarding Annual Review	<p>The Committee received the Safeguarding Annual Review 2022-23 which had already been approved by the Safeguarding Board and published.</p> <p>Attendance at Safeguarding Board meetings is good and all relevant agencies remain engaged and committed.</p>	For noting	
Blue Light Strategy	<p>The Committee received a draft Blue Light Strategy which has been agreed by the Blue Light Services and supporting stakeholders – investment in centralised Blue Light facilities is now a clear strategic objective. This work is sponsored by and sits within DHA.</p>	For noting	
Ballacurn Trust	<p>The Committee considered an Options Paper in relation to the management of Ballacurn Trust, a charitable trust owning 32 residential properties and currently managed by the DHSC. QSE supports the recommendation of the working group that the management and operation of the Ballacurn Trust on a formal footing is not feasible and that this be communicated to the DHSC</p>		

Social Care Leadership Team
and Operational Care Quality
Group Terms of Reference

Tabled for information.

Social Care Leadership Team and Operational Care Quality Group Terms of Reference	Tabled for information.		
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